

Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

- Reviewing the FY 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.
- Using the CoC Application Detailed Instructions while completing the application in e-snaps.
- Answering all questions in the CoC application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing this keep in mind:

- This year, CoCs will see that a few responses have been imported from the FY 2015 CoC Application.
- For some of the questions HUD has provided documents to assist Collaborative Applicants in completing responses.
- For other questions, the Collaborative Applicant must be aware of responses provided by project applications in their Project Applications.
- Some questions require the Collaborative Applicant to attach a document to receive credit. This will be identified in the question.
- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

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

1A. Continuum of Care (CoC) Identification

Instructions:

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

1A-1. CoC Name and Number: MD-504 - Howard County CoC

1A-2. Collaborative Applicant Name: Howard County Government

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Howard County Government

1B. Continuum of Care (CoC) Engagement

Instructions:

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

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

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

Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.

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

The CoC meets monthly to discuss funding, performance measures, and hear from homeless and crisis service providers. CoC staff meet with volunteers and homeless persons to gather knowledge and expertise to put into place workable solutions to prevent and end homelessness. 1: In December 2015 the CoC met to set funding priorities for FY2017 for the grants supporting the Plan to End Homelessness. Feedback included the limited amount of rental housing gridlocks placement into housing, but unique interventions have led hard to house persons out of homelessness. The CoC is acting on this by requesting more local subsidies and new/bonus CoC projects. 2: In 2014, the Howard County Council passed a resolution to establish a Human Trafficking Task Force. This past year, the CoC coordinated with Task Force members to refer persons being trafficked to safe housing and support services. The CoC solicited opinions to coordinate housing/services for those caught in the perils of Human Trafficking.

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

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
Office of Children Services, Howard County Department of Community Resources and Services	No	Yes	Yes
Department of Social Services	No	Yes	Yes
Howard County Public Schools	No	Yes	Yes
Voices for Children (CASAs Agency)	No	Yes	No
Grassroots Crisis Intervention Center, Inc.	No	Yes	Yes
Howard County Office of Workforce Development (Youth Services)	No	Yes	Yes
Howard Community College - Youth Services	No	Yes	Yes
Howard County Police Department (runaway program)	No	Yes	No
Howard County Department of Juvenile Justice	No	Yes	No
Building Families for Children	No	Yes	No

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

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 30, 2016	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 30, 2016.
HopeWorks of Howard County, Inc.	Yes	Yes
Howard County Hospital	No	No
Grassroots Crisis Intervention Center, Inc. (emergency shelter, mobile crisis team, walk-in counseling, info/referrals)	Yes	Yes
Humanim, Inc. (mobile crisis team, evidence based supportive employment & short term department of rehabilitation services (DORS))	Yes	No
Department of Social Services (Support Enforcement Bureau)	Yes	Yes
Office of Workforce Development - (Employment & Training - serves DV)	Yes	Yes

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

The CoC strongly encourages proposals from any eligible entity interested in applying for CoC funds. Last year, the CoC released an RFP for a new Subrecipient for CoC-funded PSH programs on the CoC website and announced at CoC meetings. Emails and phone calls were made across Maryland to CoC-leads who forwarded the RFP to widely market the competition. The CoC hosted a kick-off session for the RFP which provided an introduction to Howard County CoC's priorities, and walked through the application. Six agencies, not previous CoC-funded in Howard County, expressed interest in applying. The chosen Subrecipient was not previously CoC-funded and is currently operating 5 of the PSH projects (FFY15). For the FFY15 and FFY16 Project Applications, entities that have not been previously funded through the CoC applied for new projects. The CoC welcomes questions, offers assistance in navigating HUD questions and seeks to empower agencies to apply for funds in order for the CoC to meet its' goals.

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

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

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

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

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

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

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

The CoC Lead Agency is the Howard County Department of Community Resources and Services (DCRS). The Howard County's Consolidated Plan jurisdiction is Howard County Maryland, led by the Howard County Department of Housing and Community Development (Housing). DCRS works with Housing for with the Consolidated Plan, Annual Action Plans and the Consolidated Annual Performance and Evaluation Report (CAPER). This spring 2016, Housing completed the five year Consolidated Plan. This required extensive participation by DCRS, including drafting all homeless sections, providing HMIS data,, and participating in community planning meetings. The DCRS and Housing's partnership requires a minimum of at least 24 meetings (2-3 times a month) a year to coordinate funding streams to best meet the needs of Housing and the CoC's goals. A staff of DCRS (CoC) also participated in the Review panel for the CDBG public service and HOME applications which increased participation and sharing of expertise.

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

Howard County is not a formula jurisdiction for ESG. DCRS, the CoC Lead Agency, is a Grantee of ESG from the State of MD. DCRS is a Grantee and follows the federal guidance for ESG allocations and evaluation of activities. All ESG applications, reports, and monitoring is reviewed by the ERA Committee of the CoC Board. This ensures performance measures and outcomes match the standards set in applications, regulations, and grant agreements. ESG subgrantees participate in the coordinated system, enter data into HMIS, and participate in CoC meetings. DCRS solicits proposals from entities that have not received ESG funds previously. The ERA works to ensure that ESG funds are used to meet the needs of those experiencing homelessness, and reallocates funds to decrease the number of persons experiencing homelessness. Training is offered ongoing and as needed by DCRS for newly funded activities to support agencies in their role as Subgrantees.

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

The CoC has one victim service provider-HopeWorks of Howard County, Inc.

(HW). HW does not receive CoC-funds, but does receive ESG (Shelter & Rapid Rehousing) and State shelter funds. HW receives VAWA and VOCA dollars, and is strictly prohibited from sharing client data in HMIS. To report successful exits from shelter to measure system-wide performance, HW enters anonymous data into ServicePoint. HW has three safe houses for persons with children who are experiencing domestic, intimate partner and/or sexual violence. All houses are securely located and confidential. For households entering permanent housing, HW works with landlords in the community and a Housing Locator (County-funded for CoC agencies) to find a safe home, with the client leading the placement. Notably, HW honors client choice in housing location and offers counseling for victims, children and abusers, legal advocacy/representation, 24/7 helpline, outreach/community education, hospital accompaniment and a pet program.

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
Howard County Housing Commission	24.00%	Yes-HCV

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

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

The CoC has non-CoC, ESG or HCV housing programs that create subsidized or low-income housing opportunities and target homeless populations: A County program provides PSH to 18 homeless households; A faith-based nonprofit provides PSH to 1 chronically homeless family; A local flex fund provides step down housing assistance and served 245 homeless households in LFY16; A United Way program houses homeless families through a year long step down subsidy; One house was acquired through CDBG to serve youth aging out of foster that are homeless; SSVF provides first month rent & move-in assistance

to homeless veterans; The State Rental Assistance Program (RAP) provides a monthly subsidy to low-income persons, matched with County funds through the PHA; HOME funds were awarded to the only CHDO in County for 3 houses creating low-income housing; CDBG is funding a Fair Housing project to engage landlords for low-income persons to create housing for homeless/low-income households.

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

Engaged/educated local policymakers:	☒
Engaged/educated law enforcement:	☒
Implemented communitywide plans:	☒
No strategies have been implemented	☐
Other:(limit 1000 characters)	
	☐
	☐
Engage and work with police officers for biannual street count for PIT	☒

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

Foster Care:	☒
Health Care:	☒
Mental Health Care:	☒
Correctional Facilities:	☒
None:	☐

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

Foster Care:	☒
Health Care:	☐
Mental Health Care:	☒
Correctional Facilities:	☒
None:	☐

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

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

We are working to increase the stock in housing options for persons experiencing homelessness to ensure persons exiting health care institutions are not discharged into homelessness whether they are literally homeless or at-risk. The Health Dept. provides substance abuse treatment and works with persons on a rehousing plan upon exiting their programs. The one emergency shelter and one domestic violence shelter work intimately with the local hospital on homeless and DV persons who are in treatment at the hospital to ensure they are connected to appropriate shelter upon leaving. We are using CoC planning funds to update the Plan to End Homelessness, where it is identified to bolster the CoC's coordination with all institutions to ensure discharge to homelessness is not an option.

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

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

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

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

The CoC has a single point of entry (SPE), where households' homeless status is determined and a standard assessment is completed. Information on crisis, homeless history, and vulnerabilities are gathered to prioritize for services. The SPE is operated by the CoC's crisis response provider, and staff administering the assessment are well equipped to help households problem solve. Relationships with partners allow direct connections to addictions and DV services, and homeless support in public schools. Diversion ensures households have accessed/exhausted personal and mainstream resources before entering the homeless system and Brief Case Management is offered for households who can resolve their housing crisis within 30 days. Remaining households are referred to prevention and rehousing services based on need, vulnerability, and specific expertise and eligibility requirements of providers in the CoC. All shelter and PSH units are filled through the coordinated entry process.

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

enter the information in the blank text box, click "Save" at the bottom of the screen, and then select the applicable checkboxes.

Organization/Person Categories	Participate s in Ongoing Planning and Evaluation	Makes Referrals to the Coordinate d Entry Process	Receives Referrals from the Coordinate d Entry Process	Operates Access Point for Coordinate d Entry Process	Participate s in Case Conferenci ng	Does not Participate	Does not Exist
Local Government Staff/Officials	☒	☒	☐	☐	☐	☐	☐
CDBG/HOME/Entitlement Jurisdiction	☒	☒	☐	☐	☐	☐	☐
Law Enforcement	☐	☒	☐	☐	☐	☐	☐
Local Jail(s)	☒	☐	☐	☒	☒	☐	☐
Hospital(s)	☐	☒	☐	☐	☐	☐	☐
EMT/Crisis Response Team(s)	☒	☒	☐	☐	☐	☐	☐
Mental Health Service Organizations	☐	☒	☐	☒	☐	☐	☐
Substance Abuse Service Organizations	☐	☒	☒	☐	☐	☐	☐
Affordable Housing Developer(s)	☒	☒	☒	☐	☐	☐	☐
Public Housing Authorities	☒	☒	☒	☐	☐	☐	☐
Non-CoC Funded Youth Homeless Organizations	☒	☒	☒	☐	☒	☐	☐
School Administrators/Homeless Liaisons	☒	☒	☒	☐	☒	☐	☐
Non-CoC Funded Victim Service Organizations	☒	☒	☐	☐	☐	☐	☐
Street Outreach Team(s)	☒	☒	☐	☐	☒	☐	☐
Homeless or Formerly Homeless Persons	☒	☐	☐	☐	☐	☐	☐
Case Management Providers (ie: Bridges, Family and Children Services)	☒	☒	☒	☐	☒	☐	☐
Emergency Shelter Providers (DV and General)	☒	☒	☒	☒	☒	☐	☐
Office of Workforce Development	☒	☒	☒	☐	☒	☐	☐

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

Instructions

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

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

How many renewal project applications were submitted in the FY 2016 CoC Program Competition?	6
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	0
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2016 CoC Program Competition?	6
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%

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

Performance outcomes from APR reports/HMIS:	
% permanent housing exit destinations	☒
% increases in income	☒
Monitoring criteria:	
Utilization rates	☒
Drawdown rates	☒
Frequency or Amount of Funds Recaptured by HUD	☒
Need for specialized population services:	

Youth	☒
Victims of Domestic Violence	☒
Families with Children	☒
Persons Experiencing Chronic Homelessness	☒
Veterans	☒
None:	☐

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

The CoC adopted HUD's Notice-CPD-14012 in summer 2015, to ensure household's severity of service needs and vulnerabilities determine placement in programs that are needed to end their homelessness. All Project Applications are Housing First committed and seek to place the hardest to house in our community. When a vacancy occurs, the CoC follows a process that includes scanning the wait list for the most vulnerable household that fits the unit configuration to be filled. After households are forwarded for placement into the unit, a Review Panel is convened. The Review Panel comprised of 6 representatives review households based on the Order of Priority based on type of unit available. Because the PSH inventory in our CoC is small compared to need, the CoC is committed to prioritizing those with the most severe service needs for rarely available units in an effort to decrease risk of lethality and homeless duration.

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

Announcement of 2016 NOFA and deadlines was posted on Howard County's CoC website and emailed to the CoC on 7/14/16. The Project Application criteria for review/ranking/reallocation described in the CoC Policy and Procedures is always posted to the CoC website. Applications were sent to Subrecipients on 07/21/2016. The BONUS LOI was sent on 08/08/2016, immediately after notification of BONUS amount was made by HUD. Project Applications deadline was 8/15/16. ERA Committee met on 8/25/16 to review/rank/reallocate applications. Applicants were notified of on 8/26/15, within 15 days of HUD's deadline. All final project decisions were emailed to the CoC and Project Applicants and was posted on the County website on

8/26/16.

1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2016 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached). 09/01/2016

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

1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.) 08/26/2016

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

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

Instructions

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

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

The CoC monitors subrecipients at least annually; the date, time and location are mutually agreed upon, and checklists are provided ahead of time. Monitors open with a pre-monitoring meeting to review the scope. The Monitors then document, gather and analyze all information from checklists, Grant Agreement(s), and APRs. Monitors randomly select client files to check household eligibility, income and rent calculations and other items specified in the original HUD award. The Monitors ask the Subrecipient if they have comments, or would like additional information. Afterwards, an exit meeting is held. This is an opportunity to review concerns of potential findings in person and discuss. Within 45 days receipt of all documentation, Monitors issue the final report. A 30 day period to make any corrections is granted. Technical assistance, including templates, guides, regulations, and meetings are offered.

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

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

Yes

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

3-5

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

Yes

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

Yes

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

ServicePoint

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

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

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

Instructions

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

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

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

2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$0
ESG	\$0
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$0

2B-2.2 Funding Type: Other Federal

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

2B-2.3 Funding Type: State and Local

Funding Source	Funding
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City	\$0
County	\$86,295
State	\$0
State and Local - Total Amount	\$86,295

2B-2.4 Funding Type: Private

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

2B-2.5 Funding Type: Other

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

2B-2.6 Total Budget for Operating Year	\$86,295
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2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

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

2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy): 05/02/2016

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

Project Type	Total Beds in 2016 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	193	12	181	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	30	23	7	100.00%
Rapid Re-Housing (RRH) beds	0	0	0	
Permanent Supportive Housing (PSH) beds	98	0	98	100.00%
Other Permanent Housing (OPH) beds	0	0	0	

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

Not Applicable. Bed coverage is 100%.

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

VA Grant per diem (VA GPD):	☐
VASH:	☐

Faith-Based projects/Rescue mission:	☐
Youth focused projects:	☐
Voucher beds (non-permanent housing):	☐
HOPWA projects:	☐
Not Applicable:	☒

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

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

Instructions:

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

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

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	1%	2%
3.3 Date of birth	0%	0%
3.4 Race	2%	0%
3.5 Ethnicity	1%	1%
3.6 Gender	0%	0%
3.7 Veteran status	0%	0%
3.8 Disabling condition	1%	0%
3.9 Residence prior to project entry	2%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	0%
3.15 Relationship to Head of Household	10%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	7%	0%

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

CoC Annual Performance Report (APR):	☒
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	☒
Annual Homeless Assessment Report (AHAR) table shells:	☒
	☐

None	☐
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2D-3. If you submitted the 2016 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?

12

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

Monthly

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

Both Project and CoC

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

VA Supportive Services for Veteran Families (SSVF):	☐
VA Grant and Per Diem (GPD):	☐
Runaway and Homeless Youth (RHY):	☐
Projects for Assistance in Transition from Homelessness (PATH):	☒
	☐
None:	☐

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

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

Instructions:

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

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

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

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

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

2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX: 04/01/2016
(mm/dd/yyyy)

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

Instructions:

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

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

Complete Census Count:	☒
Random sample and extrapolation:	☐
Non-random sample and extrapolation:	☐
	☐

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

HMIS:	☒
HMIS plus extrapolation:	☐
Interview of sheltered persons:	☒
Sample of PIT interviews plus extrapolation:	☐
	☐

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

The sheltered PIT count is reported through HMIS. All of the sheltered providers (with the exception of Domestic Violence provider, which provides aggregate numbers) enter into HMIS. At the time of the PIT, agencies are reminded of the

upcoming count and asked to confirm that all information in the system is correct and current for 100% of program participants.

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

There was no change in the sheltered PIT count methodology.

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

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

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

Instructions:

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

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

Training:	☒
Follow-up:	☒
HMIS:	☒
Non-HMIS de-duplication techniques:	☒
	☐

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

There was no change in the implementation of the sheltered PIT count.

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

Instructions:

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

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

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

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

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

2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy): 04/01/2016

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

Instructions:

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

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

Night of the count - complete census:	☐
Night of the count - known locations:	☐
Night of the count - random sample:	☐
Service-based count:	☒
HMIS:	☒
	☐

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

A service-based count was conducted at the Day Resource Center where unsheltered homeless household present for food, clothing, medical, and other services. Surveys/interviews were conducted with all that presented. The surveys were manually de-duplicated and entered into HMIS for an additional check for duplication.

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

(limit 1000 characters)

In 2015, the CoC did an expanded count, including a resource fair and street count in addition to the service-based count, to determine if the numbers typically collected at the service-based count fairly and accurately reflect the homeless population within the CoC. Only 8 individuals were found during those activities that did not present for the service-based count. It was determined to do the expanded count biannually as a continuous check to ensure the population continues to be counted correctly.

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

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

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

Instructions:

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

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

Training:	☒
"Blitz" count:	☐
Unique identifier:	☒
Survey questions:	☒
Enumerator observation:	☒
	☐
None:	☐

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

Additional training was provided to the surveyors/interviewers than in previous years to ensure their understanding of all questions was clear and they could assist those they were interviewing in answering all questions. All other steps to ensure data quality remained the same due to the fact that data quality has been very good in the past.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

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

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

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	166	214	48
Emergency Shelter Total	87	201	114
Safe Haven Total	0	0	0
Transitional Housing Total	36	4	-32
Total Sheltered Count	123	205	82
Total Unsheltered Count	43	9	-34

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

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

	Between October 1, 2014 and September 30, 2015
Universe: Unduplicated Total sheltered homeless persons	312
Emergency Shelter Total	307
Safe Haven Total	0
Transitional Housing Total	9

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

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

(limit 1000 characters)

The CoC has established goals; one is to reduce the number of individuals/families becoming homeless for the first time. The CoC has a Single Point of Entry for all persons experiencing homelessness, and three additional points of entry for Prevention and Diversion. Diversion serves households who are becoming homeless for the first time with shallow assistance to keep them stable. We are analyzing shelter demographics to identify common risk factors of becoming homeless to inform the update to our Plan to End Homelessness. The coordinated assessment uses the Self-Sufficiency Outcomes Matrix to assist in deciphering levels of vulnerability and severity of service need, and asks if the household is first time homeless. These outputs reported monthly on a county-wide dashboard, which is used to track if more/less persons are first time homeless and informs program design in the CoC to meet the needs of first time homeless.

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

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

(limit 1000 characters)

The CoC places persons who are homeless in housing as quickly as possible. There is a local flex fund used to rehouse homeless households with move-in/step down subsidies. We have a Landlord Guarantee Program to incentivize landlords to lease to homeless persons. A United Way program reduces the length of time persons are homeless by rehousing them in 30 days. ESG Rapid Rehousing programs are in place: one in Reentry Program and one in DV Shelter and houses households quickly. Outreach program identify people with the longest length of homelessness and enter information into ServicePoint so they are eligible for housing opportunities to end their homelessness. The CoC follows the Order of Priority for all PSH placements which reduces the length of time persons who have the longest history of homeless by prioritizing those with the longest histories first for housing. As people with the longest length of time homeless are housed, the overall length of time is reduced.

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

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

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

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

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	9
Of the persons in the Universe above, how many of those exited to permanent destinations?	9
% Successful Exits	100.00%

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

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	70
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	70
% Successful Retentions/Exits	100.00%

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

All housing placements are client-directed, supported with first month's rent and short-term rental subsidy. Households are provided stabilizing supports through Housing Stability Case Planning to maintain housing upon placement. All households engaged through case management are supported with referrals to a county-funded Housing Specialist who works with landlords to accept homeless households, a Landlord Guarantee Program is offered for clients with poor rental/credit history. Case managers connect to Office of Workforce Development to increase household earned income, and assist households to apply for eligible mainstream benefits to decrease the number of those returning to homelessness. The CoC tracks the number of all households returning to homelessness, at coordinated system entry points, and returns to shelter is tracked in HMIS.

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

(limit 1000 characters)

CoC Program funded-projects have policies and procedures to ensure eligible members of each household are connected to employment or training opportunities to improve household earned income, and mainstream benefits (non-employment sources). CoC-funded programs ensure all persons who may qualify for SSI/SSDI are referred to a certified SSI/SSDI Outreach, Access, and Recovery Technical Assistance (SOAR) outreach worker. There are SOAR certified personnel at Humanim, Inc. the Subrecipient agency providing case manager to all CoC-projects. There is also a Benefits Specialist at Humanim who assists in navigating benefits applications and obtaining needed supports. The Howard County Office of Workforce Development partners with CoC-projects to support households to obtain or maintain employment.

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

(limit 1000 characters)

Howard County Office of Workforce Development (OWD) receives referrals through HMIS to provide assistance to homeless households to obtain/maintain employment. The Department of Corrections (DOC), has connections with employers, providing consistent and successful placements for persons exiting detention who meet the Category 1 definition of homeless. Employers include: BelAir Produce, Mobern Electrical, Entertainment Playground, Boston Market, Rahll Produce, Truck Stop, Subway, Taco Bell, and Wendy's. The CoC Board started an awards program for employers in Howard County who support increasing household self-sufficiency and alleviating poverty with conscientious hiring practices. For the past three years, businesses located in the County have been honored, and the County has acknowledged their dedication through this award program. In 2015-2016, the following businesses won the Award: Edward G. Rahll and Sons, Hungry Harvest, Neighbor Network, Subway, and Tino's Italian Bistro.

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

(limit 1000 characters)

The 2016 unsheltered county was service based due to weather conditions and the fact that the 2015 count, which canvassed the entire county without exclusion, did not produce a significant number of people that did not present for service at the county's Day Resource Center.

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

Yes

disasters)?

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

The 2016 unsheltered county was service based due to weather conditions and the fact that the 2015 count, which canvassed the entire county without exclusion, did not produce a significant number of people that did not present for service at the county's Day Resource Center.

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

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

Not Applicable.

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

Objective 1: Ending Chronic Homelessness

Instructions:

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

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

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

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

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	28	28	0
Sheltered Count of chronically homeless persons	11	24	13
Unsheltered Count of chronically homeless persons	17	4	-13

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

The 2016 PIT occurred during a historic blizzard and persons that were unknown to the CoC presented for shelter. Additionally, persons from outside of our CoC jurisdiction were sheltered during the week of the PIT and due to the nature of the emergency, no one was turned away for sheltering. This increased the total number of persons counted in the PIT which impacted the number of those experiencing chronic homelessness. Each year we are improving our data collection and outreach methods which had a direct impact on the number of persons that programs involved in the PIT were able to reach during the blizzard.

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

	2015	2016	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	30	51	21

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

Each year we are improving our data collection at program levels for PSH projects and this year were able to achieve a high data quality with capturing the number of persons who were chronically homeless upon entering a PSH program, and a few units were turned over which prioritized chronically homeless families which also impacted the number of beds dedicated for use by chronically homeless persons.

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

Yes

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

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**the page(s) for all documents where the
Orders of Priority are found.**

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

This question will not be scored.

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

Outreach programs in the CoC are entering all data of persons experiencing literally homelessness and are tracking the number and length of homeless episodes to document according to the new definition of chronic homelessness effective in January 2016. Additionally, the CoC has adopted the Order of Priority which will be used in all turned over beds for CoC-funded projects. A new permanent supportive housing project for formerly chronically homeless singles is currently under construction and will consist of 35 Project Based HCV. The contractor anticipates a completion date of June 2017. Volunteers of America Chesapeake will provide on-site support services to residents. The CoC is under contract with CSH to update the Plan to End Homelessness. In this update, a strong focus will be on unique supportive housing funding models to assist the CoC to end chronic homelessness by 2017 in context of the above listed efforts underway.

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

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

Instructions:

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

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

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

Vulnerability to victimization:	☒
Number of previous homeless episodes:	☒
Unsheltered homelessness:	☒
Criminal History:	☒
Bad credit or rental history (including not having been a leaseholder):	☐
Head of household has mental/physical disabilities:	☒
Disability of a child in the household	☒
	☐
N/A:	☐

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

The CoC has programs that rapidly rehouse families within 30 days of becoming homeless. The Shelter Diversion program houses families within 30 days of homelessness. Flexible Financial Assistance (FFA) local grant functions as Rapid Rehousing, and tracks family placement and outcomes. A quick placement is made for families while a plan is created to identify a permanent housing solution. The CoC was awarded State ESG funds for Rapid Rehousing. Two agencies operate Rapid Rehousing – one agency for domestic violence survivors with children, and one for persons exiting detention which will accept households with children. At the time of the 2016 HIC the ESG-RRH programs were not operating; so the answer for 3B-2.3 will not represent rapid rehousing activities in our CoC during this fiscal year; the State Agreements for ESG became available in late spring 2016. The Housing Locator position works on behalf of households in the CoC to quickly rehouse them once they present as homeless.

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

	2015	2016	Difference
RRH units available to serve families in the HIC:	0	0	0

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

CoC policies and procedures prohibit involuntary family separation:	☒
There is a method for clients to alert CoC when involuntarily separated:	☒
CoC holds trainings on preventing involuntary family separation, at least once a year:	☐
Shelter providers provide accommodations if family members will not be able to be served in room configuration through motel/hotel sheltering – this is an established practice with programs funded to ensure families are not denied admission due to age, sex, gender or disability	☒
	☐
None:	☐

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

PIT Count of Homelessness Among Households With Children

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	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	83	102	19
Sheltered Count of homeless households with children:	80	100	20
Unsheltered Count of homeless households with children:	3	2	-1

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

The 2016 PIT occurred during a historic blizzard and persons that were unknown to the CoC presented for shelter. Additionally, persons from outside of our CoC jurisdiction were sheltered during the week of the PIT and due to the nature of the emergency, no one was turned away for sheltering. This increased the total number of persons counted in the PIT which impacted the number of households with children who were experiencing homelessness on the night of the count. Each year we continue to improve data collection and outreach methods which had a direct impact on the number of persons that programs involved in the PIT were able to reach during the blizzard.

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

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

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

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	☒
Increase housing and service options for youth fleeing or attempting to flee trafficking:	☒
Specific sampling methodology for enumerating and characterizing local youth trafficking:	☐

Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	☒
Community awareness training concerning youth trafficking:	☒
	☐
N/A:	☐

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

Vulnerability to victimization:	☒
Length of time homeless:	☒
Unsheltered homelessness:	☒
Lack of access to family and community support networks:	☒
Number of homeless episodes	☒
Unaccompanied youth parents/pregant	☒
N/A:	☐

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

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2105)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	20	25	5

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

(limit 1000 characters)

The number of unaccompanied youth and children, and youth-headed households with children was not lower in FY15 than in FY14. Households with larger family configuration, better assessment data and more referrals from HCPSS to gain more referrals to increase types of supports.

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

	Calendar Year 2016	Calendar Year 2017	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$0.00	\$30,000.00	\$30,000.00
CoC Program funding for youth homelessness dedicated projects:	\$0.00	\$0.00	\$0.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$0.00	\$30,000.00	\$30,000.00

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

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	22
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	18
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	25

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

In 2015, the CoC started a Youth Homeless Workgroup with the Local Children's Board and public schools. The Workgroup of 10 agencies reviewed homeless data, created a cross-comparison of homeless definitions for all McKinney-Vento providers, and hosted a Youth Homeless Symposium in April 2016 to view the film Homestretch and facilitate discussion. A panel presented and answered questions after film and panelists (workgroup members) included: school system, shelter, foster care (DSS and CASAs agency), and police working with runaways. Over 120 persons attended, and takeaways were incorporated into both the Local Children's Board and CoC plans on youth homelessness. CoC staff attends all public school Homeless Advisory Committee meetings, and provided three separate professional development presentations to Pupil Personnel Workers. The LCB has CoC representation at their monthly meetings (and vice versa) which ensure cohesive efforts to address the needs of youth in our community.

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

All CoC/ESG providers are committed to ensuring families who become homeless are informed/connected to needed education services. Providers have designated staff working with families with school age children to access education services. In CoC Policy and Procedures (P&P), providers are required to list the name of staff members who tie households to educational services, including assisting to keep children in their home school, and connecting them with pupil personnel workers for further services. To ensure that this requirement for connecting to education services is smooth for a monthly meeting (Homeless Advisory Committee) is held by the school system, which all CoC-ESG providers attend. The exchange of information between agencies makes sure all providers are informed of each other's services. The CoC-ESG programs require agencies to submit policies showing they inform homeless households of educational services. Page 22-23 of P&P included "Grant Agreement Requirements 4)(c),(d),(i): c) Policies and practices are established that are consistent with, and do not restrict, the exercise of rights provided by subtitle B of title VII of the Act and other laws relating to the provision of educational and related services to individuals and families experiencing Homelessness; d) In the case of projects that provide housing or services to families, a staff person will be designated 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 the Act; i) To take the educational needs of children into account when families are placed in housing 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."

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

The CoC has close relationships with agencies that that serve infants, toddlers and youth children. The CoC Lead Agency is a sister-office to the Office of Children and Families (OCF), and works together to ensure homeless and youth programs are coordinated. OCF provides: CARE Line, a free referral service for parents; Launch Into Learning, an early learning initiative highlights the importance of Early Years; and Parents as Teachers (PAT) program promoting school readiness and healthy development for families of children 0-5. Community Action Council of Howard County operates the county's Head

Start programs, refers and connects all Head Start families with energy assistance, food, and homeless prevention. Households seeking services at CAC who have children eligible for Head Start are referred. CAC also provides direct referrals to WIC at the Health Department, and the PAT program.

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

Objective 3: Ending Veterans Homelessness

Instructions:

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

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

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

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	6	7	1
Sheltered count of homeless veterans:	5	6	1
Unsheltered count of homeless veterans:	1	1	0

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

Each year we are improving our data collection at program levels including ways to encourage persons to answer the question if they were a veteran. The HMIS Administrator reworded as the PIT survey assessments to ensure questions were easy to understand and gave intake workers pointers on asking about veteran status in unique ways. This improved the CoCs ability to track the number of homeless veterans utilizing services and enabled all projects to achieve a high data quality with capturing the number of persons who were veterans upon entering the CoC. This included those presenting at outreach programs, emergency shelter and entering PSH programs.

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

When a veteran presents for services and an assessment is completed, referrals are made for housing, workforce development and to the VA. The VA has an outreach worker that partners with our emergency shelter and outreach programs to connect veterans in our community to services. SSVF providers come to Howard County and provide in-person case management and housing assistance to veterans. The CoC's Veteran Homelessness Workgroup includes CoC, Coordinated Assessment, HMIS, Workforce Development and County Office of Military and Veteran Affairs. One task of the workgroup is strengthening existing partnerships with VA, SSVF and Workforce. The CoC attends the State Interagency Council workgroup on ending veteran homelessness, where local best practices and regional coordination are key to identify, assess and refer homeless veterans to resources to end their homelessness. The workgroup is working to establish a comprehensive by-name list including veterans in our CoC.

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

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	7	7	0.00%
Unsheltered Count of homeless veterans:	5	1	-80.00%

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

This question will not be scored.

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

The Veteran Workgroup is strategizing on ways to house all homeless veterans known to the CoC, beginning by creating a by-name list. The Single Point of Entry works closely with the SSVF provider to link veterans with case management and housing assistance. Veterans have and will continue to be

prioritized for housing programs to assist in ending veteran homelessness by 2017, at the latest. The CoC is seeking regional and statewide technical assistance for this subpopulation by attending the Interagency Council on Homelessness workgroup for veterans. Local outreach programs in the CoC are entering all data of persons experiencing literally homelessness and are tracking the number and length of homeless episodes to document severity of service need and length of time homeless as well as veteran status. This effort by Outreach programs will assist establishing a by-name list to target resources to end homelessness for veterans.

4A. Accessing Mainstream Benefits

Instructions:

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

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

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

FY 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	7
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	7
Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

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

We are fortunate to have the Maryland Health Exchange available as the State health insurance enrollment system. The local nonprofit, Healthy Howard, works to enrolls persons in health insurance benefits. Humanim, Inc. (the subrecipient of CoC-PSH and case management provider for the CoC-S+C) connect persons they serve with Medicaid or Medicare. Humanim believes that links to health insurance is paramount to the ongoing wellbeing and housing stability for all homeless households. Humanim also has a Benefits Enrollment Specialist that works with the CoC-participants to ensure they are enrolled in mainstream

benefits including health insurance enrollment, as well as trained case managers that work on maintaining existing benefits and obtaining others. It is notable that 100% of all Project Applications in this 2016 application, bonus, renewal and new from reallocation included, are committed to maintaining a high standard (all) for PSH households to attain and/or maintain benefits.

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

Educational materials:	☒
In-Person Trainings:	☐
Transportation to medical appointments:	☒
County Support Services grant is used for bus passes and transit vouchers for clients to attend doctor appointments which is offered monthly to all CoC-funded program participants	☒
The County Shelter provides a van to transport shelter residents to doctor appointments	☒
	☐
Not Applicable or None:	☐

4B. Additional Policies

Instructions:

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

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

FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	7
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition:	7
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	100%

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

FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	7
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	7
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First:	100%

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

Direct outreach and marketing:	☐
--------------------------------	--------------------------

Use of phone or internet-based services like 211:	☒
Marketing in languages commonly spoken in the community:	☐
Making physical and virtual locations accessible to those with disabilities:	☒
Coordinated System Outreach Cards at places the homeless are known to congregate	☒
Marketing at DSS offices and MultiService Center (a co-located one-stop shop for human services supports	☒
	☐
Not applicable:	☐

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

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	0	0	0

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

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

Not Applicable

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

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

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

Not Applicable.

4B-8. Has the project been affected by a major disaster, as declared by the President Obama under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (Public Law 93-288) in the 12 months prior to the opening of the FY 2016 CoC Program Competition?

No

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

Not Applicable.

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

No

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

This response does not affect the scoring of this application.

CoC Governance:	☐
CoC Systems Performance Measurement:	☐
Coordinated Entry:	☐
Data reporting and data analysis:	☐
HMIS:	☐

Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	☐
Maximizing the use of mainstream resources:	☐
Retooling transitional housing:	☐
Rapid re-housing:	☐
Under-performing program recipient, subrecipient or project:	☐
	☐
Not applicable:	☒

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

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance

4C. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	evidence of MD-50...	09/02/2016
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	MD-504 Rating and...	09/02/2016
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes		
05. CoCs Process for Reallocating	Yes	MD-504 Process fo...	09/02/2016
06. CoC's Governance Charter	Yes	MD-504 Policy & P...	09/01/2016
07. HMIS Policy and Procedures Manual	Yes	HMIS Policies and...	07/25/2016
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA #MD023 Admin ...	09/01/2016
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	HMIS Governance C...	07/25/2016
11. CoC Written Standards for Order of Priority	No	MD-504 Order of P...	09/02/2016
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	MD-SYS PM	09/02/2016
14. Other	No		
15. Other	No		

Attachment Details

Document Description: evidence of MD-504 communication to all projects (and rejected)

Attachment Details

Document Description:

Attachment Details

Document Description: MD-504 Rating and Review Procedures

Attachment Details

Document Description: MD-504 Rating and Review Procedure: Public Posting Evidence

Attachment Details

Document Description: MD-504 Process for Reallocating - from P&P and Score Card

Attachment Details

Document Description: MD-504 Policy & Procedures - Gov Charter page 69-72

Attachment Details

Document Description: HMIS Policies and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: PHA #MD023 Admin Plan Excerpts p 1, 40-48

Attachment Details

Document Description: HMIS Governance Charter

Attachment Details

Document Description: MD-504 Order of Priority from P&P, p 27-28

Attachment Details

Document Description:

Attachment Details

Document Description: MD-SYS PM

Attachment Details

Document Description: MD-504 Policy and Procedures - Oct. 2015

Attachment Details

Document Description:

Submission Summary

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

Page		Last Updated
1A. Identification		08/11/2016
1B. CoC Engagement		Please Complete
1C. Coordination		09/02/2016
FY2016 CoC Application		Page 62
		09/02/2016

1D. CoC Discharge Planning	09/01/2016
1E. Coordinated Assessment	09/01/2016
1F. Project Review	09/01/2016
1G. Addressing Project Capacity	09/01/2016
2A. HMIS Implementation	08/11/2016
2B. HMIS Funding Sources	08/17/2016
2C. HMIS Beds	09/01/2016
2D. HMIS Data Quality	08/24/2016
2E. Sheltered PIT	08/17/2016
2F. Sheltered Data - Methods	08/23/2016
2G. Sheltered Data - Quality	08/23/2016
2H. Unsheltered PIT	08/23/2016
2I. Unsheltered Data - Methods	08/24/2016
2J. Unsheltered Data - Quality	08/24/2016
3A. System Performance	09/01/2016
3B. Objective 1	09/02/2016
3B. Objective 2	09/01/2016
3B. Objective 3	09/01/2016
4A. Benefits	09/01/2016
4B. Additional Policies	09/01/2016
4C. Attachments	Please Complete
Submission Summary	No Input Required

Howard County Government

Continuum of Care Policies & Procedures

Effective October 2015

Howard County Continuum of Care Policies & Procedures

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Howard County Continuum of Care Policies & Procedures

INTRODUCTION TO THE CONTINUUM OF CARE (COC)

In 1987, the McKinney Act was signed into federal legislation. This Act provided a definition of homelessness and grant funding administered by United States Department of Housing and Urban Development (HUD) to address the needs of the homeless. The McKinney-Vento Act originally consisted of fifteen programs providing a range of services for homeless people, including emergency shelter, transitional housing, job training, primary health care, education, and some permanent housing. The McKinney Act has been amended many times, but continues to provide funding for eligible homeless services across the country.

In 1995, HUD began requiring communities to submit one application for McKinney-Vento Homeless Assistance Grants. This streamlined the application process, and encouraged the coordination of housing and support services for agencies providing direct homeless services, and placed emphasis on the development of local CoCs. The Continuum of Care (CoC) is defined as *“the local planning body that coordinates housing and support services funding for homeless families and individuals.”*

In 2009, President Obama introduced the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. This Act amended and reauthorized the McKinney-Vento Homelessness Assistance Act with substantial changes. In August 2012, HUD issued the Interim Rule which provided regulations for how the HEARTH Act of 2009 would be managed and administered.

The new *Purpose and Activities* of the CoC under the Interim Rule are to:

- Promote community-wide goals to end homelessness;
- Provide funding to quickly rehouse homeless persons;
- Promote access to mainstream resources; and
- Improve self-sufficiency among people experiencing homelessness.

A few *Key Changes* under the Interim Rule included:

- Regulations on the streamlining of three programs (Supportive Housing Program, Shelter Plus Care, and Moderate Rehabilitation/Single Room Occupancy) into one program, the CoC Program;
- Renaming the Emergency Shelter Grant to the Emergency Solutions Grant and broadening existing emergency shelter and homelessness prevention activities to add rapid rehousing activities;
- Guidance for the change of the definition of homelessness and chronic homelessness; and
- Codifying the CoC Planning Process to emphasize coordination of activities in response to needs of the homeless.

New Program Components of the CoC Program under the Interim Rule are:

1. Permanent Housing
 - a. Permanent Supportive Housing
 - b. Rapid Rehousing
2. Transitional Housing
3. Support Services Only (SSO)
4. Homeless Management and Information System (HMIS)
5. Homelessness Prevention

Howard County Continuum of Care Policies & Procedures

The CoC's Primary Responsibilities under Interim Rule:

1. Operating the CoC

- Conduct semi-annual meetings of the full membership
- Issue a public invitation for new members, at least annually
- Adopt and follow a written process to select a board
- Appoint additional committees, subcommittees, or work groups
- Develop and follow a governance charter detailing the responsibilities of all parties
- Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor the performance of recipients and subrecipients, evaluate outcomes, and take action against poor performers
- Evaluate and report to HUD outcomes of ESG and CoC projects
- Establish and operate a centralized or coordinated assessment system
- Establish and follow written standards for providing CoC assistance

2. Designating and Operating an HMIS

- Designate a single HMIS
- Select an eligible applicant to manage the CoC's HMIS
- Monitor recipient and subrecipient participation in the HMIS
- Review and approve privacy, security, and data quality plans

3. CoC Planning

- Coordinate the implementation of a housing and service system within its geographic area
- Conduct a Point-in-Time count of homeless persons
- Conduct an annual gaps analysis
- Provide information required to complete the Consolidated Plan
- Consult with ESG recipients regarding the allocation of ESG funds and the evaluation of the performance of ESG recipients and subrecipients

Howard County Continuum of Care Policies & Procedures

GOVERNANCE OF THE COC

Purpose

The HEARTH Act requires CoCs to have written policies and procedures that govern the provision of assistance to individuals and families under the CoC programs, and the overall administration and operations of the CoC. These policies and procedures provide guidance to local providers and other partners, but this document is not intended to be in lieu of or in place of the Interim Rule for the HEARTH Act. The Purpose of this document is to clarify local decisions and governance.

Geographic Area

The area covered by the Howard County Continuum of Care (CoC) is the geographic boundaries of Howard County Maryland.

Board to Promote Self Sufficiency (BPSS)

Howard County Council Bill No. 23-2008 formed the Board to Promote Self Sufficiency in May 2008. The Bill established the Board to Promote Self-Sufficiency, providing for the membership, terms, officers, and staffing of the Board; setting forth the requirements for meetings and voting; authorizing the use of subcommittees and the adoption of certain Operating Procedures; providing for the purpose and responsibilities of the Board; providing the expiration dates of the terms of the initial members of the Board; providing for certain exceptions applicable to the Board; and generally relating to the Board to Promote Self-Sufficiency. The BPSS operates as the Howard County CoC Governance Board. For more information on the BPSS requirements, please see *Appendix A* of this document.

Role of Board

The BPSS oversees the work of its designated Committees, receives reports on a monthly basis from committee Chairs, and reviews initiatives developed by the CoC Lead Agency. The Evaluation and Resource Allocation (ERA) Committee is designated by the Board to serve the following functions for CoC activities:

1. Analyze data on homelessness from HMIS, PIT, and APRs;
2. Evaluate performance of the CSHS (coordinated assessment system) and individual CoC programs;
3. Rate/rank funding proposals related to homeless services (federal, state & local) based on needs/gaps within the CoC;
4. Rank CoC and ESG project applications;
5. Recommend reallocating project funds as necessary to meet needs of CoC; and
6. Communicate findings and decisions to the CoC Board and the Lead Agency's CoC Steering Group.

Lead Agency

The Department of Citizen Services (DCS) is the Lead Agency for both the Howard County CoC and HMIS. DCS receives CoC funding on behalf of Howard County Government, and works with partner agencies and the Board to further the goals of HUD and meet the needs of the community. As the Lead Agency, DCS prepares and submits the CoC Collaborative Application to HUD. DCS is the direct Recipient on behalf of Howard County Government with HUD for all CoC Funds, except the Shelter Plus Care (S+C) funding, with the direct Recipient of the Howard County Mental Health Authority.

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The Lead Agency convenes a monthly group, the CoC Steering Group. The CoC Steering Group provides a forum for discussing plans to end homelessness, educating the community on homeless issues, eliciting input on the operations of homeless services, program operations, and advocates on federal, state, and county levels regarding issues affecting people who are experiencing homelessness or at-risk of homelessness.

Howard County Coordinated System of Homeless Services (CSHS)

CSHS is a network of community services and supports coordinating efforts to end homelessness in Howard County. The goals of the system are to efficiently use community resources to reduce the number of homeless families and individuals, reduce the number of newly homeless, shorten the length of homeless episodes, and reduce the number of returns to homelessness. For full details on the policies and processes that guide the CSHS, please see the *CSHS Policies and Procedures*. The CSHS serves as the CoC's coordinated assessment system, as required per the Interim Rule, at 24 CFR 578. 7(a)(8):

Centralized or coordinated assessment system is defined to mean a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. This definition establishes basic minimum requirements for the Continuum's centralized or coordinated assessment system.

Phases

Prevention: Households at-risk of losing their housing may access **prevention services** and if they are found not sustainable, they are referred to the single point of entry.

Single Point of Entry: The Grassroots Crisis Intervention hotline is the **single point of entry** (SPE) for households experiencing a homeless crisis. Households receive a uniform assessment for immediate intervention with the goal of diversion from homelessness. The initial assessment aims to remove the obstacles of homeless households navigating through multiple agencies and their eligibility processes.

Progressive Engagement: Households not diverted and needing further intervention are referred to **progressive engagement** for follow-up and connection to community supports and services.

Intensive Supports: Households still in need of **intensive supports** are assigned to a community agency for shelter placement or case management. CSHS case management is provided by multiple community agencies for further, deeper assessment and access to services and other system resources with the goal of housing stability. Such resources include (but are not limited to) eviction prevention services, re-housing services with housing location assistance, supportive living services for persons with mental health disabilities, and rapid access to inpatient treatment for drug-addicted adults.

Housing Stability: Households that have obtained **stable housing** and have reduced barriers to housing stability are exited from intensive support and from the coordinated system.

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Follow Up: The CSHS maintains a **follow up** process to confirm that CSHS resources are leading families and individuals to successful housing stability. Through data collection and analysis, the CSHS ensures efficient service coordination and effective use of resources to meet system goals.

Outreach

Ongoing efforts are made to include essential providers and stakeholders. When a particular gap in membership is identified in the CoC, the Lead Agency and/or the CSHS Services Coordinator will target missing constituencies, brainstorm agencies and names, and contact people to represent missing constituencies. Outreach is made to ensure participation from the following groups for the CoC:

1. Homeless service providers and agencies
2. Community and faith-based organizations
3. Local government representatives
4. Homeless and formerly homeless people
5. Homeless advocates
6. Public Housing authorities
7. Private health care organizations
8. Mental health service providers and funders
9. Substance abuse service providers and funders
10. Local employment agencies
11. Colleges and universities
12. Veteran service agencies
13. Businesses and business associations
14. Key members of local planning groups
15. Employers
16. Political leaders
17. Law enforcement and corrections agencies
18. School districts

CoC Steering Group

Purpose

The CoC Steering Group (Steering Group) will facilitate actions necessary to accomplish the goals of Howard County's Plan to End Homelessness (PEH).

Responsibilities

The Steering Group will inform the Department of Citizen Services (DCS), in its role as the CoC Lead Agency, and will provide periodic updates on the group's activities to the CoC Board (Board to Promote Self-Sufficiency, BPSS).

The Steering Group will set and revise goals for the PEH and CoC activities, and specifically:

1. Update PEH annually; ensure goals and concepts are reflected in all CoC activities
2. Guide CSHS processes; review System supports, roles, and client flow; examine strengths/weaknesses; and monitor goals (the former CSHS Partners Forum, with expanded role)
3. Research best practices
4. Provide input to the CoC application

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5. Convene HMIS subcommittee
6. Perform the annual Point-in-Time survey
7. Convene ad-hoc workgroups as needed
8. Inform and provide recommendations to the ERA Committee of the BPSS on significant activities, needs and gaps related to meeting the goals of the PEH

The Steering Group will meet monthly; agendas will be provided in advance and meeting minutes will be posted on the website.

Membership

The Steering Group is broadly representative of the public and private homeless service sectors, including homeless client/consumer interests. The Steering Group encourages all members of the community to participate in group discussions and working groups. The Steering Group works to ensure diverse population input to decision-making, including consumers and community members, as well as gender, ethnic, cultural and geographical representation.

All interested persons are encouraged to attend meetings, provide input, and voice concerns. At a minimum, membership will include all CSHS Partner Agencies and other agencies in Howard County that have a vested interest in ending homelessness. The only prerequisite for membership is the agency must serve Howard County residents. Membership will include, but not be limited to representatives from the following agencies:

1. Bridges to Housing Stability, Inc.
2. Community Action Council of Howard County, Inc.
3. Community Member
4. Consumer
5. Department of Social Services
6. Family and Children Services
7. Grassroots Crisis Intervention Center, Inc.
8. Howard County Public School System
9. Howard County Health Department
10. Hope Works of Howard County, Inc.
11. Housing County Housing Commission
12. Howard County Mental Health Authority
13. Humanim, Inc.
14. LARS
15. Makingchange, Inc.
16. Howard County Office of Workforce Development
17. Salvation Army
18. Volunteers of America, Inc.

Each member agency will have one vote but multiple representatives may attend meetings. The CoC Manager of the Lead Agency will chair the meetings and the HMIS Administrator and CSHS Services Coordinator will be voting members of the Group. Recommendations from the Steering Group on processes and programmatic changes as related to the goals and activities of the PEH and CoC will be determined by majority vote.

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Communication

Between meetings, the Lead Agency will keep members involved by the following methods:

1. Maintaining a directory of CoC Steering Group members, as well as updating it regularly
2. Establishing working groups to move the work of the CoC and PEH forward between meetings
3. Encouraging partners with similar interests to join forces, either by sharing information/best practices or working on strategies to collaborate and support each other's efforts
4. Sharing information regularly to maintain a focus on homelessness in general and the continuum in particular

Methods of sharing information to CoC Steering Group members (and any interested persons/agencies) between meetings will include:

1. Information sent out via email lists
2. Information added to the CoC website, including:
 - a) Information on the work of the continuum
 - b) Resources
 - c) Plans and implementation
 - d) Research and data
 - e) Funding availability

CoC Application Process

General Procedure

HUD CoC funds are granted based on a national competition following the annual Notice of Funding Availability (NOFA). The Howard County CoC Lead Agency coordinates the process upon receipt of the federal NOFA. The CoC Lead Agency also considers the established priorities, then designs and presents application tools and materials. Community priorities will be discussed through the CoC strategic planning, needs assessment, and gaps analyses. Information regarding the NOFA and the community's process and requirements are disseminated to all interested parties (all homeless service and housing providers in the CoC) via the following open solicitation methods:

- Letters/emails
- Responses to public inquiries
- Outreach to faith-based groups
- Announcements at CoC meetings
- Posted on the CoC Lead Agency website

Procedures for Application Submissions

Proposals must be submitted to the Lead Agency by the designated method and due date. Proposals will always be due by 5:00 pm on the due date. Specifics regarding due dates, submission requirements, and other requirements will be distributed and will be posted on CoC Lead Agency website. The following procedures for late and/or incomplete applications apply:

- Late Applications received within 48 hours after the due date/time will receive a 15 point score reduction; late applications received after 48 hours will not be accepted.

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- Incomplete Applications will not pass threshold requirements for reviewing and ranking by the ERA Committee; all original application (not the copies) will be examined to determine if all pieces of the application have been submitted.

Threshold Criteria and Project Quality Requirements

Projects must pass a threshold requirement review before being submitted to the ERA Committee. Proposals not completely meeting threshold requirement review criteria will not be forwarded to the ERA for further consideration. Complete proposals which meet eligibility threshold review criteria will be submitted to the ERA, and will be evaluated according to the set criteria. The Lead Agency of the CoC will complete the threshold requirement review to verify the eligibility of:

- Applicant
- Project
- Activity
- Completeness of the application

ERA Process for Renewal, New and any Reallocated Project Applications

Eligible project applications (renewals, and if applicable, BONUS projects) will be reviewed by the ERA Committee. Goals for each application cycle will be based on specific requirements of the NOFA, specific federal and local priorities. The ERA Committee will review the following to assess projects seeking funding:

- Must be eligible to apply for CoC funding: Nonprofit organizations, State, or local government
- Must not require participation in religious services for CoC-funded programs
- Must be an eligible contractor for federal funds per <https://www.sam.gov/>
- Must have a current tax exempt status as verified by the IRS
- Must not owe any overdue tax debts, as documented on IRS 990 submissions to the IRS
- Must have financial and management capacity to carry out the project(s)
- Must provide evidence of a homeless or formerly homeless person is on the Board of Directors or has a role in the policy-making process within the Agency
- Must be able to evidence Agency policies and procedures for the administration for CoC funds
- Must participate in Homeless Management Information Systems (HMIS)
- Must administer programs or activities in the most integrated setting appropriate to the needs of homeless with disabilities
- Must identify matching funds in Budget and Budget Narrative
- Must not discriminate against households with a registered sex offender and/or person with a criminal record, including a violent crime, for acceptance into the program even if a child is in the household. It is the goal of Howard County's CoC to eliminate as many barriers for the "hardest-to-house" populations.
- Must provide all required information listed in Required Attachments and be capable of fulfilling all required Work Effort.

The ERA Committee will review and rank Project Applications in accordance with each funding NOFA. In addition, the criteria below will be used as a guide to the Tiering Process, within HUD's specific instructions. In addition, the Reallocation Process will consider the same criteria, and the ERA will evaluate each existing program to determine whether an under/non-performing project needs to be

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reallocated to meet the requirements under each HUD issued NOFA, and in accordance with the local plan to end homelessness. The criteria are as follows:

1. Projects that operate as “Housing First”
 2. Renewal Projects with performance outcomes from Annual Performance Reports/HMIS
 - Length of stay
 - % permanent housing exit destinations
 - % increases in income
 3. Renewal Project Monitoring Criteria/Summaries
 - Participant Eligibility
 - Utilization rates
 - Drawdown rates
 - Frequency or Amount of Funds Recaptured by HUD
 4. Project Meeting a need for specialized population services
 - Youth
 - Victims of Domestic Violence
 - Families with Children
 - Persons Experiencing Chronic Homelessness
 - Veterans
 - Persons with Disabilities, including children
- **REALLOCATION PROCESS:** In consideration of all above listed criteria, the ERA will evaluate each existing program to determine whether an under/non-performing project needs to be reallocated to meet the requirements under each HUD issued NOFA, and in accordance with the local plan to end homelessness.

Using All Available Funds

The ERA and Lead Agency will do everything possible to ensure that all funds possibly available to the community are applied for. When all applications have been submitted and it is found that the community is not requesting as much money as is available from HUD or no Bonus projects have been submitted, then:

- The CoC staff will email all CoC and other interested parties (all homeless service and housing providers in the CoC) with specifics regarding:
 - How much money is available
 - For what type of programs
- Applications deadlines for these funds will be set after the notice is distributed

HUD Reporting Requirements

Annual Performance Reports

Annual Performance Reports (APRs), formerly called Annual Progress Reports, are required by HUD on an annual basis to track the progress and accomplishments of HUD’s CoC Programs. The APR gathers information on how programs assist homeless persons to obtain and/or remain in permanent housing, increase skills and income, and obtain greater self-determination. This information is used by HUD and Congress to assess outcomes from federal funding. The APR is also used by the Howard County CoC as a planning tool to analyze demographics and needs, to evaluate outcomes, inform make improvements,

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and to assist in setting annual goals. The Howard County CoC Programs also report on the household's self-sufficiency outcomes matrix (SSOM) in the APR. In general:

- Recipients and Subrecipients receiving HUD Continuum of Care Homeless Assistance funding must report their annual progress to HUD through an Annual Performance Report (APR) submitted for each year in which HUD funding is provided
- A separate APR must be submitted for each HUD grant received
- If a project extension is received for a partial year, then an APR must be submitted for the operating year and another APR submitted for the extension period
- Information must be collected and maintained on each participant in each HUD-funded project for each the APR
 - Standard client data collection tools should be used to collect the information for the APR; in Howard County all APR data must be generated from ServicePoint from the HMIS Administrator.
 - All staff providing services to clients will be trained in how to accurately use the data collection forms
 - All data must be entered into ServicePoint and be accurate, in line with the HMIS Policies and Procedures.
- Recipients and Subrecipients must respond to all questions in the APR.
- All persons entering APR data should review APR instructions issued by HUD for guidance before completing the APR for that designated program year.
- The CoC Lead Agency is responsible for certifying (submitting) the final version of each APR for each project in the Continuum.

Information collected in the APR includes:

- General project information, including the dates of the operating year and the program type and component
- Client information, including household type, demographic and special needs information, prior living situation, income, length of stay in the project, supportive services received while in the project, reason for leaving the project and destination upon leaving the project
- Progress in achieving program goals
- Financial information, including match and project expenditures for the program year
- Recipients and Subrecipients must track and keep records documenting the match received and utilized
- A Cash Match Documentation file should be kept for each project, including cash expended, matching funds committed in the original project application submission and actual match amounts received

The APR must be submitted within 45 days to the Lead Agency after the end of the program year, for submission to HUD within 90 days after the end of each program year. The due date for the APR should be part of both the Recipient and Subrecipient's master calendar for tracking grant compliance activities. The Lead Agency will have each Recipient or Subrecipient enter the data into e-snaps and then forward to the Lead Agency designee in a .pdf format for review and certification prior to final submission. The Howard County CoC uses the data collected in the APRs to evaluate and improve the project, for needs assessment, trend analysis and future planning.

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Annual Homeless Assessment Report (AHAR)

The Annual Homeless Assessment Report (AHAR) is a report by HUD to the U.S. Congress on the extent and nature of homelessness in America. It is based on data from Homeless Management Information Systems and on information from Continuum of Care (CoC) Exhibit 1s. The AHAR provides estimates of the number of homeless persons nationally, a descriptive profile of homeless persons, and an analysis of service use patterns. For CoC's gathering and submitting this data to HUD, the local AHAR report provides useful information on homelessness and service needs at the local level.

The CoC Lead Agency is also the Lead Agency for HMIS. The Lead Agency is responsible for completing the local AHAR. Client level data for the AHAR will be collected through the Homeless Management Information System (HMIS) based on HUD's universal data elements which all communities receiving HUD Homeless Assistance funding are required to collect and maintain and which are the same data elements used to generate HUD's Annual Performance Reports (APRs).

- Unduplicated data will be collected for the four standard AHAR reporting categories: Emergency Shelter-Individuals, Emergency Shelter-Families, Transitional Housing-Individuals and Transitional Housing-Families. Data will also be collected for any supplemental reporting categories established by HUD.
- In order to participate in the AHAR, the CoC's HMIS must be capable of:
 - Producing a one day point-in-time count, average day count, and longitudinal counts.
 - Identifying clients with multiple program use—e.g., how many people in ES-IND were also served in TH-IND.
 - Counting persons by household type—e.g., individual adult male, adult in household with children, or unaccompanied youth.
 - Generating frequencies by basic demographic characteristics.
 - Cross-tabulating total length of stays within each program-household type, by gender and age.
 - Totaling the number of households with children by program type.

All agencies receiving HEARTH funding will submit on monthly basis information to the HMIS on each client served, including data needed for the AHAR report. The Howard County CoC has established continuum-wide data quality control procedures to ensure the accuracy and completeness of AHAR data collected and reported. These procedures address data collection as well as running of reports, data review, and obtaining feedback on the data.

The AHAR data review will address at a minimum the following three areas. In areas where problems are identified, concrete steps to address the problem will be identified and carried out.

- HMIS bed coverage (total # of beds in HMIS divided by # of beds in the CoC) must be at least 50% in one or more of the reporting categories. If bed coverage is lower, the CoC will work to increase provider participation.
- Bed utilization data (# of people served on a given night divided by the # of available beds that same night) must be based on accurate entry and exit dates for clients. For utilization rates below 60% or above 105%, the CoC will contact the provider and review raw data.

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- Data completeness as evidenced by a low rate of missing data across all questions. If the percentage of missing data is high, the CoC will contact providers to identify and address problems.

The AHAR data will also be reviewed to identify:

- CoC, program or user level problems
- Client level problems records
- Anomalies between data collected between similar programs
- Anomalies between data collected in recent period vs. previous ones
- Other discrepancies

The CoC will work with participating providers regarding the AHAR data collected to confirm accuracy of information collected. The CoC will provide quarterly HMIS trainings on data collection and quality for front-line staff who are engaged in data entry activities.

On an annual basis (according to HUD's designated data collection schedule), the CoC will de-duplicate and aggregate the client information collected to produce and submit a local AHAR data report using a standardized template.

- The AHAR data collection period is October 1st to September 30th of each year.
- The CoC will submit the aggregated local AHAR report electronically through the AHAR Exchange to the HUD-designated private research firm, responsible for compiling the national AHAR.
- A draft AHAR report will be submitted by the HUD-designated date.
- The CoC will work with the AHAR Research team to correct any data problems, and submit a final AHAR report by the HUD-designated date.

Homeless and Housing Reporting

Annually, the Howard County CoC reviews the housing and services available to people experiencing homelessness within the community. The methods to undertake this review include:

- Homeless Counts
- Housing Inventory
- Services Inventory

The Howard County CoC Lead Agency determines how to conduct the counts and inventories, while realizing that these activities are required by HUD, and must follow minimum requirements issued by HUD. HUD's recommendations for conducting homeless counts and housing/services inventories are described below, and will serve as a guide for the Howard County CoC.

Homeless Counts

The Continuum of Care Application for McKinney-Vento homeless assistance funding requires CoCs to produce "statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations at a one-day point in time." CoCs are also asked to report the number of homeless persons in subpopulation categories:

- Chronically homeless
- Severely mentally ill
- Chronic substance abusers

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- Veterans
- Persons with HIV/AIDS
- Victims of domestic violence
- Unaccompanied youth (ages 18 to 24)

HUD encourages CoCs to base population and subpopulation estimates on local data stored in Homeless Management Information Systems (HMIS) and/or collected through shelter and street counts. Aside from the HUD mandate to collect this information, there are many reasons why the CoC chooses to collect accurate, reliable data on our local homeless populations:

- To identify community-specific service needs and gaps
- To further understand the causes of homelessness and design more effective responses
- To use in planning and program development
- To raise public awareness of the challenges facing people experiencing homelessness
- To accurately measure and identify the needs of populations that are the hardest to serve

The Howard CoC coordinates a point-in-time count of sheltered and unsheltered homeless people in the last ten days of January (between January 22 and 31) annually.

Sheltered Homeless Count

The sheltered count is an inventory of people accessing shelter on a particular evening. It will include homeless people who are spending the night in:

- Emergency shelters
- Cold weather shelters
- Domestic violence shelters
- Residential programs for runaway/ homeless youth
- Transitional housing
- Hotel/motel/apartment voucher arrangements paid by a public/private agency because the person or family is homeless and
- Permanent supportive housing for homeless persons (Information on persons living in permanent supportive housing units will be used to determine the capacity rate of those programs; they will not be included in the total homeless count number)

The following information will be collected in the sheltered count:

- Number of households with dependent children (couples or single parents/guardians with children)
- Number of persons in households with dependent children (adults and children)
- Number of households without dependent children (households composed of individuals including unaccompanied youth, couples, and other adult-only households)
- Number of persons in households without dependent children (adults and unaccompanied youth)

The following populations will not be included in the count number reported to HUD:

- Persons who are living doubled up in conventional housing

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- Formerly homeless persons who are residing in Section 8 SRO, Shelter Plus Care, SHP permanent housing or other permanent housing units
- Children or youth, who because of their own or a parent's homelessness or abandonment, now reside temporarily and for a short anticipated duration in hospitals, residential treatment facilities, emergency foster care, detention facilities and the like
- Adults living in mental health facilities, chemical dependency facilities, or criminal justice facilities

To collect Sheltered Count data, the CoC will extract the data from HMIS.

Unsheltered Homeless Count

The unsheltered count is an inventory of people experiencing homelessness who are residing in a place not meant for human habitation, including streets, parks, alleys, parking ramps, parts of the highway system, transportation depots and other parts of transportation systems (e.g. tunnels, railroad cars, under bridges), all-night commercial establishments (e.g. movie theaters, laundromats, restaurants), abandoned buildings, building roofs or stairwells, chicken coops and other farm outbuildings, caves, campgrounds, vehicles, and other similar places.

The following information will be collected in the unsheltered count:

- Number of households with dependent children (couples or single parents/guardians with children)
- Number of persons in households with dependent children (adults and children)
- Number of households without dependent children (households composed of individuals including unaccompanied youth, couples, and other adult-only households)
- Number of persons in households without dependent children (adults and unaccompanied youth)

To collect Unsheltered Homeless Count data, the CoC combines the following methods:

- Conduct a public places count (a point-in-time count based on observation of unsheltered persons without interviews)
- Conduct a public places count with interviews (a point-in-time count combined with either interviewing all unsheltered homeless persons encountered during the public places count or a sample of these individuals.)
- Conduct a service-based count (interview people using non-shelter services, such as soup kitchens and drop-in centers, screen for homelessness, and count those that self-identify as unsheltered homeless persons; in order to obtain an unduplicated count, every person interviewed must be asked where they were sleeping on the night of the point-in-time count)
- Extract data from HMIS (use HMIS to collect, analyze or report data on unsheltered persons)

To ensure reliable data from the unsheltered count, the CoC will:

- Conduct trainings for point-in-time enumerators
- Use HMIS to check for duplicate entries or for some other purpose
- Use strategies to ensure that each unsheltered homeless person was not counted more than once during the point-in-time count

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Subpopulations

The CoC will also coordinate a count of persons who fall into certain subpopulations, using data from a point-in-time count conducted during the last ten days of January (between January 22nd and 31st) annually. Data collected for the subpopulation analysis includes:

- Chronic homeless status
 - Length of time the person has been homeless this time
 - How many times the person has been homeless in the past 3 years
- Whether the person has a disability
 - Disability status by category
 - Severe mental illness
 - Chronic substance abuse
 - HIV/AIDS
- Victim of domestic violence
- Veterans
- Unaccompanied youth (under 18)

To collect subpopulation data, the CoC will:

- Extract the data from HMIS OR
- Conduct interviews with a random or stratified sample of sheltered homeless adults and unaccompanied youth, extrapolating the results to the entire sheltered homeless population to provide statistically reliable subpopulation estimates for all sheltered persons OR
- Conduct interviews with every homeless person staying in an emergency shelter or transitional housing program on the night designated for the point-in-time count OR
- Ask providers to use individual client records (e.g., case management files) to provide the CoC with subpopulation data for each adult and unaccompanied youth living in a sheltered program on the night designated for the point-in-time count

If the CoC does not collect this information from HMIS, the CoC will:

- Provide written instructions to providers to explain the protocol for completing the subpopulations count
- Train providers on the protocol and data collection forms used to complete the subpopulations count
- Remind all agencies of the scheduled count and follow-up with providers to ensure the maximum possible response rate from all programs

Housing Inventory

Every year the CoC will collect data to complete a *Housing Inventory*. The date of the housing inventory will be the same date as the point in time sheltered and unsheltered count. The housing inventory must be conducted every year and will occur in the last ten days in January.

For each program that houses persons experiencing homelessness, the CoC will collect data on:

- The number of beds and units currently serving individuals and families
- The number of beds and units created in the past year (“new inventory”)

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- The number of beds and units that are fully funded but not yet serving homeless people (“under development”)

Housing Inventory data must be obtained from all emergency shelters, transitional housing, and permanent supportive housing programs in the CoC, including those programs that do not receive HUD funding, but who serve the homeless population. Data collected from permanent supportive housing programs will be focused only on the beds and units that are dedicated to housing persons who are formerly homeless. The number of vacant emergency shelter, transitional housing, and permanent supportive housing units must also be collected for the unmet need determination.

To collect *Housing Inventory* data, the CoC Lead Agency will annually:

- Use HMIS data to complete the Housing Inventory Chart
- Conduct a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site) of homeless providers, which will include the previous year’s Housing Inventory Chart and instruct providers to review and update housing inventory information on the specified night of the housing inventory

If the CoC Lead Agency decides to collect *Housing Inventory* information via a survey, the CoC Lead Agency will:

- Provide written instructions to all homeless providers on how to report an accurate bed inventory
- Train provider-level staff on how to obtain an accurate bed inventory
- Follow-up with providers (via telephone, email, or in-person) to ensure the maximum possible response rate and accuracy of the housing inventory information
- After receiving the inventory information, confirm the information with each provider to verify the accuracy of the data

Services Inventory

The CoC Lead Agency will collect information on the services available to homeless people by asking homeless service providers. When possible, the each provider will review a chart listing services and corresponding agencies that provide the services, and providers will update. This service inventory will include:

- Outreach
 - Street Outreach
 - Mobile Clinic
 - Law Enforcement
- Prevention activities
 - Rental Assistance
 - Arrears
 - First Month’s Rent
 - Housing Stabilization Services
 - Rental application fees
 - Security deposits equal to no more than two months’ rent
 - First and Last Month’s rent
 - Utility deposits

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- Utility payments
 - Moving Costs
 - Housing Search and Placement assistance and relocation
 - Case Management
 - Mediation Activities
 - Legal Services
 - Credit repair/Counseling Services
- Rapid Rehousing
- Supportive Services
 - HIV/AIDS
 - Assistance with moving costs
 - Case management
 - Child care
 - Education services
 - Employment assistance and job training
 - Food
 - Housing search and counseling services
 - Legal services
 - Life skills training
 - Mental health services
 - Outpatient health services
 - Outreach services
 - Substance abuse treatment services
 - Transportation
 - Utility deposits

Determining Housing Needs

Annually, the CoC Lead Agency will review the data collected as a result of the homeless counts and housing/services inventories, and determine what housing and services are needed given the homeless populations. The methods to undertake this review include:

- Determining Housing Needs
- Calculating Unmet Needs

There are many methods available to conduct these reviews. The Lead Agency will determine how it will conduct these reviews guided by HUD's recommendations. Each year the Lead agency is required to report to HUD on what housing is needed in Howard County. This information is also necessary for the long-term program and strategic planning that we do as a community. This includes the need of families and individuals for:

- Emergency Shelter beds,
- Transitional Housing beds, and
- Permanent Supportive Housing beds.

HUD's standardized methodology for calculating the Unmet Need uses point in time data and local provider expertise to calculate an initial estimate of Unmet Need.

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Housing Unmet Need for the homeless reflects the difference between the existing bed and unit capacity and the number of homeless persons and households in the CoC at one point in time. The information for the Unmet Need calculation is collected with the point in time count and housing inventory process, except when regarding the housing needs of those experiencing homelessness. To determine the housing needs of homeless persons who are residing in emergency shelter, transitional housing, and persons who are unsheltered, the CoC will gather specific opinions of all of the homeless assistance providers in the Continuum.

Sheltered Homeless

The CoC Lead Agency will assess the housing needs of *sheltered homeless* persons by asking each emergency shelter and transitional housing provider listed in the Housing Inventory Charts to report the number of their clients that need emergency shelter, transitional housing, and permanent housing to ultimately resolve their homeless situation.

Unsheltered Homeless

The CoC Lead Agency will obtain the housing needs of *unsheltered homeless* persons by convening a group of agency partners to discuss and arrive at a consensus on the number of persons in need of each type of housing, based on the point in time surveys/results and subpopulations identified. ServicePoint users with confidentiality agreements will be requested to be a part of this working group to protect the confidentiality of households' sensitive information which will be used to determine the best type of housing needed to end their homelessness.

Determination

When determining housing needs, the CoC Lead Agency and the convened groups will remember that:

- Each person or family should be placed in the one program type that will best assist the household in ending their homelessness; this will require the convened group to be precise when considering the type of housing needed to end the household's homelessness.
- Calculations for each program type (emergency shelter, transitional housing, or permanent supportive housing, etc.) will be done separately for unaccompanied individuals and persons in families with children; this is necessary to accurately reflect the bed capacity needs for each group.

Calculating Unmet Need

The CoC Lead Agency will use the following standardized formulas for calculating Unmet Need by program type (emergency shelter, transitional housing, and permanent supportive housing):

- Unmet need for Emergency Shelter (ES) = The number of unsheltered homeless persons who need ES + The number of persons currently in ES who will only need ES – (Total number of ES beds + ES beds under development)
- Unmet need for Transitional Housing (TH) = (The number of unsheltered homeless persons who need TH + the number of persons in ES who need TH + the number of persons in TH who will only need TH) - (Total number of TH beds + TH beds under development)
- Unmet need for Permanent Supportive Housing (PSH) = (The number of unsheltered homeless persons who need PSH + the number of persons in ES who need PSH + the number of persons in TH who need PSH) - (Total number of vacant PSH beds + PSH beds under development)

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Process for Determining CoC Priorities

Determining gaps and their relative priority are fundamental steps in the Howard County CoC planning process, which will serve as a guide for the annual Plan to End Homelessness goal setting. Decisions regarding the priority of identified gaps will be the basis for strategizing how to secure new resources or expand existing ones to best end and prevent homelessness in our community. All CoC members will be invited to be involved in the decision-making to determine and prioritize gaps. To determine and prioritize identified gaps, the CoC Lead Agency will hold an annual “*Prioritizing Howard County’s Unmet Needs*” session.

- All CoC members will be invited to participate
- Homeless count (PIT), housing (HIC) and service inventories, and Unmet Need data will be presented
- Howard County CoC members will consider and discuss several criteria when prioritizing gaps, including:
 - Relative need among sub-populations
 - Vulnerability of sub-populations (due to age, diagnosis, veteran)
 - Groups not yet served versus those with some housing resources in place
 - Whether a certain need is growing and if so, how rapidly
 - Users of high-end services (e.g., hospitalization, detoxification)
 - Gaps in each major housing type, and if so, which ones
 - Whether there are sufficient services to serve persons already in emergency shelter, transitional housing programs, or permanent housing
 - What services are missing to help people obtain and/or maintain permanent housing or permanent supportive housing
 - What services are essential to certain subgroups, and if they are missing
 - Are there major gaps in the homeless system or missing linkages among components of the system (e.g., outreach, intake, referral, assessment)
- After discussion, a list of housing, service and system gaps will be created
 - All CoC members will then vote to prioritize the gaps
 - Each CoC member agency will have one vote and will choose their three priority gaps
 - The gaps that receive the most votes shall be set as the highest priority
 - Low priority does not mean that there is not an unmet need; rather, it means that relative to other unmet needs or gaps, it is less of a priority

Grievance Policy and Procedure for Written and Verbal Complaints

Policy Statement

It is the policy of the Howard County CoC to provide its members with a fair and efficient process to present and resolve complaints and grievances. In the case of complaints about CoC-funded programs, the CoC Lead Agency will provide oversight; however, each HUD-funded organization shall have a grievance procedure and shall implement the procedure when applicable, and must incorporate the minimum steps, as listed here, regarding any complaints or grievances.

Written Complaints about the CoC

Any written complaint against the CoC will be reviewed by the ERA Committee within ten days of its receipt. The Chair will respond within 30 days by:

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- Assisting the complainant in articulating /identifying issues, if needed
- Determining what action needs to be taken, if any
- Responding in writing to complainant with clear identification of issue and specifics about its resolution

Complaints about a Program Receiving CoC Funds (including ESG)

- A first-person written and/or documented complaint will be considered a **grievance**.
- A verbal, second-hand or hearsay complaint will be considered a **complaint**.
- The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the program organization they are making a grievance or complaint about. If the person making the grievance or complaint has not gone through the grievance procedure provided by the organization, the Lead Agency will recommend that the person do so and document that recommendation.
- If the resolution provided by that organization was not satisfactory to the complainant, he/she may put the problem in writing and submit it to the Lead Agency. If the complainant does not want his/her name attached to the complaint, his/her anonymity will be protected. If the complainant is unwilling to put the concern in writing, the Lead Agency will document what has been said.
- Each situation will be treated seriously and with sensitivity, and will be documented for the record with date, time, program name, and nature of the complaint, as well as with any action taken towards resolution.
- Once a complaint or grievance has been submitted, the Lead Agency will approach the problem program's representative, explain the complaint or grievance, and ask for a response to the charge(s) within ten (10) business days. Responses will be documented. It will be up to the Lead Agency to decide if the matter needs to be discussed by the ERA. A second complaint or grievance will be handled the same. The complainant may file a written appeal (second complaint) within ten (10) days of the first response; the client's written appeal will be responded to within ten (10) days of its receipt.
- If a program receives a third complaint, the ERA will review the situation and recommend action, including all correspondence and documentation. The Executive Director of the program being reviewed will be asked to respond to the ERA. The third complaint will be handled within the same timeframe as the first and second.
- All complaints or grievances involving **vulnerable adults or children** will be immediately turned over to the appropriate county office.

Note: The Lead Agency is not party to any agreements between the landlords and participant households. Should a participant household believe they have been discriminated against by their landlord they should contact the Howard County Office of Human Rights immediately.

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Administration Requirements

Grant Administration

The CoC Interim Rule refers to OMB Circulars for proper and sound Grant Administration, Agreements, Sub-Agreements, and financial cost principles for all Recipients and Subrecipients. All parts therein must be practiced, maintained and adhered to with regards to any CoC funds.

Specifically, as stated in 24 CFR 578.99 (e), Applicability of OMB Circulars:

“The requirements of 24 CFR part 85 – Administrative Requirements for Grants and Cooperative Agreements to State, Local, and Federally Recognized Indian Tribal Governments and 2 CFR part 225 – Cost Principles for State, Local and Indian Tribal Governments (OMB Circular A-87) – apply to governmental recipients and subrecipients except where inconsistent with the provisions of this part. The requirements of 24 CFR part 84 – Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations; 2 CFR part 230 – Cost Principles for Non-Profit Organizations (OMB Circular A-122); and 2 CFR part 220 - Cost Principles for Education Institutions apply to the nonprofit recipients and subrecipients, except where inconsistent with the provisions of the McKinney- Vento Act or this part.”

Invoices

- 1) A Recipient or Subrecipient that receives Howard County CoC funds must submit invoices at least once per quarter, after eligible activities commence, in order to allow the Howard County Government (the Grantee) to draw from HUD in accordance with the Timeliness requirements of the Interim Rule.
- 2) All invoices will be on a reimbursable basis; evidence funds have been paid is required for reimbursement.
- 3) The Grantee will reimburse the appropriate portion of the funds to a Recipient or Subrecipient no later than 45 days after receiving an approvable request for such distribution.
- 4) It is the Grantee’s policy that all invoices need sufficient backup documentation including evidence of paid invoices; evidence activity by funding stream and approved budget line item;
- 5) Other documentation may be requested by the Grantee to confirm payment is eligible against the requested CoC grant line item and eligible costs. All OMB Circular requirements must apply.

Grant Agreement Requirements

Recipients, Subrecipients and any subcontractor(s), as applicable, will be required to sign a grant agreement in which the following minimum requirements are agreed:

- 1) To ensure the operation of the project(s) in accordance with the provisions of the McKinney-Veto Act and all requirements under 24 CFR part 578;
- 2) To monitor and report the progress of the project(s) to the Continuum of Care and HUD;
- 3) To ensure, to the maximum extent practicable, that individuals and families experiencing homelessness are involved, through employment, provision of volunteer services, or otherwise,

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in constructing, rehabilitating, maintaining, and operating facilities for the project and in providing supportive services for the project;

- 4) To require certification that:
 - a) The confidentiality of records is provided to any individual or family that was provided family violence prevention or treatment services through the project;
 - b) The address or location of any family violence project assisted under this part will not be made public, except with written authorization of the person responsible for the operation of such project;
 - c) Policies and practices are established that are consistent with, and do not restrict, the exercise of rights provided by subtitle B of title VII of the Act and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness;
 - d) In the case of projects that provide housing or services to families, a staff person will be designated 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 the Act;
 - e) The funded agency, its officers, and employees are not debarred or suspended from doing business with the Federal Government; and
 - f) Information, such as data and reports, as required by HUD will be submitted; and
 - g) To establish such fiscal control and accounting procedures as may be necessary to assure the proper disbursement of, and accounting for grant funds in order to ensure that all financial transactions are conducted, and records maintained in accordance with generally accepted accounting principles;
 - h) To monitor subrecipient match and report on match to HUD;
 - i) To take the educational needs of children into account when families are placed in housing 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;
 - j) To monitor/be monitored at least annually;
 - k) To use the centralized or coordinated assessment system established by the Continuum of Care as set forth in § 578.7(a)(8); in Howard County, this is the Coordinated System of Homeless Services (CSHS)
 - *A victim service provider may choose not to use the Continuum of Care's centralized or coordinated assessment system, provided that victim service providers in the area use a centralized or coordinated assessment system that meets HUD's minimum requirements and the victim service provider uses that system instead;*
 - l) To follow the written standards for providing Continuum of Care assistance developed by the Continuum of Care, including the minimum requirements set forth in § 578.7(a)(9);
 - m) Enter into agreements requiring recipient/subrecipient/subcontractor to operate the project(s) in accordance with the provisions of this Act and all requirements under 24 CFR part 578; and
 - n) To comply with such other terms and conditions as HUD may establish by NOFA.

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CONTINUUM OF CARE PROJECTS

The HEARTH Act requires the Howard County CoC to have written policies and procedures that govern the provision of assistance to individuals and families under the CoC programs. These policies and procedures provide guidance to local providers in administering CoC-funded assistance and include eligibility and documentation standards for CoC programs. This policies and procedures document is not intended to be in lieu of or in place of the Interim Rule for the HEARTH Act, but is intended to clarify Howard County local decisions regarding program administration. All HUD funded providers must follow the Interim Regulations in their entirety.

- A. Shelter Plus Care Program (S+C) – This program provides rental assistance and support services to homeless persons and to families with a member who has a diagnosed mental illness. The Howard County Mental Health Authority oversees all of the day to day activities of S+C and is a direct Recipient of this funding from HUD. However, the CoC Lead Agency applies for the funding, under the CoC Main Application.
 - B. Permanent Supportive Housing (PSH) – This program provides rental assistance with accompanying supportive services for homeless households, where one family member has a diagnosed disability. The PSH Program provides rental assistance at scattered site locations across Howard County; assistance cannot be used outside of Howard County. Persons who have exited the program are eligible to receive up to six months of supportive services to ensure the household’s housing stability. The CoC Lead Agency is the Direct Recipient of this funding from HUD and applies for this funding annually through HUD’s annual competition. The Lead Agency maintains a Grant Agreement with a Subrecipient agency to operate the program.
 - C. Transitional Housing (TH) – This program provides leasing assistance with accompanying supportive services for homeless households, for up to 24 months. Households participating in TH must be homeless prior to acceptance into the program. The CoC Lead Agency is the Direct Recipient of this funding from HUD and applies for this funding annually through HUD’s annual competition. The Lead Agency maintains a Grant Agreement with a Subrecipient agency to operate the program.
- Emergency Solutions Grant (ESG) – Emergency Solutions Grant agencies are required to participate in local CoC planning and coordination of services. The Howard County Lead Agency is the Grantee with the State of Maryland’s Department of Housing and Community Development (DHCD), which administers ESG funds to local state jurisdictions. The ESG programs follow the Howard County CoC policies and procedures for ESG.

Participant Eligibility & Documentation

Overview

All clients served through the Howard County CoC must follow the process of ranking by vulnerability, and meet HUD’s “Homeless” definition. It is the goal of the Howard County CoC to serve those with the greatest vulnerabilities and barriers to housing, in order to end their homelessness. As set forth in the HEARTH Act, there are four categories of eligibility: 1) Literally Homeless, 2) Imminent Risk of Homelessness, 3) Homeless Under Other Federal Statutes, and 4) Fleeing/Attempting to Flee Domestic Violence. The Howard County CoC elects to serve categories 1, 2 and 4 of the “Homeless” definition as described below, due to the shortage of resources for those priority populations and ongoing demand;

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the definition of “At-Risk of Homelessness,” as defined at 24 CFR 576.2, is not currently eligible for services in Howard County.

Definitions

- 1) Homeless Definitions. The following are the definitions of homelessness that must be followed when determining a household’s eligibility for entrance into the Howard County CoC programs.
 - i. *Category (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence:*
 1. (i) 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;
 2. (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or
 3. (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
 - ii. *Category (2) An individual or family who will imminently lose their primary nighttime residence, provided:*
 1. (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
 2. (ii) No subsequent residence has been identified; and
 3. (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing; or
 - iii. *Category (4) Any individual or family who:*
 1. (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
 2. (ii) Has no other residence; and
 3. (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.
- 2) Chronically Homeless Definitions. The following is the definitions of chronically homeless and must be followed when determining a household’s eligibility for entrance into the CoC PSH programs:
 - i. An individual who:

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1. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 2. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years; and
 3. Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability;
 - ii. An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
 - iii. A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.
- 3) Severe Service Needs. For persons identified as having the most *severe service needs*, at least one of the following is true:
- i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; or
 - ii. Significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing.
- 4) Developmental Disability Definition. As defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002):
- i. A severe, chronic disability of an individual that
 1. Is attributable to a mental or physical impairment or combination of mental and physical impairments;
 2. Is manifested before the individual attains age 22;
 3. Is likely to continue indefinitely;
 4. Results in substantial functional limitations in three or more of the following areas of major life activity:
 - a. Self-care;
 - b. Receptive and expressive language;
 - c. Learning;
 - d. Mobility;
 - e. Self-direction;
 - f. Capacity for independent living;
 - g. Economic self-sufficiency.
 5. Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms

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of assistance that are of lifelong or extended duration and are individually planned and coordinated.

- ii. An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs (1)(i) through (v) of the definition of developmental disability in this section if the individual, without services and supports, has a high probability of meeting these criteria later in life.

Order of Priority

For the Howard County CoC Programs providing PSH that are dedicated to and prioritizes persons experiencing chronic homelessness, the following order of priority is followed:

- 1) First Priority—Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness* **and** with the *Most Severe Service Needs*.
 - 1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 (B.2 of this document) for which **both** of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
 - ii. The Howard County CoC's CSHS has identified the chronically homeless individual or head of household, who meets all of the criteria meeting the definition of chronically homeless, of the family as having severe service needs (see Severe Service Needs of this document).
- 2) Second Priority—Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness*.
 - 1) A chronically homeless individual or head of household, as defined in 24 CFR 578.3 (B.2 of this document), for which **both** of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
 - ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria listed under First Priority.
- 3) Third Priority—Chronically Homeless Individuals and Families **with** the *Most Severe Service Needs*.
 - 1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom **both** of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and

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- ii. The Howard County CoC's CSHS has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, and the family has Severe Service Needs, see Severe Service Need of this document.
- 4) Fourth Priority—All Other Chronically Homeless Individuals and Families.
- 1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and
 - ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs

Permanent Supportive Housing (PSH) Disability Qualification

The Permanent Supportive Housing for Persons with Disabilities projects only accept homeless persons with a verified disability, and prioritizes units that are not already dedicated to the chronically homeless, to those who are experiencing chronic homelessness, based on the determined Order of Priority. The head of household or a minor may qualify the household for acceptance into the program for the qualifying disability. *Source Documentation of Disability* must be collected at program acceptance, and is not to be recollected at annual recertification.

Transitional Housing (TH)

The transitional housing program does not require a person to be chronically homeless or have a disability. However, acceptance into the program is through the CSHS placement process, which ranks persons and households based on level of vulnerability (See CSHS Policy and Procedures). The household must be able to obtain employment and be self-sustaining within 24 months of entry into the TH program.

Source Documentation

All Recipients and Subrecipients must maintain documentation, obtained at intake, to demonstrate the eligibility of households served through CoC programs, and maintain and follow written intake procedures to ensure compliance with the homeless, chronically homeless, Severe Service Needs, and Disability definitions. Lack of third-party documentation (priority source) will not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being admitted to shelter or receiving services provided by a victim service provider. However, the provider must document in the case file must the due diligence to obtain third party verification.

Order of Priority for Source Documentation:

- 1) Third-party documentation,
 - a. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations if the HMIS retains an auditable history of all entries, including the person who

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entered the data, the date of entry, and the change made; and if the HMIS prevents overrides or changes of the dates on which entries are made.

- 2) Intake worker observations, and
- 3) Certification from the person seeking assistance.

Acceptable evidence for homeless status, by Category:

- 1) Category (1). Literally Homeless. If the individual or family qualifies as Literally Homeless because he or she has resided in a place not meant for human habitation, or is residing in an emergency shelter, acceptable source documentation includes:
 - a. Written observation by the outreach worker; or
 - b. Written referral by another housing or service provider; or
 - c. Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter;
 - d. For individuals exiting an institution—one of the forms of evidence above and:
 1. discharge paperwork or
 2. written/oral referral, or
 3. written record of intake worker's due diligence to obtain above evidence and certification by individual that they exited institution
- 2) Category 2. Imminent-Risk of Homelessness.
 - a. A court order resulting from an eviction action notifying the individual or family that they must leave; or
 - b. For individual and families leaving a hotel or motel—evidence that they lack the financial resources to stay; or
 - c. A documented and verified oral statement; and
 - d. Certification that no subsequent residence has been identified; and
 - e. Self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing
- 3) Category 4. Fleeing/ Attempting to Flee Domestic Violence.
 - a. For victim service providers:
 1. An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker.
 - b. For non-victim service providers:
 1. Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker. Where the safety of the individual or family is not jeopardized, the oral statement must be verified; and
 2. Certification by the individual or head of household that no subsequent residence has been identified; and
 3. Self-certification or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.

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4) Disability.

a. Evidence of diagnosis with one or more of the following:

1. Substance use disorder, serious mental illness, developmental disability (as defined in Section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability.
2. Evidence must include *one* of the following:
 - a. Written verification of the condition from a professional licensed by the state to diagnose and treat the condition;
 - b. Written verification from the Social Security Administration;
 - c. Copies of a disability check (e.g., Social Security Disability Insurance check or Veterans Disability Compensation);
 - d. Intake staff (or referral staff) observation that is confirmed by written verification of the condition from a professional licensed by the state to diagnose and treat the condition that is confirmed no later than 45 days of the application for assistance and accompanied with one of the types of evidence above; or
 - e. Other documentation approved by HUD

Acceptable evidence for “Chronic Homeless”

The Howard County CoC and CSHS follow HUD’s Order of Priority for the Chronic Homeless persons and households for placement into PSH, (HUD Notice: CPD-14-012.) All Recipients and Subrecipients of PSH must demonstrate they are following the requirement by maintaining the following source documentation(s):

- 1) Written Intake Procedures. All Recipients and Subrecipients must maintain and follow written intake procedures to ensure compliance with the definition of chronically homeless. These procedures must follow the Howard County CoC’s established order of priority for obtaining evidence as (see Section E.1. of this document).
- 2) Evidence of Chronically Homeless Status. All Recipients and Subrecipients of CoC Program-funded PSH whose current grant agreement includes beds that are dedicated or prioritized to the chronically homeless must maintain records evidencing that the individuals or families receiving the assistance in those beds meets the definition for chronically homeless. Such records must include evidence of the homeless status of the individual or family, the duration of homelessness, the disabling condition, and evidence of Severe Service Needs.
- 3) Evidence of homeless status. Evidence of an individual or head of household’s current living situation may be documented by a written observation by an outreach worker, a written referral by housing or service provider, or a certification by the household seeking assistance that demonstrates that the individual or head of household is currently homeless and living in a place not meant for human habitation, in an emergency shelter, or a safe haven. For paragraph (2) of the definition for chronically homeless at 24 CFR 578.3, for individuals currently residing in an institution, acceptable evidence includes:
 - a) Discharge paperwork or a written or oral referral from a social worker, case manager, or other appropriate official of the institution, stating the beginning and end dates of the time residing in the institution that demonstrate the person

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resided there for less than 90 days. All oral statements must be recorded by the intake worker; or

b) Where the evidence above is not obtainable, a written record of the intake worker's due diligence in attempting to obtain the evidence described in the paragraph i. above and a certification by the individual seeking assistance that states that they are exiting or have just exited an institution where they resided for less than 90 days; and

c) Evidence that the individual was homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter, and met the criteria in paragraph (1) of the definition for chronically homeless, immediately prior to entry into the institutional care facility.

4) Evidence of the duration of the homelessness. Recipients documenting chronically homeless status must also maintain the evidence described below:

a) Evidence that the homeless occasion was continuous, for at least one year.

1. Using any combination of allowable source documentation described this document, recipients and subrecipients must provide evidence that the homeless occasion was continuous, for a year period, without a break in living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter. For the purposes of this Notice, a break is considered at least seven or more consecutive nights not residing in a place not meant for human habitation, in shelter, or in a safe haven.
2. At least 9 months of the 1-year period must be documented by one of the following:
 - a. (1) HMIS data,
 - b. (2) a written referral, or
 - c. (3) a written observation by an outreach worker.
3. In only rare and the most extreme cases, HUD would allow a certification from the individual or head of household seeking assistance in place of third-party documentation for up to the entire period of homelessness. Where third-party evidence could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and evidence of the efforts made to obtain third-party evidence as well as documentation of the severity of the situation in which the individual or head of household has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than 1 year and has not had any contact with anyone during that entire period.
4. *Note: A single encounter with a homeless service provider on a single day within 1 month that is documented through third-party documentation is sufficient to consider an individual or family as homeless for the entire month unless there is any evidence that the household has had a break in homeless status during that month (e.g., evidence in HMIS of a stay in transitional housing).*

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- b) Evidence that the household experienced at least four separate homeless occasions over 3 years.
 - 1. Using any combination of allowable documentation described in Section V.B.2.(a) of this Notice, the recipient must provide evidence that the head of household experienced at least four, separate, occasions of homelessness in the past 3 years.
 - 2. Generally, at least three occasions must be documented by either:
 - a. (1) HMIS data,
 - b. (2) a written referral, or
 - c. (3) a written observation.
- c) Any other occasion may be documented by a self-certification with no other supporting documentation.
 - 1. In only rare and the most extreme cases, HUD will permit a certification from the individual or head of household seeking assistance in place of third-party documentation for the three occasions that must be documented by either:
 - a. (1) HMIS data,
 - b. (2) a written referral, or
 - c. (3) a written observation.
 - 2. Where third-party evidence could not be obtained, the intake worker must obtain a certification from the individual or head of household seeking assistance, and must document efforts made to obtain third-party evidence, and document of the severity of the situation in which the individual has been living. An example of where this might occur is where an individual has been homeless and living in a place not meant for human habitation in a secluded area for more than one occasion of homelessness and has not had any contact with anyone during that period.

Household Composition

- 1) Persons accepted into CoC programs, other than the qualifying individual, may include:
 - a. Dependents, minor children whom the Head of Household can show some type of custody arrangement;
 - b. Children over 18 who have documentation verifying that they are full-time students at a qualified higher-education institution, or who were originally part of the qualifying household composition;
 - c. A spouse;
 - d. A critically-ill parent or adult child with a disability; and
 - e. Certified medical caregivers.
- 2) Clients must report, in writing, any changes in their household size when a person moves in or out of the unit within two (2) weeks.

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Occupancy, Rent and Income

Occupancy Agreements and Leases

- 1) There must be a signed occupancy agreements or lease/sub-lease in place for CoC Leasing or Rental Assistance program participants.
- 2) The specific regulations under the Interim Rule for Rental Assistance activities and Leasing activities apply, (ie, difference between Tenant Based Rental Assistance and Project Bases Rental Assistance).

Calculation of Rent

- 1) CoCs are not required to impose occupancy charges on program participants as a condition of residing in housing. However, when any form of Rental Assistance or Leasing is provided on behalf of the client, through CoC funds, the Howard County CoC charges the highest of:
 - i. 30 percent of the family's monthly adjusted income (adjustment factors include the number of people in the family, age of family members, medical expenses, and child-care expenses); or
 - ii. 10 percent of the family's monthly income.

Annual Income

- 1) Each program participant must agree to supply the information or documentation necessary to verify the program participant's income at program acceptance and upon recertification. A program participant's income must be reviewed initially, and annually thereafter.
- 2) However, if there is a change in family composition or an increase/decrease in the resident's income during the year, the resident may request an interim reexamination, and the client's portion of the contract rent would be adjusted accordingly. Such increases/decreases to household income must be reported prior to the end of the month in which the change occurs, so if any possible adjustment (increase or decrease) in rent can begin the next full month following when it was reported.
- 3) Household income must be calculated in accordance with 24 CFR 5.609 and 24 CFR 5.611(a).
- 4) Annual Income *Does* Includes:
 - iii. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services;
 - iv. Net income from the operation of a business or profession;
 - v. Interest, dividends, and other net income of any kind from real and personal property;
 - vi. The full amount of periodic payments received from social security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts, including lump sum payment for delayed start of a periodic payment;
 - vii. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay;
 - viii. Welfare assistance. Welfare or other payments to families or individuals, based on need, that are made under programs funded, separately or jointly, by Federal, State or local governments (e.g. Social Security Income (SSI) and general assistance available through state welfare programs);

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- ix. Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from persons not residing in the dwelling; and
 - x. All regular pay, special pay and allowances of a member of the Armed Forces, except special hostile fire pay.
- 5) Annual Incomes *Does Not* Include:
- i. Income from employment of children (including foster children) under the age of 18 years;
 - ii. Payments received for the care of foster children or foster adults (usually individuals with disabilities, unrelated to the tenant family, who are unable to live alone);
 - iii. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains, and settlement for personal or property losses (except payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay);
 - iv. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;
 - v. Income of a live-in aide as defined in 24 CFR 5.403;
 - vi. The full amount of student assistance paid directly to the student or to the educational institution;
 - vii. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
 - viii. Amounts received under training programs funded by HUD;
 - ix. Amounts received by a disabled person that are disregarded for a limited time for purposes of SSI income eligibility and benefits because they are set aside for use under a Plan for Achieving Self-Support (PASS);
 - x. Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and which are made solely to allow participation in a specific program;
 - xi. Amounts received under a resident service stipend.
 - xii. Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment training program;
 - xiii. Temporary, non-recurring or sporadic income (including gifts);
 - xiv. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;
 - xv. Earnings in excess of \$480 for each full time student 18 years old or older (excluding the head of household and spouse);
 - xvi. Adoption assistance payments in excess of \$480 per adopted child;
 - xvii. Deferred periodic payments of SSI income and social security benefits that are received in a lump sum amount or in prospective monthly amounts;

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- xviii. Amounts received by the family in the form of refunds or rebates under state or local law for property taxes paid on the dwelling unit;
 - xix. Amounts paid by a State agency to a family with a developmentally disabled family member living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home; and
 - xx. Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions set forth in 24 CFR 5.609(c) apply. A notice will be published in the Federal Register and distributed to PHAs and housing owners identifying the benefits that qualify for this exclusion. Updates will be published and distributed when necessary.
- 6) Adjustments to Income
- i. \$480 for each dependent
 - ii. \$400 for any elderly or disabled family;
 - iii. The sum of the following, to the extent the sum exceeds 3 percent of annual income:
 - 1. Unreimbursed medical expenses of any elderly family or disabled family; and
 - 2. Unreimbursed reasonable attendant care and auxiliary apparatus expenses for each member of the family who is a person with disabilities, to the extent necessary to enable any member of the family (including the member who is a person with disabilities) to be employed. This deduction may not exceed the earned income received by family members who are 18 years of age or older and who are able to work because of such attendant care or auxiliary apparatus;
and
 - 3. Reasonable child care expenses necessary to enable a member of the family to be employed or to further his or her education, provided that:
 - a. the child or children are 12 years old and under;
 - b. the resident is employed or enrolled in school while the dependent is receiving care;
 - c. the amount deducted as child care expenses is necessary for the resident to work or attend school and the amount necessary for the resident to work does not exceed the amount earned while working;
and
 - d. the resident is not reimbursed for this expense.
- 7) The Earned Income Disallowance (EID), 24 CFR 5.617.
- i. Applies to disabled participants of PH projects
 - ii. Special regulations apply to all disabled clients that became employed after April 20, 2001 and
 - 1. were previously unemployed for one or more years; or
 - 2. earned less than \$3,375 in the previous 12 months; or
 - 3. increased their income during a self-sufficiency or job training program; or
 - 4. Received welfare benefits or participated in a Welfare-to-Work program within six months prior to getting a job.

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Utility Payments

- 1) Utility reimbursements are only allowed when the household's rent does not include utility costs, or is not considered "Fair Market Rent." This usually occurs for those living in units that are individually metered, and clients receive bills directly from the utility company.
- 2) In this situation, the client's rent equals the client's required rent payment less an allowance for reasonable utility consumption (allowance schedules are issued annually by the local public housing authority). Telephone, cable and/or interest costs are not to be included as a utility for this purpose.
- 3) If reasonable utility expenses alone exceed the amount the client is required to pay for both shelter and utilities, the Subrecipient must make arrangements in their financial payment system to pay the utility company directly.
- 4) This calculation method is reflected in the HUD Resident Rent Calculation Worksheet.
- 5) Under no circumstance must a household receive direct payment for any costs.

...The CoC Program Interim Rule prohibits direct payments to program participants because it is an ineligible use of CoC Program funds. CoC Program funds are only to be used for the direct provision of housing and supportive services for eligible persons. A recipient or subrecipient cannot guarantee a direct cash payment to a program participant will be used for an allowable supportive service or housing payment; thus, the requirement for CoC Program funds for utility payments to be made to the utility companies and other third party service providers. -HUD Headquarters, April 24, 2014

Housing

Housing Standards

For any assistance provided, the housing and services must be in compliance with all applicable State and local housing codes, licensing requirements, and any other requirements of the jurisdiction in which the project is located regarding the condition of the structure and the operation of the housing or services.

Housing Quality Standards (HQS)

- 1) Units assisted with CoC funding must pass the Housing Quality Standards inspection before funds are provided, and annually thereafter.
- 2) The inspection involves a review of any third party documentation (such as a check of housing and public health code inspection certifications) as well as visual inspection of the unit.
- 3) Third party inspections are considered primary since trained inspectors perform them.

Fair Market Rents (FMR)

For both Leasing and Rental Assistance, a unit's total rent may not exceed HUD determined fair market rent value (FMR), if utilities are included in the monthly amount. The annually published FMR's are gross rent estimates, and *include* the cost of utilities (except telephone/cable). If a unit is over the FMR limit, and/or does not include the cost of utilities, it must be documented in the client file that the unit exceeds the FMR and then must meet the Rent Reasonableness threshold for that size/type of unit instead.

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Rent Reasonableness

For Leasing and Rental Assistance, rent paid must be actual costs and deemed reasonable in relation to rents being charged in the area for comparable space. If a unit's monthly charge includes utilities, the FMR limit must be used. If a unit's monthly charge excludes utilities and/or is over the annual FMR rate, the Rent Reasonable guidelines must be used. If in determining comparability, consider location, size, type, quality, amenities, facilities, and management services. If the owner has both assisted and unassisted housing units, rents for the assisted units may not exceed rents being charged for that owner's comparable unassisted units; or must be comparable within reason. The Subrecipient should keep file documentation showing the unit's rent reasonableness.

Rental Assistance

Use

- 1) Grant funds may be used for rental assistance for homeless individuals and families.
- 2) Rental assistance cannot be provided to a program participant who is already receiving rental assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.
- 3) The Howard County CoC rental assistance is *long-term*, (longer than 24 months)
- 4) The Howard County CoC PSH rental assistance projects are all tenant-based (scattered sites)
- 5) Grant funds may be used for security deposits in an amount not to exceed 2 months of rent.
- 6) An advance payment of the last month's rent may be provided to the landlord, in addition to the security deposit and payment of first month's rent.

Rental Assistance Administration

- 1) Rental assistance may be administered by a State, unit of general local government, a public housing agency or a private nonprofit organization.
- 2) Housing Assistance Efficiency Act, H.R. 2790: The 113th Congress, 2D Session passed H. R. 2790 on December 3, 2014: *"To authorize private nonprofit organizations to administer permanent housing rental assistance provided through the Continuum of Care Program under the McKinney-Vento Homeless Assistance Act, and for other purposes."*
<https://www.govtrack.us/congress/bills/113/hr2790/text>
- 3) Costs of administering the rental assistance are considered service delivery costs of rental assistance and are eligible in the CoC Program as Rental Assistance costs. Staff Time involved in administering rental assistance in the CoC Program includes contracting for and making rental assistance payments to the landlord/landowner, and conducting the Housing Quality Inspections (HQS).

Tenant-Based Rental Assistance (TBRA)

- 1) Tenant-based rental assistance is rental assistance in which program participants choose housing of an appropriate size in which to reside, and hold the lease in their own name.
- 2) Program participants who have complied with all Howard County CoC PSH program requirements may retain their rental assistance and within the Continuum of Care geographic area, if they chose.
- 3) Program participants who have complied with all program requirements during their residence and who have been a victim of domestic violence, dating violence, sexual assault, or stalking,

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and who reasonably believe they are imminently threatened by harm from further domestic violence, dating violence, sexual assault, or stalking (which would include threats from a third party, such as a friend or family member of the perpetrator of the violence), if they remain in the assisted unit, and are able to document the violence and basis for their belief, may retain the rental assistance and move to a different Continuum of Care geographic area if they move out of the assisted unit to protect their health and safety.

Vacant Units

If a unit assisted under this section is vacated before the expiration of the lease, the assistance for the unit may continue for a maximum of 30 days from the end of the month in which the unit was vacated, unless occupied by another eligible person. No additional assistance will be paid until the unit is occupied by another eligible person. Brief periods of stays in institutions, not to exceed 90 days for each occurrence, are **not** considered vacancies.

Property Damage

The Howard County CoC allows the use of grant funds in an amount not to exceed one month's rent to pay for any damage to housing due to the action of a program participant. This shall be a one-time cost per participant, incurred at the time a participant exits a housing unit.

Resident Rent

- 1) Rent must be calculated as stated in "Calculation of Rent" of this document.
- 2) The Howard County CoC requires program participants to pay the landlord directly for their share of the rent.

Leases

- 1) Program participants must enter into a lease agreement for a term of at least one year, which is terminable for cause.
- 2) The leases must be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.
- 3) Program participants in transitional housing must enter into a lease agreement for a term of at least one month. The lease must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months

Leasing

Use

- 1) The Howard County CoC PSH Leasing project is *long-term*, (longer than 24 months), tenant-based and scattered site. This project expires as a Leasing project on November 30, 2015.
- 2) The Howard County CoC TH Leasing project is sponsor-based and short-medium term (up to 24 months).
- 3) Recipients or subrecipients may not disburse funds directly to participants to pay the leasing costs, but must pay individual landlords directly, and must only be used for homeless individuals or families.
- 4) Leasing assistance may not be provided to a program participant who is already receiving rental assistance, or leasing assistance, or living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.

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- 5) Leasing assistance is subject to the requirements of the Lead-Based Paint Poisoning Prevention Act. For residential structures constructed before 1978, there are requirements and procedures for addressing the hazards of lead-based paint. The requirements encompass both the residential unit, and non-dwelling portions of a structure that might be used by children under seven (7) years of age, such as a day care center.
- 6) Neither the recipient nor the subrecipient may lease property (that it owns) to itself, a parent, or a subsidiary organization. The funds designated for Leasing may only be used for the actual costs of leasing a unit. They may not be used to pay for a recipient or subrecipient's mortgage or other costs.
- 7) The Howard County Government, or any of its subsidiaries, may not own property that is leased to a client of the Howard County CoC PSH program.

Vacant Units

The recipient or subrecipient (whichever entity holds the lease with the landlord) must abide by the terms of the lease. Therefore, if the lease is for a year, then they must pay for a year regardless of whether the unit is occupied. If the lease is written in such a way that it ends when a client leaves, then they may not pay rent when a program participant is not living in the unit. Vacancy payments are eligible as long as it's in compliance with the lease agreement in place. Since leases are in the recipient or subrecipient's name, leaseholder is liable for paying the rent even if a leased unit is unoccupied. Therefore, recipients and subrecipients may continue to pay rent to owners even when vacant until a new program participant moves into the unit. It is notable that brief periods of stays in institutions, not to exceed 90 days for each occurrence, are **not** considered vacancies.

Property Damage

Leasing funds may not be used to pay for property damage, even upon client move-out.

Resident Rent

- 1) Rent must be calculated as stated in "Calculation of Rent" of this document.
- 2) The Howard County CoC requires program participants to pay their share of the rent to the sponsor agency.

Leases

- 1) Program participants in transitional housing must enter into an agreement for a term of at least one month.
- 2) The lease must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months for transitional housing.
- 3) Program participants must not enter into a lease agreement with the landlords; rather the project sponsor must enter into an agreement with the landlord, and have an occupancy agreement in place between the project sponsor and the household.
- 4) The leases and occupancy agreements must be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

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Placement in Vacancies

Housing First

Howard County's Continuum of Care and Coordinated System of Homeless Services follows and adheres to the Housing First model of placement into permanent supportive housing for those experiencing homelessness. The main Housing First components are:

- Few to no programmatic prerequisites to permanent housing entry
- Low barrier admission policies
- Rapid and streamlined entry into housing
- Supportive services are voluntary, but can and should be used to persistently engage tenants to ensure housing stability
- Tenants have full rights, responsibilities, and legal protections
- Practices and policies to prevent lease violations and evictions
- Applicable in a variety of housing models

Housing First is *"an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry."*

Review Panel Process

The Review Panel shall uphold the core components of Housing First, when making a selection for placement. The following process reflects those core components. After receiving all requested documentation, the CSHS Services Coordinator, will convene the Review Panel to select the most vulnerable household for placement into the available unit.

The Review Panel consists of the following representatives, for a total of six representatives including four who vote and one facilitator:

- 1) PSH CoC Subrecipient Agency (No vote)
- 2) Howard County Public Schools
- 3) Department of Social Services
- 4) Community Advocate
- 5) Howard County Health Department
- 6) CSHS Services Coordinator (Facilitator – No vote)

The Review Panel will select applicants for the unit by identifying homeless families and individuals who meet the criteria for the available unit. Depending on the unit's designation, the household must be:

- 1) A chronically homeless individual with a disability; or
- 2) A chronically homeless family in which one adult or child has a disability); or
- 3) An undesignated household (chronic/non-chronic, individual/family where individual or one adult or child has a disability).
- 4) *Note: Required documentation includes verification of Homelessness (and chronic homelessness, if applicable), and Disability Form.*

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The Review Panel's role includes:

- 1) Adhering to selection practices that promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, and participation in services.
- 2) Adhering to selection practices that are not based on the household's poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that indicate a lack of "housing readiness."
- 3) Accepting referrals directly from the Coordinated System of Homeless Services, which works directly with shelters, street outreach, drop-in centers, and other parts of the crisis response system in Howard County, to ensure the most vulnerable people experiencing homelessness have access to housing.
- 4) Not accepting or rejecting an applicant based on agreement to services or program compliance; services should be used to persistently engage tenants to ensure housing stability, but is not a requirement for entry.
- 5) Realize use of alcohol or drugs in and of itself (without other (current or past) lease violations) is not considered a reason for rejection of applicant.
- 6) Prioritize eligible tenants based on criteria *other than* "first come/first serve" such as duration/chronicity of homelessness, vulnerability, or high utilization of crisis services. (See Order of Priority for Chronic Homelessness).

Permanent Supportive Housing for Persons with Disabilities (PSHPWD)

- 1) When a McKinney unit becomes available the Subrecipient Agency will notify the CSHS Services Coordinator, and indicate whether the unit is for:
 - a. A chronically homeless individual with a disability; or
 - b. A chronically homeless family in which one adult or child has a disability); or
 - c. An undesignated household (chronic/non-chronic, individual/family where individual or one adult or child has a disability).
- 2) The CSHS Services Coordinator will alert the CSHS Case Managers about the available unit and ask them to submit recommendations to fill the unit, according to the unit's designation. The CSHS Case Managers will submit the following documentation to the CSHS Services Coordinator:
 - a. Verification of Homelessness and verification of disability, including the Disability Form;
 - b. Vulnerability Assessment; and
 - c. Narrative description of individual/household need.
- 3) After receiving all requested documentation, the CSHS Services Coordinator, will convene the Review Panel to select the most vulnerable household for placement into the available unit.
- 4) The Review Panel consists of the following representatives, for a total of six representatives including four who votes and one who facilitates:
 - a. PSH CoC Subrecipient Agency (no vote)
 - b. Howard County Public Schools
 - c. Department of Social Services
 - d. Community Advocate
 - e. Howard County Health Department
 - f. CSHS Services Coordinator (Facilitator – no vote)
- 5) Upon receipt of the referrals and acceptable disability verification, the Subrecipient Agency will process the referrals in chronological order, as sent from the CSHS Services Coordinator. Acceptable forms of disability verification are:

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- a. Written verification of the disability from a professional licensed by the state to diagnose and treat the disability and his or her certification that the disability is expected to be long-continuing or of indefinite duration and substantially impedes the individual's ability to live independently; OR
 - b. Written verification from the Social Security Administration; OR
 - c. The receipt of a disability check; OR
 - d. Intake staff-recorded observation of a disability that, no later than 45 days of the application for assistance, is confirmed and accompanied by evidence in this; OR
 - e. Other documentation approve by HUD.
- 6) Once verification has been confirmed, the Subrecipient Agency will work with the candidate and their Case Manager to complete the process for eligibility determination in chronological order, as received from the CSHS Services Coordinator, until units are filled.
- 7) No public notice requirement is imposed because these CoC has a specific target population and CSHS service providers. This ensures that the funds are used to assist the intended population.
- 8) The CSHS Services Coordinator will notify CSHS Case Managers that a selection has been made and the unit has been filled.
- 9) Required Documentation & Records
 - a. HMIS Client Authorization Form
 - b. CSHS Intake Form
 - c. CSHS Waiting List Form
 - d. Verification of Homelessness
 - e. Verification of Disability
 - f. Narrative Description of Household

Transitional Housing (TH)

- 1) Program Director will inform CSHS Services Coordinator of the coming availability of a unit of Transitional Housing (TH), and as soon as possible the specific date when a unit is vacated.
- 2) Subrecipient is committed to turning over units for admission of new families within 30 days of the vacancy. If an exception is needed to this expectation, Subrecipient's Program Director will inform CSHS Services Coordinator.
- 3) CSHS Services Coordinator will attempt to place a new family in a vacant TH unit as close to its turnover completion as possible, and work with Subrecipient's Program Director to do so.
- 4) Families selected for Subrecipient's Transitional Housing must comply with:
 - a. Income limits – Limits vary from unit to unit (30% to 50% of area median income).
 - b. Household composition – Families with at least one minor child.
 - c. Homeless status – Household must be certified as homeless.
 - d. Household size – Must fit with size of the available unit
- 5) Families who will reside in the Subrecipient's Transitional Housing will be identified and referred by the Howard County Coordinated System of Homeless Services (CSHS) based on these criteria:
 - a. Transitional housing aligns with the household's long term housing stability plan.
 - b. Transitional housing is intended to be a needed stepping stone to permanent housing.
- 6) CSHS Services Coordinator will consult with CSHS Participant Agencies to identify appropriate families to refer. Subrecipient's Program Director will be party to this consultation.

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- 7) Subrecipient's Program Director will review the household's history and will interview the head(s) of household of the referred family to assess the likelihood of placement in Subrecipient's Transitional Housing program:
 - a. Family interest/willingness to engage in Subrecipient's program of support and case management (not used to screen any household out of placement); and
 - b. Family's ability to live in scattered-site housing.
- 8) Subrecipient's Program Director will inform CSHS Services Coordinator whether the referred household is accepted or not to reside in the Subrecipient's Transitional Housing.
- 9) Accepted households will sign an Occupancy Agreement and a Program Agreement before taking residence in Subrecipient's Transitional Housing. The Program Agreement will outline the Subrecipient's case management service, program participation requirements and grievance procedure. If a Program Participant denies supportive services, the Subrecipient agency will not deny entrance into the program, but will incorporate engagement and outreach as part of ensuring the household is stably housed.

Participants & Housing

Requirements

The rules and responsibilities of clients are outlined in the client's program document, which is signed by the subrecipient or recipient agency and the participating household, at move-in. A signed lease between the client and property manager is required for participation in PSH under Rental Assistance. In addition to the lease and CoC program requirements, the property management agency may have additional policies to smoothly operate and manage their properties. All rental and leasing responsibilities as outlined in the client lease are that of the client. Neither the subrecipient nor the recipient agencies are party to any lease agreements determined by the landlord or property management agency. The subrecipient agency will facilitate the three-party lease agreement to establish the responsibilities for payment of rent, utilities etc., between the participant household and the subrecipient and landlord.

Eviction Prevention

Clients must immediately disclose to the recipient or subrecipient if they have received a notice of eviction. Housing stability is a priority, and eviction prevention services are essential for the case managers to ensure households remain stable. Linking the household to eviction prevention providers through the Coordinated System of Homeless Services by way of referral, may help with identified barriers that could lead a household to be unstable. If a client is not interested in these services, the case managers must continue to look for ways to assist the household to remain stably housed and avoid the eviction process.

Eviction Process

If a client receives a 30-day notice from the property manager they must give a copy to the case manager and/or support staff immediately so they may begin assisting the household with follow-up. In order to stop the eviction process before it is filed with the court, the client must meet with the property manager to address the lease violation and make a rent payment plan.

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Termination of Assistance

The recipient or subrecipient may terminate assistance to a program participant who violates program requirements or conditions of occupancy (lease agreement). Termination does not bar the recipient or subrecipient from providing further assistance at a later date to the same individual or family in the Howard County CoC.

Hard-to-house Populations

Recipients and subrecipients that are serving hard-to-house populations of homeless persons must exercise judgment and examine all extenuating circumstances in determining when violations are serious enough to warrant termination so that a program participant's assistance is terminated only in the most severe cases.

Due Process

If terminating assistance to a program participant, the recipient or subrecipient must follow the formal grievance procedures in place that recognizes the rights of individuals receiving assistance under the due process of law. This process consists of:

- Providing the program participant with a written copy of the program's rules and the termination process before the participant begins to receive assistance, and at annual recertification;
- Written notice to the program participant containing a clear statement of the reasons for termination; a review of the decision, in which the program participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
- Prompt written notice of the final decision to the program participant (see Grievance Policy and Procedure below).

Grievance Policy and Procedures

Policy Statement

It is the policy of the Howard County Continuum of Care to provide its members and program participants with a fair and efficient process to present and resolve complaints and grievances. In the case of complaints/grievances about programs, the CoC Lead Agency is the official oversight entity and the CoC Steering Group's input has considerable influence on its decisions. Each HUD funded organization shall have a grievance procedure and shall implement the procedure when applicable, and must incorporate the minimum steps, as listed here, regarding any complaints/grievances. A first-person written and/or documented complaint will be considered a grievance. A verbal, second-hand or hearsay complaint will be considered a complaint.

Written Grievances about the CoC

- Any grievance against the CoC will be reviewed by the Evaluation and Resource Allocation Committee within ten days of its receipt. The Chair will respond within 30 days by:
 - Assisting in articulating /identifying issues, if needed.
 - Determining what action needs to be taken, if any.
 - Responding in writing with clear identification of issue and specifics about its resolution.

Howard County Continuum of Care Policies & Procedures

Grievances/Complaints about a Program Receiving McKinney-Vento (CoC) Funds

- The person making the grievance or complaint will be asked if they have adhered to grievance procedures provided by the organization they are making a grievance or complaint about. If the person making the grievance or complaint has not gone through the grievance procedure provided by the organization, the Lead Agency will recommend that the person do so and document that recommendation.
- If the resolution provided by that organization was not satisfactory to the complainant, he/she may put the problem in writing and submit it to the Lead Agency. If the complainant does not want his/her name attached to the complaint, his/her anonymity will be protected. If the complainant is unwilling to put the concern in writing, the Lead Agency will document what has been said.
- Each situation will be treated seriously and with sensitivity, and will be documented for the record with date, time, program name, and nature of the complaint, as well as with any action taken towards resolution.
- Once a complaint or grievance has been submitted, the Lead agency will approach the problem program's representative, explain the complaint or grievance, and ask for a response to the charge(s) within ten (10) business days. Responses will be documented. It will be up to the Lead Agency to decide if the matter needs to be discussed by the ERA. A second complaint or grievance will be handled the same. The complainant may file a written appeal (second complaint) within ten (10) days of the first response; The client's written appeal will be responded to within ten (10) days of its receipt.
- If a program receives a third complaint, the ERA will review the situation and recommend action, including all correspondence and documentation. The Executive Director of the program being reviewed will be asked to respond to the ERA. The third complaint will be handled within the same timeframe as the first and second.
- All complaints or grievances involving vulnerable adults or children will be immediately turned over to the appropriate county office.

Note: Should a participant household believe they have been discriminated against by their landlord they should contact the Howard County Office of Human Rights and Office of Consumer Affairs immediately.

Annual Review Process

Clients are required to complete an annual review and re-certification with their case manager. They are expected to meet with their case manager and bring requested documentation with them. After their appointment, adjusted rent calculations (if applicable) will be applied the next full month, and a new payment agreement form will be signed processed. Copies will be sent to the client and the landlord and put into the client's file, and updated in the subrecipient or recipient agency's payment system. Any updated information must be entered into ServicePoint within five (5) business days of the review.

Landlord Requests for Rent Increases

In accordance with the terms of a client's lease, and state and local law, a landlord may request a rent increase. The new rent amount must still comply with the FMR and/or rent reasonableness and include a 60-day advance notice. Once the request is reviewed and approved to be within FMR and/or rent reasonable, a new rent calculation form will be completed and new payment agreement forms will be signed. Copies will be sent to the client and the landlord and put into the client's file, and updated in the

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subrecipient or recipient agency's payment system. Any updated information must be entered into ServicePoint within five (5) business days of the review.

Rent Adjustments

Clients are responsible for notifying the recipient or subrecipient agency upon receipt of a rent adjustment from the landlord and/or lease renewal notice. Clients should discuss the terms of any new agreement with their case manager, and sign a lease renewal as opposed to going on a month-to-month basis (which generally results in significantly higher rent or fees that would be paid by the client), unless it is in the best interest of the household, ie: planning to move (see below)

Participant Requests for Change in Unit Size/Location

Clients may request a Relocation Request Form from their case manager or the support staff if there has been an approved addition to their family household that would necessitate needing a different unit. A request for a different unit may be made for certain other eligible reasons:

- 1) Safety, health or disability reasons (i.e. need a first floor unit as stairs cannot be navigated);
- 2) Significant deterioration of maintenance at the existing development;
- 3) Significant deterioration of safety issues at the existing development;
- 4) Landlord's decision not to offer a renewal lease;
- 5) If the unit fails the HQS at annual inspection, and the landlord will not take necessary measures to comply; or
- 6) Increase or reduction in size of family household composition (see Eligibility & Source Documentation, of this document).

Supportive Services

General

Howard County CoC Supportive Services grant budget line items may be used to pay the awarded eligible costs to address the special needs of the program participants. Howard County CoC believes that supportive services are necessary to assist program participants obtain and maintain housing. An annual assessment of the service needs of the program participants should inform the type of case planning to best serve the households needs, and provide accordingly.

Duration

- 1) For a TH, supportive services must be made available to residents throughout the duration of their residence in the project.
- 2) For PSH, supportive services must be provided for the residents to enable them to live as independently as is practicable throughout the duration of their residence in the project.
- 3) Services may also be provided to former residents of TH and current residents of PSH who were homeless in the prior 6 months, for no more than 6 months after leaving TH or homelessness, respectively, to assist their adjustment to independent living.
- 4) Howard County CoC is not funded by HUD for Rapid Rehousing. In the event it is, rapid rehousing projects will require the program participant to meet with a case manager not less than once per month to assist the program participant in maintaining long-term housing stability.

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Eligible Costs

- 1) Annual Assessment of Service Needs. The costs of the assessment required by § 578.53(a)(2) are eligible costs.
- 2) Assistance with moving costs. Reasonable one-time moving costs are eligible and include truck rental and hiring a moving company.
- 3) Case management. The costs of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant(s) are eligible costs. Component services and activities consist of:
 - (i) Counseling;
 - (ii) Developing, securing, and coordinating services;
 - (iii) Using the centralized or coordinated assessment system as required under § 578.23(c)(9).
 - (iv) Obtaining federal, State, and local benefits;
 - (v) Monitoring and evaluating program participant progress;
 - (vi) Providing information and referrals to other providers;
 - (vii) Providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking; and
 - (viii) Developing an individualized housing and service plan, including planning a path to permanent housing stability.
- 4) Child care. The costs of establishing and operating child care, and providing child-care vouchers, for children from families experiencing homelessness, including providing meals and snacks, and comprehensive and coordinated developmental activities, are eligible.
 - (i) The children must be under the age of 13, unless they are disabled children.
 - (ii) Disabled children must be under the age of 18.
 - (iii) The child-care center must be licensed by the jurisdiction in which it operates in order for its costs to be eligible.
- 5) Education services. The costs of improving knowledge and basic educational skills are eligible.
 - (i) Services include instruction or training in consumer education, health education, substance abuse prevention, literacy, English as a Second Language, and General Educational Development (GED).
 - (ii) Component services or activities are screening, assessment and testing; individual or group instruction; tutoring; provision of books, supplies, and instructional material; counseling; and referral to community resources.
- 6) Employment assistance and job training. The costs of establishing and operating employment assistance and job training programs are eligible, including classroom, online and/or computer instruction, on-the-job instruction, services that assist individuals in securing employment, acquiring learning skills, and/or increasing earning potential. The cost of providing reasonable stipends to program participants in employment assistance and job training programs is also an eligible cost.
 - (i) Learning skills include those skills that can be used to secure and retain a job, including the acquisition of vocational licenses and/or certificates.
 - (ii) Services that assist individuals in securing employment consist of:
 - (A) Employment screening, assessment, or testing;
 - (B) Structured job skills and job-seeking skills;

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- (C) Special training and tutoring, including literacy training and prevocational training;
 - (D) Books and instructional material;
 - (E) Counseling or job coaching; and
 - (F) Referral to community resources.
- 7) Food. The cost of providing meals or groceries to program participants is eligible.
- 8) Housing search and counseling services. Costs of assisting eligible program participants to locate, obtain, and retain suitable housing are eligible.
- (i) Component services or activities are tenant counseling; assisting individuals and families to understand leases; securing utilities; and making moving arrangements.
 - (ii) Other eligible costs are:
 - (A) Mediation with property owners and landlords on behalf of eligible program participants;
 - (B) Credit counseling, accessing a free personal credit report, and resolving personal credit issues; and
 - (C) The payment of rental application fees.
- 9) Legal services. Eligible costs are the fees charged by licensed attorneys and by person(s) under the supervision of licensed attorneys, for advice and representation in matters that interfere with the homeless individual or family's ability to obtain and retain housing.
- (i) Eligible subject matters are child support; guardianship; paternity; emancipation; legal separation; orders of protection and other civil remedies for victims of domestic violence, dating violence, sexual assault, and stalking; appeal of veterans and public benefit claim denials; landlord tenant disputes; and the resolution of outstanding criminal warrants.
 - (ii) Component services or activities may include receiving and preparing cases for trial, provision of legal advice, representation at hearings, and counseling.
 - (iii) Fees based on the actual service performed (i.e., fee for service) are also eligible, but only if the cost would be less than the cost of hourly fees. Filing fees and other necessary court costs are also eligible. If the subrecipient is a legal services provider and performs the services itself, the eligible costs are the subrecipient's employees' salaries and other costs necessary to perform the services.
 - (iv) Legal services for immigration and citizenship matters and issues related to mortgages and homeownership are ineligible. Retainer fee arrangements and contingency fee arrangements are ineligible.
- 10) Life skills training. The costs of teaching critical life management skills that may never have been learned or have been lost during the course of physical or mental illness, domestic violence, substance abuse, and homelessness are eligible. These services must be necessary to assist the program participant to function independently in the community. Component life skills training are the budgeting of resources and money management, household management, conflict management, shopping for food and other needed items, nutrition, the use of public transportation, and parent training.
- 11) Mental health services. Eligible costs are the direct outpatient treatment of mental health conditions that are provided by licensed professionals. Component services are crisis interventions; counseling; individual, family, or group therapy sessions; the prescription of

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psychotropic medications or explanations about the use and management of medications; and combinations of therapeutic approaches to address multiple problems.

- 12) Outpatient health services. Eligible costs are the direct outpatient treatment of medical conditions when provided by licensed medical professionals including:
 - (i) Providing an analysis or assessment of an individual's health problems and the development of a treatment plan;
 - (ii) Assisting individuals to understand their health needs;
 - (iii) Providing directly or assisting individuals to obtain and utilize appropriate medical treatment;
 - (iv) Preventive medical care and health maintenance services, including in home health services and emergency medical services;
 - (v) Provision of appropriate medication;
 - (vi) Providing follow-up services; and
 - (vii) Preventive and non-cosmetic dental care.
- 13) Outreach services. The costs of activities to engage persons for the purpose of providing immediate support and intervention, as well as identifying potential program participants, are eligible.
 - (i) Eligible costs include the outreach worker's transportation costs and a cell phone to be used by the individual performing the outreach.
 - (ii) Component activities and services consist of: initial assessment; crisis counseling; addressing urgent physical needs, such as providing meals, blankets, clothes, or toiletries; actively connecting and providing people with information and referrals to homeless and mainstream programs; and publicizing the availability of the housing and/or services provided within the geographic area covered by the Continuum of Care.
- 14) Substance abuse treatment services. The costs of program participant intake and assessment, outpatient treatment, group and individual counseling, and drug testing are eligible. Inpatient detoxification and other inpatient drug or alcohol treatment are ineligible.
- 15) Transportation. Eligible costs are:
 - (i) The costs of program participant's travel on public transportation or in a vehicle provided by the recipient or subrecipient to and from medical care, employment, child care, or other services eligible under this section.
 - (ii) Mileage allowance for service workers to visit program participants and to carry out housing quality inspections;
 - (iii) The cost of purchasing or leasing a vehicle in which staff transports program participants and/or staff serving program participants;
 - (iv) The cost of gas, insurance, taxes, and maintenance for the vehicle;
 - (v) The costs of recipient or subrecipient staff to accompany or assist program participants to utilize public transportation; and
 - (vi) If public transportation options are not sufficient within the area, the recipient may make a one-time payment on behalf of a program participant needing car repairs or maintenance required to operate a personal vehicle, subject to the following:
 - (A) Payments for car repairs or maintenance on behalf of the program participant may not exceed 10 percent of the Blue Book value of the vehicle (Blue Book refers to the guidebook that compiles and quotes prices for new and used automobiles and other vehicles of all makes, models, and types);

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- (B) Payments for car repairs or maintenance must be paid by the recipient or subrecipient directly to the third party that repairs or maintains the car; and
 - (C) The recipients or subrecipients may require program participants to share in the cost of car repairs or maintenance as a condition of receiving assistance with car repairs or maintenance.
- 16) Utility deposits. This form of assistance consists of paying for utility deposits. Utility deposits must be a one-time fee, paid to utility companies.
- 17) Direct provision of services. If the a service described in paragraphs (e)(1) through (e)(16) of this section is being directly delivered by the recipient or subrecipient, eligible costs for those services also include:
- The costs of labor or supplies, and materials incurred by the recipient or subrecipient in directly providing supportive services to program participants; and
 - The salary and benefit packages of the recipient and subrecipient staff who directly deliver the services.

Ineligible Costs

- 1) Any cost that is not awarded through a designated budget line item in the award from HUD, will not be reimbursed with CoC grant funds.
- 2) Any activity that is not considered eligible under the awarded budget line item will not be reimbursed with CoC grant funds.
- 3) Staff training and the costs of obtaining professional licenses or certifications to provide supportive services are not eligible costs.

Housing Stability Plan

All participants in the Howard County CoC's programs will have a Housing Stability Plan. Thirty (30) days after program acceptance, the case manager and the household will develop the plan together. Goals should be set and evaluated periodically to ensure the household is maintaining housing stability. Goals will be determined by the household to ensuring continued engagement in their Housing Stability Plan.

Client Files

The program staff will maintain two (2) client file systems – a general client file and a case management file. HUD also requires that client information be entered regularly and accurately into ServicePoint. Client files should be kept in locked cabinets/drawers during non-business hours. All case files should be current and reflect the most recent documentation.

Note: Client release forms must be signed, and on file, for entry into ServicePoint, or for contact with medical practitioners and other agencies the client may be involved with.

Progress Notes. Case managers should keep their case management notes up-to-date and should enter into ServicePoint within 48 hours of a household change. Support notes should be entered as soon as possible after discussions are completed.

Access to Records. Access to the general files will be available to case managers, support staff, Subrecipient designees and the CoC Lead Agency. Files and other identifying information being used at a staff desk must not be left unattended.

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Confidentiality. ServicePoint, the Homeless Management Information System (HMIS) used by the Howard County CoC requires release form to be signed annually. The Howard County CoC adheres to a policy of confidentiality respecting every client's right to privacy. This is a legal directive, and important to serving households experiencing homelessness. Support services files are not available to property management even if head of households agree to the sharing of information. However, support staff may release information with property management staff or outside service providers with the expressed written permission of the head of household. Policies regarding sharing information with other collaborating agencies are outlined in the Howard County CoC HMIS Policies and Procedures.

Special Populations

All eligible costs are eligible to the same extent for program participants who are unaccompanied homeless youth; persons living with HIV/AIDS; and victims of domestic violence, dating violence, sexual assault, or stalking.

Monitoring Policy & Procedures

Program Monitoring

The Howard County Department of Citizen Services (the Collaborative Applicant and recipient agency), maintain standard procedures for ensuring that Continuum of Care (CoC) Program funds are used in accordance with federal requirements, and maintain sufficient records to enable the U.S. Department of Housing and Urban Development (HUD) to determine whether the recipient and its subrecipients are meeting the requirements of 24 CFR Part 578. To support this role and responsibility, CoC Program monitoring activities identified in this policy are outlined in the CoC Monitoring Checklists in the Appendices. HUD maintains responsibility for monitoring all CoC recipients, and this will include monitoring subrecipients when the recipient is selected for HUD program monitoring.

Specific standards include general recordkeeping requirements, fiscal management, program management, program participant records, and enforcement procedures. COC recipients/subrecipients are required to show compliance through appropriate program implementation, administration and recordkeeping. The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act Code of Federal Regulation (CFR) for the CoC Program 24 CFR Part 578, Subpart G Grant Administration, and the Office of Management Budget (OMB) to include OMB Circular A-133 Audits of States, Local Government and Non-profit Organizations and 24 CFR Part 85; the Lead-based Paint Poisoning Prevention Act (42 U.S.C. 4821-4846); the Section 3 of the Housing and Urban Development Act 24 CFR Part 135; and Environmental review activities subject to 24 CFR Part 50 govern CoC activities..

Definitions

Collaborative Applicant

Is defined to mean an instrumentality of state or local government, local government, nonprofit, state, or public housing authority that has been designated by the Continuum of Care to collect the required application information from all projects within the geographic area of the Continuum and apply for a grant.

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Recipient

Is defined to mean an applicant that signs a grant agreement with the U.S. Department of Housing and Urban Development (HUD), as defined in Section 424 of the McKinney-Vento Act.

Subrecipient

Is defined to mean a private nonprofit organization, State or local government, or instrumentality of a State or local government that receives a sub-grant from the recipient to operate a project. The definition of "subrecipient" is consistent with the definition of "project sponsor" found in Section 401 of the McKinney-Vento Act.

Administration And General Recordkeeping

Administration and recordkeeping activities include, but are not limited to:

Continuum of Care Records As the jurisdiction's CoC Collaborative Applicant, the Howard County Department of Citizen Services will maintain documentation relating to establishment and operations of the local Continuum of Care (CoC), as governed by the Howard County Board to Promote Self-Sufficiency.

Program Records (24 CFR 578.103(a) (3 - 17). Project Sponsors will maintain documentation relating to implementation and operations of CoC Program projects, to include, as applicable:

- 1) Homeless Status - Documentation of literal homelessness as defined in 24 CFR Part 576.500(b).
- 2) At Risk of Homeless Status - Documentation that establishes "at risk of homelessness" status of each individual or family who receives homelessness prevention assistance as defined in 24 CFR 576.500(c).
- 3) Reasonable Belief of Imminent Threat of Harm - Documentation for people who moved to a different Continuum of Care (region) due to imminent threat of further domestic violence, dating violence, sexual assault, or stalking under 24 CFR 578.51(c)(3).
- 4) Annual Income - Documentation of annual income for people receiving housing assistance where rent or occupancy charge is paid by the program participant to the recipient/subrecipient, and documentation of annual program income expenditures.
- 5) Program Participant Records - Documentation for each program participant receiving services, an annual assessment of services for those program participants that remain in the program for more than a year, and compliance with the termination of assistance requirements under 24 CFR 578.91.
- 6) Housing Standards - Documentation of compliance with the housing quality standards (HQS), to include inspection reports under 24 CFR 578.75(b).
- 7) Services Provided - Documentation of supportive services provided under the recipient or subrecipients program and the amounts spent on those services, to include the annual assessment of services for participants and that the service package offered to program participants was adjusted, as applicable.
- 8) Match Records of the source and use of contributions made to satisfy the match requirement in 24 CFR 478.73, to include the records of match provided by subrecipients. The record will show how the value placed on third party in-kind contributions was derived.
- 9) Conflicts Of Interest - Documentation to show compliance with organizational conflict-of-interest requirements.

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- 10) Homeless Participation - Documentation to show compliance with the homeless participation requirements.
- 11) Faith-based Activities - Documentation to show compliance with the faith-based requirements under 24 CFR 578.87(b), as applicable.
- 12) Affirmatively Furthering Fair Housing – Documentation of marketing, outreach, and other materials used to inform eligible persons of the program to document compliance with the requirements in 24 CFR 578.93(c)
- 13) Other Federal Requirement - Documentation in support of compliance with 24 CFR 578.99, as applicable. www.fhrs.gov
- 14) Subrecipients And Contractors - The recipient will retain copies of all solicitations from and agreements with subrecipients and their contractors, records of payment requests and payments, and documentation of monitoring findings with corrective actions and sanctions of subrecipients, as applicable.
- 15) Other Records Specified by HUD - Other documentation defined in 24 CFR 578.103(a)(1-17).

Confidentiality (24 CFR Part 578.103(b)) In addition to meeting the specific confidentiality and security requirements for HMIS data, the recipient and subrecipient will establish written procedures to ensure records containing program participant identifying information are kept secure and confidential, address or location of violence program site will not be made public, and the address or location of any housing of a program participant will not be made public.

Record Retention (24 CFR Part 578.103(c)) All records pertaining to CoC Program funds must be retained for the greater of 5 years from grant close-out, and 15 years from the date first occupied for acquisition, construction, and/or rehabilitation programs.

Access To Records (24 CFR Part 578.103(d)) All records are subject to Federal and public rights as outlined in this rule. Notwithstanding the confidentiality procedures, HUD, the HUD Office of the Inspector General, and the Comptroller General of the United States, or any of their authorized representatives, must have the right of access to all books, documents, papers, or other records of the recipient and its subrecipients that are pertinent to the CoC Program grant audits, examinations, excerpts, and transcripts.

Reports (24 CFR Part 578.103(e)) In addition to reports outlined in 24 CFR parts 84 and 85, the recipient must collect and report data on CoC Program funds in an Annual Performance Report (APR), as well as any additional reports required by HUD.

Financial Management Monitoring of CoC Programs will include internal controls to include:

- 1) Documentation demonstrating compliance with the Single Audit Act of 1984 and OMB Circular A-133 ("Audits of State, Local Governments, and Non-Profit Organizations"). All non-Federal entities that expend \$500,000 or more of Federal awards in a year are required to obtain an annual audit in accordance with the Single Audit Act Amendments of 1996, OMB Circular A-133, the OMB Circular Compliance Supplement and Government Auditing Standards.
<http://harvester.census.gov/fac>

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- 2) Compliance with the Federal Procurement Management Review under the Federal Suspension and Debarment. www.gsa.gov or <http://www.gsaig.gov/index.cfm/suspension-and-debarment-listed-by-state/>
- 3) Distribution. A recipient or subrecipient that receives funds through this part must: Distribute the appropriate portion of the funds to a subrecipient no later than 45 days after receiving an approvable request for such distribution from the subrecipient; and draw down funds at least once per quarter of the program year, after eligible activities commence.

Grant & Project Changes

The recipient nor the subrecipient may not make any significant changes to a project without prior HUD approval, evidenced by a grant amendment signed by HUD and the recipient. Any other minor changes to an approved grant must be fully documented in both the recipient and subrecipient records.

- 1) Significant changes include a change of recipient and subrecipient, a change of project site, additions or deletions of the types of eligible activities approved for a project, a shift of more than 10 percent from one approved eligible activity to another, a reduction in the number units, and a change in the subpopulation served.
- 2) Minor changes or program revisions that require recipient approval before the recipient or subrecipient can implement the change include all budget changes, a shift in funded program activities, and any program change not referenced above.

Remedial Actions & Sanctions

The Collaborative Applicant will review the performance of each recipient in carrying out its responsibilities. This will occur through annual on-site monitoring visits, A-133 and other financial audit reports, information generated by HUD financial and reporting systems (e.g. LOCCS and e-snaps), HMIS, the Annual Performance Report (APR) and, where applicable, relevant information pertaining to recipient and subrecipient performance gained from other sources, to include citizen comments, complaint determinations, and litigation. For programs that fail to meet program requirements:

- 1) The Collaborative Applicant shall notify the subrecipient of the non-performance and/or non-compliance with CoC Program regulations, and/or citizen comments and complaints.
- 2) If the recipient determines that a subrecipient is not complying with a program requirement or its subrecipient agreement; the recipient must take action through the following process:
 - a. The Collaborative Applicant will document the recipient or subrecipient's non-compliance with the CoC Program regulations and request a corrective action plan designed to prevent a continuation of the deficiency, to mitigate to the extent possible, its adverse effects, and to prevent its recurrence. This report will be submitted to the Collaborative Applicant by recipient or subrecipient.
 - b. The Collaborative Applicant will convene the CoC Board's Evaluation and Resource Allocation Committee to review program performance and compliance to the CoC Program regulations, and present the proposed corrective actions and sanctions. The recipient or subrecipient may attend the meeting to support the development of a schedule with milestones necessary to implement the corrective actions. The outcome of this review will be a Management Plan that assigns responsibilities for carrying out the remedial actions and dates for evaluating activities.

Howard County Continuum of Care Policies & Procedures

On-Site Monitoring

Annually, the Collaborative Applicant will contact the CoC Project Sponsors to schedule an on-site monitoring visit and confirm the monitoring visit with a date, time and location. The CoC Program Monitoring Checklists are provided, including the COC Internal Lists and the HUD issued checklists (from 24 CFR 583). On-site monitoring visits will be coordinated, when possible, for programs that receive both CoC Program and Emergency Solution Grant (ESG) funds. The CoC Lead Agency is the County's Recipient of CoC and Grantee for ESG State Program funds, and will attempt to coordinate with Project Sponsors to accomplish monitoring on behalf of both federal funds during one on-site monitoring visit, if the agency receives both. The monitors will observe the independently funded programs according to applicable CoC Program and ESG federal regulations.

1) The process includes:

- Monitors open with a pre-monitoring meeting to review the scope.
- Monitors then document, gather and analyze all information as asked from the checklists, the Grant Agreement, and any items from operating year in review, including APRs.
- Monitors ask the Project Sponsor if they have further comments, or would like additional information on any item.
- After the monitoring, an exit meeting is held. This is an opportunity to review any items that may pose an issue in an official report.
- Within 45 days receipt of all documentation, Monitors issue the Report to the Subrecipient. A 30 day period to make any corrections to concerns or findings is granted.
- Technical assistance, including templates, guides, regulations, and meetings are offered.

Howard County Continuum of Care Policies & Procedures

Coordinated System of Homeless Services (Coordinated Assessment System) Policies & Procedures (separate document)

Providing Assistance

In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, Howard County has established and follows written standards for providing Continuum of Care assistance through the Coordinated System of Homeless Services (CSHS), which includes policies and procedures for evaluating individuals' and families' eligibility for assistance, and policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional and permanent supportive housing assistance. Please see CSHS Policies & Procedures document for detailed description of the process for intake, assessment and ranking for services.

APPENDICES

APPENDIX A – CONTINUUM OF CARE, BOARD TO PROMOTE SELF-SUFFICIENCY– HOWARD COUNTY CODE

APPENDIX B – CONTINUUM OF CARE (BOARD TO PROMOTE SELF-SUFFICIENCY) OPERATING PROCEDURE

APPENDIX C – LOCAL COC MONITORING TOOLS

1-LOCAL COC MONITORING OVERVIEW

2-LOCAL COC MONITORING CHECKLIST

3-LOCAL COC ANNUAL PERFORMANCE REPORT REVIEW

**APPENDIX D – EVALUATION AND RESOURCE ALLOCATION (ERA)
COMMITTEE CONFIDENTIALITY AGREEMENT**

Howard County Continuum of Care Policies & Procedures

APPENDIX A – CONTINUUM OF CARE, BOARD TO PROMOTE SELF-SUFFICIENCY– HOWARD COUNTY CODE

Introduced 4/17/08
Public Hearing 4/22/08
Council Action 5/5/08
Executive Action 5/8/08
Effective Date 7/9/08

County Council Of Howard County, Maryland

2008 Legislative Session

Legislative Day No. 4

Bill No. 23 -2008

Introduced by: The Chairperson at the request of the County Executive

AN ACT establishing a Board to Promote Self-Sufficiency; providing for the membership, terms, officers, and staffing of the Board; setting forth the requirements for meetings and voting; authorizing the use of subcommittees and the adoption of certain Operating Procedures; providing for the purpose and responsibilities of the Board; providing the expiration dates of the terms of the initial members of the Board; providing for certain exceptions applicable to the Board; and generally relating to the Board to Promote Self-Sufficiency.

Introduced and read first time April 7, 2008. Ordered posted and hearing scheduled.

By order

Sheila M. Tolliver
Sheila M. Tolliver, Administrator

Having been posted and notice of time & place of hearing & title of Bill having been published according to Charter, the Bill was read for a second time at a public hearing on April 22, 2008.

By order

Sheila M. Tolliver
Sheila M. Tolliver, Administrator

This Bill was read the third time on May 5, 2008 and Passed ✓. Passed with amendments ✓, Failed .

By order

Sheila M. Tolliver
Sheila M. Tolliver, Administrator

Sealed with the County Seal and presented to the County Executive for approval this 6th day of May, 2008 at 3:00 a.m./p.m.

By order

Sheila M. Tolliver
Sheila M. Tolliver, Administrator

Approved Vetoed by the County Executive May 8, 2008

Ken Ulman
Ken Ulman, County Executive

NOTE: [[text in brackets]] indicates deletions from existing law; TEXT IN SMALL CAPITALS indicates additions to existing law; Strike-out indicates material deleted by amendment; Underlining indicates material added by amendment.

1 *Section 1. Be It Enacted by the County Council of Howard County, Maryland, that*
2 *Section 2.103 "Applicability" of Article II "Administrative Rules" of Subtitle 1*
3 *"Administrative Procedure Act" of Title 2 "Administrative Procedures" of the Howard*
4 *County Code is amended to read as follows:*

5
6 **Title 2. Administrative Procedures**

7 **Subtitle 1. Administrative Procedure Act.**

8 **Article II. Administrative Rules.**
9

10 **Section 2.103. Applicability.**

11 (a) *General:* Except as provided in subsection (b), the provisions of [this] article II shall
12 apply to and govern the adoption of rules by all county agencies which are authorized to
13 make rules. In the event of a conflict between this subtitle and a substantive provision of
14 an enabling act of an agency, the latter shall prevail.

15 (b) This article does not apply to the following agencies: The adult public guardianship
16 review board, the advisory board on consumer affairs, the board of appeals, the board of
17 library trustees, the board of license commissioners, the board of social services, the
18 cable advisory committee, the commission on aging, the fire and rescue services board,
19 the historic landmarks and sites board, the mental health advisory board, the plumbing
20 advisory board, the public works board, the recreation and parks board, the alcohol and
21 drug abuse advisory board, the commission on disability issues, the council for children
22 and youth, THE BOARD TO PROMOTE SELF-SUFFICIENCY, and the soil conservation district.
23

24 *Section 2. And Be It Further Enacted by the County Council of Howard County,*
25 *Maryland, that new Section 6.341 "Board to Promote Self-Sufficiency" is added to*
26 *Subtitle 3 "Boards and Commissions" of Title 6 "County Executive and the Executive*
27 *Branch" of the Howard County Code to read as follows:*

28
29 **Title 6. County Executive and the Executive Branch.**

30 **Subtitle 3. Boards and Commissions.**
31

1 **Section 6.341. Board to Promote Self-Sufficiency.**

2 There is a Board to Promote Self-Sufficiency. Its membership, duties, and responsibilities
3 are set forth in Subtitle 17, "Board to Promote Self-Sufficiency," of Title 12, "Health and
4 Social Services," of this Code.

5
6 *Section 3. And Be It Further Enacted by the County Council of Howard County,*
7 *Maryland, that new Subtitle 17 "Board to Promote Self-Sufficiency" is added to Title 12*
8 *"Health and Social Services" of the Howard County Code to read as follows:*

9
10 **Title 12. Health and Social Services.**

11 **Subtitle 17. Board to Promote Self-Sufficiency.**

12
13 **Section 17.100. General Provisions; Purpose.**

14 (a) *General provisions.* General provisions applicable to this Board are set forth in
15 Subtitle 3, "Boards and Commissions," of Title 6, "County Executive and the Executive
16 Branch" of this Code.

17 (b) *Purpose of the Board.* The purpose of the Board is to

- 18 (1) Support the goal of the Human Services Master Plan to build a community
19 that enables individuals and families to have adequate income and
20 resources to meet their basic needs;
21 (2) Act as the planning and coordinating mechanism for initiatives to:
22 (i) Promote the economic stability of individuals and families; and
23 (ii) Reduce the incidence of poverty in Howard County; and
24 (3) Serve as the governance body for the distribution of certain resources that
25 support initiatives of the Board.

26
27 **Section 17.101. Membership.**

28 (a) *Number of members.* The Board shall have a minimum of 20 members and a
29 maximum of 27 members.

30 (b) *Apportionment of Representation.* As practicable, the Board shall consist of a
31 majority private sector representation and a minority public sector representation.

1 (c) *Method of appointment.* Each appointed member shall be appointed by the County
2 Executive and confirmed by the County Council.

3 (d) *Qualifications of members.*

4 (1) All members shall either reside or work in Howard County.

5 (2) As practicable, the Board shall reflect the gender, geographic, ethnic, and
6 racial make up of the county.

7 (3) Ex-Officio members from the public sector shall include the following:

8 (i) The Director of the Department of Social Services, or the
9 Director's designee;

10 (ii) The Director of the Department of Citizen Services, or the
11 Director's designee;

12 (iii) The Director of the Mental Health Authority, or the Director's
13 designee;

14 (iv) The Director of the Howard County Health Department, or the
15 Director's designee;

16 (v) The Director of the Department of Housing and Community
17 Development, or the Director's designee;

18 (vi) The Director of the Department of Corrections, or the Director's
19 designee;

20 (vii) The Administrator of the Office of Workforce Development, or the
21 Administrator's designee;

22 (viii) The President of Howard Community College, or the President's
23 designee; and

24 (ix) The Superintendent of the Howard County Public School System,
25 or the Superintendent's designee.

26 (4) Ex-Officio members from the public sector may include:

27 (i) The Chief of the Department of Police, or the Chief's designee;
28 and

29 (ii) The Director of the Department of Planning and Zoning, or the
30 Director's designee.

31 (5) Appointed members from the private sector shall include:

- (i) A representative from the Community Action Council or any other federally designated anti-poverty agency;
 - (ii) A representative from Grassroots or any other homeless shelter serving both individuals and families;
 - (iii) A representative from Congregations Concerned for the Homeless or any other provider of Family Stabilization services;
 - (iv) A representative from the Association of Community Services or any other network of human services providers and advocates focused on serving families in Howard County;
 - (v) At least one individual who is, or was, homeless or a recipient of emergency, transitional, or subsidized housing services;
 - (vi) At least one individual who is, or was, a recipient of cash benefits or services, or both, to support their transition from welfare to work;
 - (vii) A representative of a business that provides entry and mid-level employment opportunities;
 - (viii) A representative of the Howard County Chamber of Commerce or any other organization whose purpose is to facilitate the success of businesses;
 - (ix) A representative of a faith-based organization;
 - (x) An individual or representative of a business that provides financial services; and
 - (xi) A representative of an organization that provides, or advocates for, transportation services.
- (6) Appointed members from the private sector may include other community members or representatives from non-profit organizations, for-profit organizations, or faith-based organizations that:
- (i) Provide crisis intervention services;
 - (ii) Support the financial stability of individuals and families;
 - (iii) Advocate for the basic needs of County residents, or

- 1 (iv) Represent the needs of children and families, seniors, or people
2 with mental or physical disabilities.
3

4 **Section 17.102. Terms of membership.**

5 Appointed members of the Board shall serve overlapping terms of 5 years or until a
6 successor is confirmed as provided in Section 6.300 of this Code.
7

8 **Section 17.103. Responsibilities of the Board.**

9 The Board shall:

- 10 (a) Review data and analyze the nature and characteristics of poverty within Howard
11 County, barriers to, and gaps in, existing services, and best practices from other
12 jurisdictions;
13 (b) Participate in the development of a collaborative, multi-disciplinary Plan for an
14 integrated strategy that emphasizes prevention and early intervention;
15 (c) Encourage and promote services and partnerships which support the implementation
16 of the Plan, maximize the efficient use of available resources, and generate additional
17 resources;
18 (d) Support the development of an integrated approach to data collection and information
19 management;
20 (e) Evaluate the impact, effectiveness, and cost-benefit of self-sufficiency initiatives;
21 (f) If requested by a County Agency, make recommendations to a County Agency on
22 the use and distribution of Federal, State, or Local funds for crisis intervention, financial
23 literacy, crisis prevention, and self-sufficiency activities including, but not limited to,
24 funds received under the Stewart B. McKinney-Vento Homelessness Assistance Act;
25 (g) Act as a County advocate for issues related to poverty, financial literacy and self-
26 sufficiency, and undertake activities which will educate and increase public awareness of
27 these issues;
28 (h) By December 1 of each year, submit a report to the County Executive and County
29 Council describing achievements for the previous fiscal year, and providing
30 recommendations regarding policies, legislation, and funding strategies deemed
31 necessary to accomplish the responsibilities and duties established by this section; and

1 (i) At the directive of the County Executive, or by resolution of the County Council,
2 review and make recommendations on any matter related to issues of poverty or
3 economic self-sufficiency in Howard County.
4

5 **Section 17.104. Officers.**

6 (a) *Election of Officers.* The Board shall elect a Chairperson and a Vice-Chairperson
7 from among its members to serve as the Board's Officers as follows:

8 (1) One Officer shall be from the public sector; and

9 (2) One Officer shall be from the private sector.

10 (b) *Vacancy.* If there is a vacancy during the term of an Officer, the Board shall elect an
11 officer to fill the remainder of the term.
12

13 **Section 17.105. Meetings; voting.**

14 (a) *Number and Place.* The Board shall meet at least quarterly at the times and places it
15 determines. The Board may meet more often for special meetings at the call of the
16 chairperson with ten days notice to members.

17 (b) *Board Meetings Are Public.* All meetings of the Board are open to the public except:

18 (1) When funding decisions are being made; or

19 (2) When a meeting is closed as authorized under federal, state, or local law.

20 (c) *Voting.*

21 (1) All members of the Board are voting members.

22 (2) A simple majority of current members shall constitute a quorum.

23 (3) Action may be taken by the Board upon a vote of a simple majority of the
24 members present at a meeting at which there is a quorum.
25

26 **Section 17.106. Committees; Operating Procedures; Staffing.**

27 (a) *Authority to establish committees.* The Board may establish committees and
28 subcommittees as it deems necessary to carry out its purpose and responsibilities.

29 (b) *Authority to establish operating procedures.* The Board shall adopt operating
30 procedures that set forth:

31 (1) Committee responsibilities;

1 (2) General operations of the Board; and

2 (3) Terms and term limits for officers.

3 (c) *Delegation of authority.* The Board may delegate certain decision-making authority
4 to a committee as deemed necessary to meet the committee's assigned responsibilities.

5 (d) *Committee membership.* A committee may include members of the community in
6 addition to members of the Board but the chairperson of the committee shall be a member
7 of the Board.

8 (e) *Department of Citizen Services.* The Department of Citizen Services shall provide
9 staffing for the Board.

10
11 ***Section 4. And Be It Further Enacted by the County Council of Howard County,***
12 ***Maryland, that the terms of the initial members of the Board shall expire as follows:***

13 (1) *At least 3 members in 2009;*

14 (2) *At least 4 members in 2010;*

15 (3) *At least 5 members in 2011; and*

16 (4) *At least 5 members in 2012.*

17
18 ***Section 5. And Be It Further Enacted by the County Council of Howard County,***
19 ***Maryland, that this Act shall become effective 61 days after its enactment***

Howard County Continuum of Care Policies & Procedures

APPENDIX B – CONTINUUM OF CARE (BOARD TO PROMOTE SELF-SUFFICIENCY) OPERATING PROCEDURE

Howard County Board to Promote Self-Sufficiency Operating Procedures

General/Purpose

The purpose of the Board to Promote Self-Sufficiency (the Board) shall be to 1) act as the planning and coordinating mechanism for initiatives to promote the economic stability of individuals and families and reduce the incidence of poverty in Howard County, and 2) serve as the governance body for the distribution of certain resources that support initiatives of the Board.

A listing of the Board's responsibilities is included in Section 12.1703 of the Howard County Code.

Membership

Composition

The Board shall consist of a minimum of twenty members and a maximum of twenty-seven members. To the extent possible, the majority of members shall be from the private sector and a minority from the public sector. Qualifications for membership are detailed in Section 12.1701 of the Howard County Code.

The Department of Citizen Services shall designate a staff person to serve as the Executive Secretary to the Board.

Responsibilities of Members

- Attend meetings, or notify the Chair or Executive Secretary in advance if they will be absent.
- Arrive at meetings on time prepared for discussion, bringing printed copies of any materials distributed in advance of the meeting.
- Serve on at least one committee or workgroup of the Board

Resignation or Removal

A member of the Board who wishes to resign shall submit a written letter of resignation to the County Executive, County Council, and the Executive Secretary of the Board.

In accordance with Section 903 of the Howard County Charter:

- A member of the Board is deemed to have resigned if absent from three consecutive meetings of the Board and not excused by resolution of the Board. The Chair (or Vice-Chair, if it is the Chair who has been absent) shall notify the County Executive in writing when this occurs.
- A member may be removed by the County Executive for incompetence, misconduct, or failure to perform the duties of the position.

Officers

The officers of the Board shall consist of a Chair and Vice-Chair. One officer shall be from the private sector, and one officer shall be from the public sector.

The term of office for Chair and Vice-Chair shall be one year, from July 1 through June 30. A Board member may serve no more than two consecutive terms as Chair or Vice-Chair.

Responsibilities of Officers

The Chair shall:

- Preside over all meetings of the Board;
- Call additional meetings, as needed;
- Appoint the Chair for committees of the Board, with the consent of the Board;
- Serve as the Board's representative to the County Executive and County Council; and
- Ensure that the Board is acting in such a manner that supports its mission and conforms to these operating procedures.

The Vice-Chair shall carry out the duties of the Chair in the Chair's absence, and perform such other duties as the Chair or Board may require.

Election

A nominating committee shall be appointed by the Chair at least one month prior to the June Board meeting. The nominating committee shall consist of three members, and shall include both public and private representatives.

The nominating committee shall present its recommendations for Chair and Vice-Chair at the June Board meeting for a vote. Members of the Board may also make nominations from the floor.

If a vacancy occurs in the position of either officer, the Board will hold a special election to fill the vacancy.

Meetings of the Board

Frequency: The Board shall meet at least quarterly. Additional meetings of the Board may be called by the Chair when necessary to conduct the business of the Board, or at the request of a majority of the members, with ten business days notice to all members and the Executive Secretary.

Annual meeting: The annual meeting of the Board shall take place in June and shall be considered a regular meeting. The business of the annual meeting shall include election of officers and a review of the activities of the Board during the fiscal year ending that month.

Quorum: A quorum shall be a simple majority of the current membership.

Voting:

- A simple majority of the members present at the meeting is required to pass a vote.
- Only Board members have voice and vote.
- A representative attending a Board meeting on behalf of an absent member has voice but not vote.
- The Executive Secretary has voice but not vote.
- Members of Board committees, who are not members of the Board, have voice only.
- Members of the public shall have voice at the discretion of the Chair.
- The Chair will vote only in the case of a tie.

Minutes: Minutes of all Board meetings will be recorded and distributed to all members.

Open Meetings Law: Meetings are subject to the Open Meetings Act. This requires that 1) meetings must be open to the public; 2) notice of meetings must be provided, and 3) written minutes of meetings must be prepared, and maintained for a minimum of one year.

Protocol: Meetings shall be conducted according to the latest edition of Roberts Rules of Order, Newly Revised.

Committees

The Board may establish such committees and sub-committees as it deems necessary to carry out its purpose and responsibilities, and may delegate certain decision-making authority to a committee as deemed necessary to meet the committee's assigned responsibilities.

The purpose, function and decision-making authority of each committee shall be defined at the time it is established by the Board. The Board shall, on an annual basis, review its committee structure and may amend the number and purpose of its committees if deemed necessary to advance the goals of the Board.

If the Board delegates decision-making authority to a committee, the Open Meetings Law applies to the committee, and 1) the committee's meetings must be open to the public; 2) notice of the committee's meetings must be provided, and 3) written minutes of the committee's meetings must be prepared and maintained for a minimum of one year. (See page 3 of the Open Meetings Act Manual, 6th Edition, October 2006).

Membership of a committee shall include both members of the Board and the community, but the Chair of each committee shall be a member of the Board.

Committees shall submit a quarterly work plan for review by the Board, and regular updates on its work.

The Committee Chair shall:

- call the meetings of the committee,
- chair the meetings,

- delegate tasks among members as needed to accomplish the function of the committee, and
- bring committee recommendations to the Board for discussion and vote.

The Chair and Vice-Chair of the Board shall be ex officio members of each committee.

Annual Report

The Board shall submit an annual report of its activities to the County Executive and County Council by December 1 of each year.

Conflict of Interest

Members of the Board shall be subject to the Howard County Public Ethics Law. A member of the Board shall declare the member's interest in any matter before the Board. If there is any interest to a private sector member in a matter before the Board, the member may not participate in discussions or vote on the matter.

Amendments to the Operating Procedures

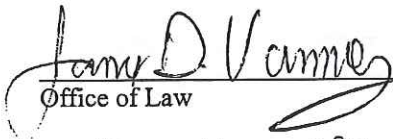
- Any proposed amendments to these Operating Procedures must be presented in writing at a Board meeting.
- The vote on the proposed amendment will be taken at the following Board meeting.
- A 2/3 vote is required to pass the amendment.
- The proposed amendment to the Operating Rules will become effective immediately after the close of the meeting at which the amendment is adopted.

Adopted by Board:


Signature of Board Chair

4-23-2009
Date

Reviewed for legal sufficiency:


Office of Law

May 11, 2008
Date

Approved, 04/23/09

Continuum of Care (CoC) Levels of Responsibilities & Governance

Fulfills Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Requirements

CoC Board/BPSS

Responsibilities

- Develop, follow and annually update the CoC governance charter;
- Appoint CoC committees/groups to carry out the work of the CoC;
- Receive reports on a monthly basis from the Chairs of CoC Committees and the CoC Lead Agency on the activities of the CoC; and
- Review and approve initiatives developed by the CoC.

Membership

BPSS

Meetings

Monthly

Evaluation and Resource Allocation Committee (ERA)

Responsibilities

- Analyze data on homelessness from HMIS, PIT, and APRs
- Evaluate performance of the CSHS and individual CoC programs
- Rate/rank funding proposals related to homeless services (federal, state & local) based on needs/gaps within the CoC
- Rank CoC project applications
- Recommend reallocating project funds as necessary to meet needs of CoC
- Communicate findings and decisions to CoC Board and Steering Group

Membership

- BPSS member (chair)
- Non-provider members in the CoC & community volunteers

Meetings

Monthly

Staff support

CoC Manager, HMIS Administrator

CoC Steering Group

Responsibilities

- Perform the planning element of the CoC Lead Agency
- Update Plan to End Homelessness annually; ensure goals and concepts are reflected in all CoC activities
- Guide CSHS processes; review System supports, roles, and client flow; examine strengths/weaknesses; and monitor goals (the Partners Forum, with expanded role)
- Research best practices
- Provide input to CoC application
- Convene HMIS sub-committee
- Perform the annual Point-in-Time survey
- Convene ad hoc workgroups as needed
- Provide recommendations to the Evaluation and Resource Allocation Committee
- Report all CoC activities to DCS - DCS will update and receive input from the Board as needed

Membership

- CoC Lead Agency
- Providers and non-providers
- Community volunteers
- Consumer representative

Meetings

Monthly

HMIS Sub-Group

Responsibilities

- Fulfill requirements as the HMIS Lead Agency
- Review the quality of program level data
- Review the HMIS performance of participating housing and service providers
- Monitor performance of system users
- Review HMIS policies and procedures for necessary updates

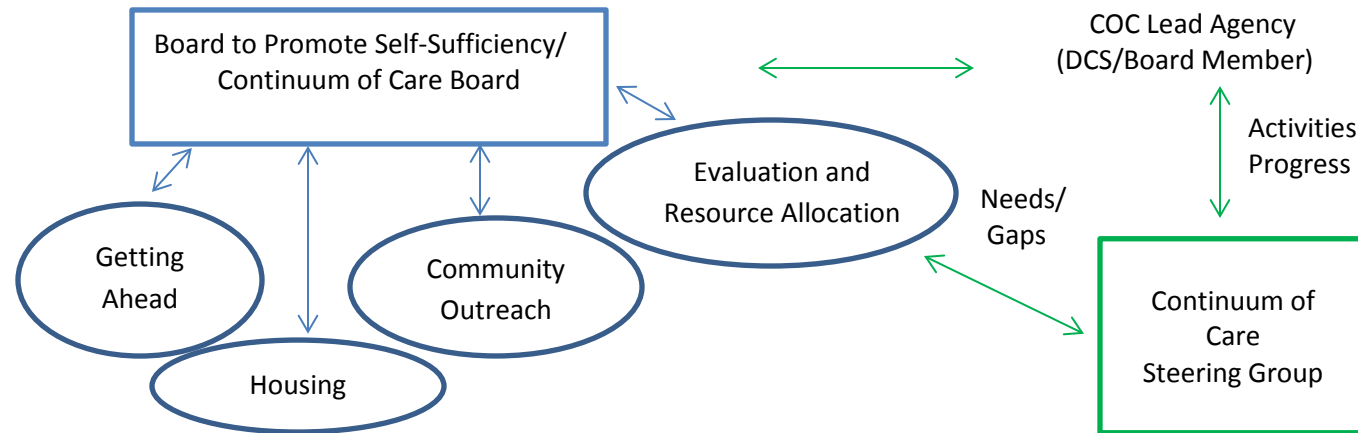
Membership

- HMIS Admin (chair)
- HMIS lead users
- Planning Comm. member(s)

Meetings

Quarterly

Continuum of Care DCS Steering Group – link to BPSS – 10/19/15
Roles & Responsibilities Breakdown to Meet Requirements of Interim Rule for COC Governance



Evaluation and Resource Allocation Committee Membership

Chair: Karen Butler, DSS, BPSS Member

1. Joe Willmott, Community Member
2. Dee Athey, Community Member
3. Craig Cummings, Community Member
4. Kathy Dixon, Community Member
5. Christiana Mercer, UWCM

Staff: COC Manager
 HMIS Administrator

Responsibilities

1. Analyze data on homelessness from HMIS, PIT, and APRs
2. Evaluate performance of the CSHS and individual COC programs
3. Rate/rank funding proposals related to homeless services (federal, state & local) based on needs/gaps within the COC
4. Rank COC project applications
5. Recommend reallocating project funds as necessary to meet needs of COC
6. Communicate findings and decisions to COC Board and Steering Committee

COC Steering Group

Membership (all agencies participating in the CoC)

Chair: COC Manager, Department of Citizen Services, Lead Agency

Other Members: HMIS Administrator, CSHS Services Coordinator

1. Bridges to Housing Stability, Inc.
2. Community Action Council of Howard County, Inc.
3. Community Member
4. Consumer
5. Department of Social Services
6. Family and Children Services
7. Grassroots Crisis Intervention Center, Inc.
8. Howard County Public School System
9. Howard County Health Department
10. Hope Works of Howard County, Inc.
11. Housing County Housing Commission
12. Howard County Mental Health Authority
13. Humanim, Inc.
14. LARS
15. Makingchange, Inc.
16. Howard County Office of Workforce Development
17. Salvation Army
18. Volunteers of America, Inc.

Responsibilities

1. Update Plan to End Homelessness annually; ensure goals and concepts are reflected in all COC activities
2. Guide CSHS processes; review System supports, roles , and client flow; examine strengths/weaknesses; and monitor goals (the Partners Forum, with expanded role)
3. Research best practices
4. Provide input to COC application
5. Convene HMIS sub-committee
6. Perform the annual Point-in-Time survey
7. Convene ad hoc workgroups as needed
8. Provide recommendations to the Evaluation and Resource Allocation Committee
9. Report all COC activities to DCS - DCS will update and receive input from the Board as needed

Howard County Continuum of Care (COC) Steering Group

Overview – 10/20/15

Roles & Responsibilities for Governance of the CoC

Purpose

The CoC Steering Group (Steering Group) will facilitate actions necessary to accomplish the goals of Howard County's Plan to End Homelessness (PEH).

Responsibilities

The Steering Group will inform the Department of Citizen Services (DCS), in its role as the CoC Lead Agency, and will provide periodic updates on the group's activities to the COC Board (Board to Promote Self-Sufficiency - BPSS).

The Steering Group will set and revise goals for the PEH and COC activities, and specifically:

1. Update PEH annually; ensure goals and concepts are reflected in all COC activities
2. Guide CSHS processes; review System supports, roles, and client flow; examine strengths/weaknesses; and monitor goals (the Partners Forum, with expanded role)
3. Research best practices
4. Provide input to the COC application
5. Convene HMIS sub-committee
6. Perform the annual Point-in-Time survey
7. Convene ad hoc workgroups as needed
8. Inform and provide recommendations to the Evaluation and Resource Allocation Committee of the BPSS on significant activities, needs and gaps related to meeting the goals of the PEH

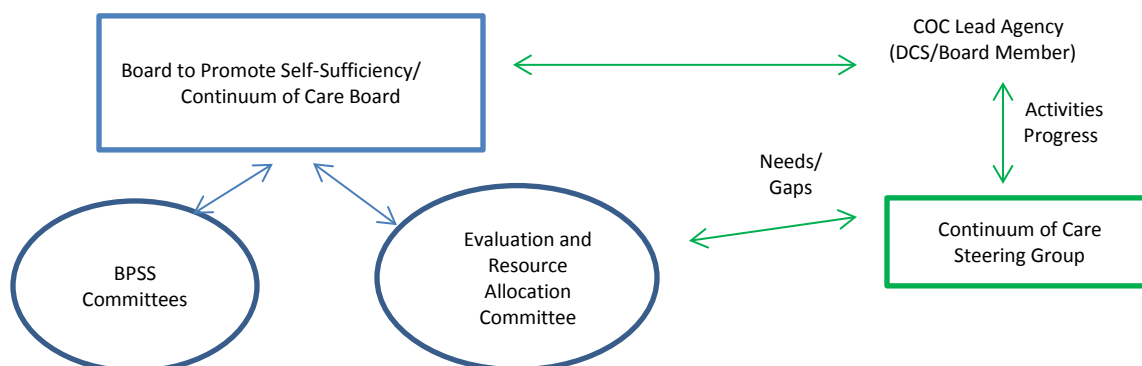
The Steering Group will meet monthly; agendas will be provided in advance and meeting minutes will be posted on the website.

Membership

At a minimum, membership will include all CSHS Partner Agencies and other agencies in Howard County that have a vested interest in ending homelessness. The only prerequisite for membership is the agency must serve Howard County residents. Membership will include, but not be limited to representatives from the following agencies:

- | | | |
|--|----------------------------|---|
| 1. Bridges to Housing Stability, Inc. | 6. Family & Children Svcs | 14. Makingchange |
| 2. Community Action Council of Howard County | 7. Grassroots | 15. Mental Health Authority |
| 3. Community Member | 8. HC Public School System | 16. Office of Workforce Development |
| 4. Consumer | 9. Health Department | 17. Salvation Army |
| 5. Dept. of Social Services | 10. Hope Works | 18. Volunteers of America of the Chesapeake, Inc. |
| | 11. Housing Commission | |
| | 12. Humanim, Inc. | |
| | 13. LARS | |

- Each member agency will have one vote but multiple representatives may attend meetings.
- The COC Manager of the CoC Lead Agency will chair the meetings and the HMIS Administrator and CSHS Services Coordinator will be voting members of the Group.
- Recommendations from the Steering Group on processes and programmatic changes as related to the goals and activities of the PEH and COC will be determined by majority vote.



Howard County Continuum of Care Policies & Procedures

APPENDIX C – LOCAL COC MONITORING TOOLS

Howard County Continuum of Care Policies & Procedures

1-LOCAL COC MONITORING OVERVIEW

HUD Grant Project Number:

Project Title:

Date:

Performed by:

Title:

CoC Number:

Phone:

Email:

Monitoring the CoC Program project of:

Recipient Agency: ☐

Subrecipient Agency: ☐

Agency Point of Contact:

Agency Alternate:

Agency Phone:

Howard County Continuum of Care Policies & Procedures

2-LOCAL COC MONITORING CHECKLIST

HUD Grant Project Number: _____

Project Title: _____ Date: _____

<i>GENERAL RECORD-KEEPING</i>	YES	NO	N/A
A. Are all records regarding the project (outside of financial records) centrally located?	☐	☐	☐
B. Do these records contain:	☐	☐	☐
1. CoC Program Grant Agreement with Federal Register HEARTH Act Rules	☐	☐	☐
2. Grant Agreement Amendments and Budget Revisions	☐	☐	☐
3. Award Letter	☐	☐	☐
4. Certificate of Liability Insurance (attach copy)	☐	☐	☐
5. Declaration of Restrictive Covenant, Trust Deed and Promissory Note (Acquisition, Construction & Rehab only)	☐	☐	☐
6. General correspondence relating to project	☐	☐	☐
C. Did the agency accrue any costs to the CoC Program grant prior to Award Letter?	☐	☐	☐
D. Does the agency subcontract for any services under the CoC Program?	☐	☐	☐
1. Is the approval to subcontract on file? (attach copy of subcontract)	☐	☐	☐
2. Are Grant Agreement requirements passed along to subcontractors?	☐	☐	☐
E. Does the agency have a record retention policy compliant with 24 CFR Part 578.103(17)? [CoC program records 5 years and acquisition/construction/rehab 15 years] (attach copy of policy)	☐	☐	☐
F. Are homeless or formerly homeless persons participating on board of directors or other equivalent policy-making entity of the agency? (24 CFR 578.75(q)) (attach copy of members of the policy-making entity)	☐	☐	☐
G. Does the agency Affirmatively Further Fair Housing as documented by their marketing, outreach, and other materials used to inform eligible persons of the program to document compliance with the requirements in 24 CFR 578.93(c)? (attach any outreach material used)	☐	☐	☐

Howard County Continuum of Care Policies & Procedures

<i>GENERAL RECORD-KEEPING</i>	YES	NO	N/A
<i>H. In addition to meeting the specific confidentiality and security requirements for HMIS data, does the agency have a policy on client confidentiality or a filing system to safeguard client confidentiality? [24 CFR 578.103(b)1. (attach copy of policy)]</i>	☐	☐	☐
<i>I. Is HMIS Privacy Posting displayed? Does agency staff provide a copy of the Privacy Notice to consumers?</i>	☐	☐	☐
<i>J. Does the agency retain documentation of compliance with the Housing Standards in 24 CFR 578.75(b), including inspection reports?</i>	☐	☐	☐
<i>K. Does the agency retain documentation of compliance with the faith-based activities requirements under 24 CFR 578.87(b)?</i>	☐	☐	☐
<i>L. Does the agency retain documentation of compliance with the Transparency Act Reporting under the Office of Management and Budget (OMB) Circulars 24 CFR Part 84 and 85 Administrative Requirements for Grants and Agreements, Circular A-133 Single Audit, and other federal requirements in compliance with 24 CFR 578.99?</i>	☐	☐	☐
<i>M. Does the agency retain documentation of compliance with Lead-based Paint Poisoning Prevention Act 42.U.S.C. 4821-4846.</i>	☐	☐	☐
<i>N. Davis-Bacon Act - The provisions of the Davis-Bacon Act do not apply to this program (24 CFR 578.99(h))</i>	☐	☐	☐
<i>O. Has the agency established policies and practices that are consistent with, and do not restrict, the exercise of rights provided by subtitle B of title VII of the Act and other laws relating to the provision of educational and related services to individuals and families experiencing homelessness? (attach copy of policy)</i>	☐	☐	☐
<i>P. Has the agency designated 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? Name: _____</i>	☐	☐	☐
<i>Q. Is the agency, its officers, or any employees debarred or suspended from doing business with the Federal Government?</i>	☐	☐	☐
<i>R. Does the agency use the coordinated assessment system established by the Continuum of Care as set forth in § 578.7(a)(8)?</i>	☐	☐	☐
<i>S. Does the agency follow the written standards for providing Continuum of Care assistance developed by the Continuum of Care, specifically the Coordinated System of Homeless Services policies and procedures, which include the minimum requirements set forth in § 578.7(a)(9), related to</i>	☐	☐	☐

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<i>program participant placements?</i>			
GENERAL RECORD-KEEPING	YES	NO	N/A
T. <i>Has the agency adopted internal written standards for providing Continuum of Care assistance, in accordance with those developed by the Continuum of Care, specifically according to the Coordinated System of Homeless Services policies and procedures? (attach copy of policy)</i>	☐	☐	☐
U. <i>Has the agency adopted a policy on termination of program participants, including a formal process that recognizes the rights of individuals receiving assistance under the due process of law, including but not limited to grievance procedures? (attach copy of policy)</i>	☐	☐	☐
Notes/Comments:			

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FINANCIAL RECORDS	YES	NO	N/A
<i>A. Are all project financial records centrally located?</i>	☐	☐	☐
<i>B. Does the agency financial management system provide evidence that there are controls in place to account for all funds, property, and other assets?</i>	☐	☐	☐
<i>C. Does the agency financial system have separate account numbers for each project activity? Does the separate account number identify project costs on a line item basis?</i>	☐	☐	☐
<i>D. Are the agency's incurred grant costs consistent with the eligible costs awarded to agency within each program component?</i>	☐	☐	☐
<i>E. Does the agency compare budgeted line item costs against incurred costs in order to identify over/under spending on a line item basis so that adjustments can be made in a timely fashion?</i>	☐	☐	☐
<i>F. Are expenditures supported by timesheets, invoices, contracts, purchase orders, etc.? Note: Timesheets must be signed by the employee and his/her supervisor.</i>	☐	☐	☐
<i>G. Are direct salaries and wages of employees that are chargeable to a particular grant program or more than one grant program supported by time distribution records?</i>	☐	☐	☐
<i>H. Does the agency provide no less than 25% monthly in funds or in-kind contributions from other sources as match for HUD-funded grant funds, except for leasing? (24 CFR Part 578.73)</i>	☐	☐	☐
<i>I. Before grant execution, did the agency provide third party documentation (e.g. MOU) between the agency and any third party that will provide the services? (24 CFR 578.73(c)(3)) Note: Agency will provide for inspection the records documenting the service hours provided.</i>	☐	☐	☐
<i>J. Does the agency prepare and submit monthly, or at a minimum quarterly, reimbursement reports and invoices?</i>	☐	☐	☐
<i>K. Does agency understand that project records need to be retained for a minimum of five (5) years after close-out of the grant or clearance of any audit findings, and 15 years after close-out of a grant that funds acquisition, construction or rehabilitation activities?</i>	☐	☐	☐
<i>L. Has the agency been audited by independent auditors? If yes, were there any findings that the recipient is required to resolve? (attach copy of most recent completed audit)</i>	☐	☐	☐

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FINANCIAL RECORDS	YES	NO	N/A
<i>M. Is the agency currently registered with the System for Awards Management (SAM) to do business with the federal government?</i>	☐	☐	☐
<i>N. Has any program income been generated through any CoC Program-funded activities? (24 CFR Part 578.103(a)(6))</i>	☐	☐	☐
<i>O. If program income <u>has</u> been generated, has the agency reported the income generated through the use of the CoC Program funds?</i>	☐	☐	☐
<i>P. If program income has been generated, has the program income been disbursed only for eligible Coe Program activities?</i>	☐	☐	☐
<i>Q. Has the agency expended program income to pay program costs prior to making further HUD-fund cash withdrawals?</i>	☐	☐	☐
<i>R. Is the agency in compliance with OMB Circular A-122, Cost Principles for Non-Profit Organizations, which outlines the project costs that are and are not eligible for payment with federal funds; OMB Circular A-87 Cost Principles for State, Local and Indian Tribal Governments, and 24 CFR Part 84, Uniform Administrative Requirements for Grants and Agreements with Institutions of High Education, Hospitals, and Other Non-Profit Organizations, except where inconsistent with the provisions of this part?</i>	☐	☐	☐

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PROGRAM PARTICIPANT FILE RECORDKEEPING	YES	NO	N/A
<i>Complete this checklist for each Program Participant file reviewed.</i>			
A. Are all records regarding the program participant centrally located?	☐	☐	☐
B. Do these records contain:	☐	☐	☐
1. Documentation that program participant has been screened via centralized assessment system and determined eligible for CoC Program assistance? (CSHS forms, Review Panel Process followed)	☐	☐	☐
2. Documentation for verification of homeless status?	☐	☐	☐
3. Are program participants coming from the target population identified in the grant application; e.g. disability, etc?	☐	☐	☐
4. Does the file include verification of the participant's disability? [For Permanent Supportive Housing]	☐	☐	☐
5. Documentation for all sources of income.	☐	☐	☐
6. Summary of steps taken to verify that the participant does not receive other subsidies for rent, utilities, etc.	☐	☐	☐
7. Documentation of search in HMIS for duplicative services AND prior rental/utility assistance to ensure maximum number of payments are not exceeded.	☐	☐	☐
8. Does the file contain documentation of total adjusted income and rent calculation? Annual re-certification? (including HMIS Interim Assessment.)	☐	☐	☐
9. Evidence that Race and Ethnicity data is tracked according to federal reporting requirements.	☐	☐	☐
10. Documentation supporting that if CoC Program assistance has ended, that the household is no longer in need of services, and household has been exited out of HMIS?	☐	☐	☐
11. Documentation for termination if the participant has been terminated from the program, evidenced by following the termination policy?	☐	☐	☐
12. Lease between the program participant and landlord?	☐	☐	☐

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C. Documentation that the case manager has met with the household at least monthly during their program enrollment period to develop individual service plan. Do these records include:	☐	☐	☐
1. Program intake/eligibility documentation?	☐	☐	☐
2. Identification, including birth certificate, social security card, driver license, or passport?	☐	☐	☐
3. HMIS Consent to Release Information Form signed by both client and staff?	☐	☐	☐
4. Is there a completed HMIS Entry/Exit form in the file? Is exiting data completed if the case is closed? Are there Interim Assessments completed for Annual Reviews?	☐	☐	☐
5. Evidence of referrals to mainstream resources, etc.? a. If Yes, which ones? _____ b. If No, why not? _____	☐ 	☐ 	☐
6. Copy of household budget and budget goals, including housing stability plan?	☐ ☐	☐ ☐	☐ ☐
7. Are the most recent income Fair Market Rent and Rent Reasonableness guidelines being used? Are they on file?	☐	☐	☐
8. For transitional housing, do the entry-exit dates exceed the 24-month limitation of stay? Does the file explain the need?	☐ ☐	☐ ☐	☐ ☐
9. Completed Housing Quality Standards (HQS) Inspection (24 CFR 578.75(b)) <i>Note: Initial HQS inspection plus annual inspections. CoC Program rent assistance requires HQS inspection.</i>	☐	☐	☐
Program Participant HMIS Unique ID#: _____			
Notes/Comments:			

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3-LOCAL COC ANNUAL PERFORMANCE REPORT REVIEW

HUD Grant Project Number: _____

Project Title: _____ Date: _____

This section will monitor the performance outcomes and deficiencies of the HUD-funded project using the most recent Annual Performance Report (APR) submitted. The review will occur during the on-site monitoring visit between the Collaborative Applicant and the Agency Program Manager or his/her designee.

Annual Performance Report grant period _____ - _____	YES	NO	N/A
<i>1. Did the agency and recipient complete and submit documentation in support of the Annual Performance Report (APR) within 90-days following the grant term?</i> <i>a. If not, why?</i>			
<i>2. Are the number of participants being served and units filled consistent with the number targeted in the grant application?</i> <i>a. If not, explain why.</i>			
<i>3. How many participants moved to permanent housing during a 12-month period? Does this meet the goal established in the grant application?</i> <i>a. If not, what actions are being taken to improve this outcome?</i>			
<i>4. How many adult participants improved their earned income through employment by program exit? Does this meet the goal established in the grant application?</i> <i>a. If not, what actions are being taken to improve this outcome?</i>			
<i>5. How many adult participants improved their non-cash income through mainstream resources?</i> <i>a. Does this meet the goal established in the grant application?</i> <i>b. If not, what actions are being taken to connect participants to</i>			

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<i>mainstream resources?</i>			
<i>6. Do participants exit the program with greater self-determination and stable housing? (SSOM)</i> <i>a. If not, what programmatic changes or resources would improve the self-determination and self-sufficiency of program participants?</i>			
<i>7. Was the program serving the number of units during the grant period as stated in the HUD Project Application?</i>			

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APPENDIX D – EVALUATION AND RESOURCE ALLOCATION (ERA) COMMITTEE CONFIDENTIALITY AGREEMENT

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Howard County Board to Promote Self Sufficiency *Evaluation and Resource Allocation (ERA) Committee* Confidentiality Agreement

As a member of the Howard County Evaluation and Resource Allocation (ERA) Committee, which is responsible for evaluating grant applications, reports, and making grant award recommendations on behalf of the Howard County Board to Promote Self Sufficiency, I agree to:

1. Keep confidential all information regarding grant applications, awards, reports and any recommendations, including all discussions points.
2. Not reveal any evaluation discussions, grant award recommendations, or reallocation decisions prior to the announcement of those decisions.

If I have questions about whether a particular type of information is confidential, I agree to consult the Chair or the CoC Manager before discussing with or revealing the information to anyone except members of the ERA Committee. I understand that accessing or releasing confidential information and/or records, or causing confidential information and/or records to be accessed or released, by myself, other individuals, clients, relatives, etc., outside the scope of my assigned role/duties constitute a violation of this agreement.

I further agree that it is my responsibility to ensure the confidentiality of all information which has been issued to me in confidence, even after my access has ended. Pursuant to this agreement, I certify that I have read and understand my obligations and responsibilities in connection with protecting confidential information and/or records, including grant applications, awards, reports and any recommendations, including all discussions points. I agree to fully indemnify and hold harmless the County from any unauthorized use, improper use, or misuse of the information, or any violation of law arising out of or in connection with the acts or omissions of information presented as a result of my role in the Committee.

This Agreement and my obligations under it shall be binding.

[Individual's Signature]

Date

Karen Butler, ERA Committee Chair

Date

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HOWARD COUNTY CONTINUUM OF CARE FOR HOMELESS SERVICES

HOWARD COUNTY HMIS

Policies and Procedures

Updated 26 August 2014

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INTRODUCTION

The Howard County Continuum of Care for Homeless Services is administered by the Department of Citizen Services as the lead agency, with the Howard County Board to Promote Self Sufficiency serving in an advisory capacity. The Continuum utilizes Internet-based technology, known as ServicePoint, to assist homeless service organizations in Howard County capture information about the clients they serve.

One of the Continuum's goals is to determine the extent and nature of homelessness in Howard County. This is accomplished through analysis and release of data that are grounded in the actual experiences of homeless persons and the service providers who assist them in shelters and homeless assistance programs throughout the county. Information that is gathered is analyzed for an unduplicated count, aggregated (void of any identifying client level information), and made available to policy makers, service providers, advocates, and consumer representatives.

Potential benefits for homeless men, women, children, and case managers: Through the use of ServicePoint, case managers can assess their clients' needs to inform clients about services offered on site or available through referral. Case managers and clients can use on-line resource information to learn about resources that help clients find and keep permanent housing or meet other goals clients have for themselves. Service coordination can be improved when information is shared among case management staff within one agency or with staff in other agencies (with written client consent) who are serving the same clients.

Potential benefits for agency and program managers: Once aggregated, information can be used to garner a more complete understanding of clients' needs and outcomes, and then used to advocate for additional resources, complete grant applications, conduct evaluations of program services, and report to funders such as HUD. ServicePoint has the capability to generate the HUD Annual Performance Report (APR).

Potential benefits for the Howard County Continuum of Care and policy makers: Involvement in the project provides the capacity to programs within the Continuum to generate automated APRs, access aggregate reports that can assist in completion of the HUD required Unmet Need chart and other reports, and to utilize the aggregate data to inform policy decisions aimed at addressing and ending homelessness at local, state, and federal levels.

Governing Principles

Described below are the overall governing principles upon which all other decisions pertaining to the Howard County HMIS project are based.

Data Integrity: Data are the most valuable assets of the HMIS. It is our policy to protect this asset from accidental or intentional unauthorized modification, disclosure or destruction.

Access to Client Records: The Client Records Access policy is designed to protect against the recording of information in unauthorized locations or systems. Only staff who work directly with clients or who have administrative responsibilities will receive authorization to look at, enter, or edit client records. Additional privacy protection policies include:

- No client records will be shared electronically with another agency without written client consent;
- Client has the right to not answer any question, unless entry in to a service program requires it,
 - Client has the right to refuse service;
- Client has the right to know what has added to, deleted, or edited their client record;
- Client information transferred from one authorized location to another over the web is transmitted through a secure, encrypted connection.

Computer Crime: Computer crimes violate state and federal law as well as the Howard County HMIS Data Security Policy.

They include but are not limited to:

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- Unauthorized disclosure;
- Modification or destruction of data, programs, or hardware;
- Theft of computer services;
- Illegal copying of software;
- Invasion of privacy;
- Theft of hardware, software, peripherals, data or printouts;
- Misuse of communication networks;
- Promulgation of malicious software such as viruses;
- Breach of contract.

End User Ethics: Any deliberate action that adversely affects the resources of any participating organization or its employees is prohibited. ServicePoint users must not attempt to gain physical or logical access to data or systems for which they are not authorized. Users must not attempt to reverse-engineer commercial software. Users must not load unauthorized programs or data onto organizational computer systems.

SECTION 1: CONTRACTUAL REQUIREMENTS AND ROLES

Basic Requirements

The following agencies, or any receiving McKinney-Vento homeless funds, must participate in the Howard County HMIS:

- Community Action Council of Howard County
- Bridges to Housing Stability
- HOPE Works
- Grassroots Crisis Intervention Center
- Howard County Government, Department of Citizen Services
- Howard County Government, Department of Housing and Community Development
- Howard County Mental Health Authority
- Howard County Health Department

Additional agencies that offer appropriate services may, and are encouraged to, participate in the HMIS.

Howard County, Maryland, holds a contract with Bowman Systems for the use of its ServicePoint product. The County has fully funded this project and anticipates continue its contractual obligation provided funding is available. Participating agencies receiving McKinney-Vento funds may, at a later date, be required to cover annual licensing and user charges should the County be unable to provide funding.

Existing and new Participating Agencies will not be granted access to the ServicePoint software system until a HMIS Participation Agreement has been signed.

Management Structure

The Howard County Department of Citizen Services is the lead agency for the Howard County HMIS/ServicePoint. The Department is responsible for oversight of all day-to-day operations including, but not limited to: planning, scheduling, and meeting project objectives, overseeing usage of ServicePoint, and Governing Principles and Policies and Procedures. These responsibilities will be handled through the position of an HMIS Administrator.

The HMIS Administrator is also responsible for:

- Technical Assistance
 - Provide training on a regular basis for agency staff;
 - Provide technical assistance and troubleshooting as needed;
 - Provide technical assistance in generating funder-required reports.
- Data Analysis
 - Provide data quality queries to sites on a regular basis;
 - Provide detailed countywide reports on families and individuals accessing emergency shelter.

For more information see the HMIS Data Quality Plan.

Participating Agencies

The Executive Director of each Participating Agency will be responsible for oversight of all agency staff who generate or have access to client level data stored in ServicePoint. The Executive Director holds final responsibility for the adherence of his/her agency's personnel to the policies and procedures outlined in this document.

The Participating Agency's Executive Director is responsible for all activity associated with agency staff access and use of the ServicePoint system. This individual is responsible for establishing and monitoring agency procedures that meet the criteria for access to ServicePoint. The Executive Director will be held liable for any misuse of the system by his/her designated staff. The Executive Director agrees to allow access to the ServicePoint system based upon need. Need exists

only for those shelter staff, volunteers, or designated personnel who work directly with, or supervise staff who work directly with, clients.

The Executive Director will:

- Assume responsibility for integrity and protection of client level data entered into the ServicePoint system;
- Establish business controls and practices to ensure organizational adherence to the policies and procedures set forth herein;
- Communicate control and protection requirements to agency custodians and users;
- Monitor compliance and periodically review control decisions;
- Ensure the Universal Data Elements (defined by HUD) be entered into ServicePoint;
- Execute Interagency Data Sharing Agreements between any shelter/service program where sharing of client level information is to take place;
- Ensure users utilize Client Authorization forms to authorize the sharing of personal information electronically with other participating agencies through the ServicePoint system.

The Participant Agency's responsibilities are outlined in their HMIS Participation Agreement, the terms of which supersede all other documentation.

Howard County HMIS agrees to authorize use of the ServicePoint Software system only to users who need access to the system for technical administration of the system, report writing, data analysis and report generation, back-up administration or other essential activity associated with carrying out HMIS's responsibilities.

The **Participating Agency** agrees to authorize use of the ServicePoint Software system only to users who need access to the system for data entry, editing of client records, viewing of client records, report writing, administration or other essential activity associated with carrying out participating agency responsibilities.

Users are any persons who use the ServicePoint software for data processing services. They must be aware of the data's sensitivity and take appropriate measures to prevent unauthorized disclosure. Users are responsible for protecting institutional information to which they have access and for reporting security violations. Users must comply with the data security policy and standards as described in these Policies and procedures. They are accountable for their actions and for any actions undertaken with their usernames and passwords.

HMIS Committee

Responsibilities:

The HMIS Committee advises and supports Howard County HMIS operations in consumer involvement and quality assurance/accountability. The committee meets quarterly.

Membership of the HMIS Committee will be established according to the following guidelines:

- At least one representative from each participating agency;
- There will be a concerted effort to find replacement representatives when participation has been inactive or inconsistent from the organizations involved in the project;
- There will be a pro-active effort to fill gaps in the membership of the Committee in terms of constituency representation: consumer representatives, shelters for families and individuals, advocacy organizations, and government agencies that fund homeless assistance services, and statewide geographic distribution.

The HMIS Committee is an advisory committee to the HMIS. However, the HMIS Administrator delegates final decision making authority to the Committee on the selected key issues that follow. These issues include:

- Determining the guiding principles that should underlie the implementation activities of HMIS and participating organizations and service programs;
- Selecting the minimal data elements to be collected by all programs participating in the HMIS;
- Defining criteria, standards, and parameters for the release of aggregate data; and
- Ensuring adequate privacy protection provisions in project implementation.

The HMIS Committee will work with the HMIS Lead to:

- Advise for development and review of a privacy plan, security plan, and data quality plan, as well as any other HMIS policies and procedures;
- The data quality plan will include a plan to monitor the HMIS to ensure that:
 - Recipients and sub-recipients consistently participate in the HMIS;
 - HMIS is satisfying the requirements of all regulations and notices issued by HUD;
 - The HMIS Lead is fulfilling the obligations outlined in this HMIS Governance Charter and Participation Agreements with Participating Agencies.
- Oversee and monitor HMIS data collection and production of the following reports:
 - Point-In-Time Count;
 - Housing Inventory Chart;
 - Annual Homeless Assessment Report (AHAR); and
 - Annual Performance Reports (APRs).

SECTION 2: PARTICIPATION REQUIREMENTS

- **High Speed Internet Connection:** Broadband recommended by Vendor. (See "Connectivity" in Section 2)
- **Identification of Agency Point Person:** Designation of one key staff person to serve as the Point Person. This person will be responsible resetting passwords and monitoring software access. This person will also be responsible for training new staff persons on how to use the ServicePoint system.
- **Training:** Commitment of Agency Point Person and designated staff persons to attend training(s) provided by HMIS Administrator prior to accessing the system online
- **Interagency Data Sharing Agreements:** Interagency Data Sharing Agreements must be established between any shelter/service program where sharing of client level information is to take place. See attached Interagency Data Sharing Agreement.
- **Client Consent Forms:** must be created for clients to authorize the sharing of their personal information electronically with other Participating Agencies through the ServicePoint software system where applicable. See attached Client Authorization Form for example.
- **Participation Agreement:** Agencies are required to sign a participation agreement stating their commitment to follow the policies and procedures for effective use of the system. **Minimal Data Elements:** Agencies will be required to enter minimal data elements as defined by the HUD and the HMIS Committee.

Implementation Requirements

All new Participating Agencies must read and understand all participation requirements and complete all required documentation prior to implementation of the system.

HMIS Administrator will assist Participating Agencies in the completion of all required documentation.

Interagency Data Sharing Agreements

Written Agreement: Participating Agencies wishing to share information electronically through the ServicePoint System are required to provide, in writing, an agreement that has been signed between the Executive Directors of Participating Agencies. See attached Interagency Sharing Agreement.

Role of Executive Director: The Executive Director is responsible for abiding by all the policies stated in any Interagency Sharing Agreement.

- Executive Directors wishing to participate in a data sharing agreement contact HMIS Administrator to initiate the process.
- Executive Directors complete the Interagency Sharing Agreement. Each participating agency retains a copy of the agreement and a master is filed with the HMIS Lead Agency (Howard County Department of Citizen Services).
- Each Client whose record is being shared must agree via a written client consent form (CSHS Release of Information) to have their data shared. A client must be informed what information is being shared and with whom it is being shared and for what length of time.
-

Confidentiality and Informed Consent

Participating Agencies agree to abide by privacy protection standards and agree to uphold all standards of privacy as established by the Howard County Department of Citizen Services.

These include, but are not limited to:

Informed Consent: Oral Explanation (non-shared records): All clients will be provided an oral explanation that their information will be entered into a computerized record keeping system. The agency may want to develop a fact sheet to post within the agency. HMIS suggests including the following information in the fact sheet:

- **What ServicePoint is** - a web based information system that allows providers of homeless services to capture information about the persons they serve
- **Why the agency uses ServicePoint** - to understand their clients' needs, help plan appropriate services for the people they serve, and inform policy.
- **Security** - only staff who work directly with clients or who have administrative responsibilities for managing ServicePoint can review, enter, or edit client records.
- **Privacy Protection** - no information will be released to another agency without written consent. Client has the right to not answer any question, unless entry into a program requires it. Client has the right to refuse service. Client has the right to know who has added to, deleted, or edited their ServicePoint record. Information that is transferred over the web is through a secure connection.
- **Benefits for Clients** - case manager tells client what services are offered on site or by referral through the assessment process. Case manager and client can use information to assist clients in obtaining resources that will help them meet their needs.

Written Client Consent: Each Client whose record is being shared electronically with another Participating Agency must agree via a written client consent form to have their data shared. A client must be informed what information is being shared and with whom it is being shared.

Information Release: The Participating Agency agrees not to release client identifiable information to any other organization pursuant to federal and state law without proper client consent.

Federal/State Confidentiality Regulations: The Participating Agency will uphold Federal and State Confidentiality regulations to protect client records and privacy. In addition, the Participating Agency will only release client records with written consent by the client, unless otherwise provided for in the regulations.

The Participating Agency will abide specifically by the Federal confidentiality rules as contained in 42 CFR Part 2 regarding disclosure of alcohol and/or drug abuse records. **A general authorization for the release of medical or other information is not sufficient for this purpose.**

Unnecessary Solicitation: The Participating Agency will not solicit or input information from clients unless it is essential to the provision of services to the client.

Minimal Data Elements

The Participating Agency is responsible for ensuring that all clients are asked a minimal set of questions for use in aggregate analysis. These include HUD's most current Data Standards as well as any minimal data elements determined by the HMIS Committee. These will be contained in each agency's primary assessment.

Information Security Protocols

Please reference Section 3.

Connectivity and Maintenance of On-site Computer Equipment

Participating Agencies are required to obtain an adequate Internet connection (greater than 56K/v90) to ensure proper response time and efficient system operation of ServicePoint.

Participating Agencies must commit to a reasonable program of data and equipment maintenance in order to sustain an efficient level of system operation including computer equipment configuration, Internet connectivity, data storage, and data back-up. As a matter of course, each agency must install virus protection software on all computers.

Data Disposal

Participating Agencies agree to dispose of documents that contain identifiable client level data by shredding paper records, deleting any information from diskettes before disposal, and deleting any copies of client level data from the hard drive of any machine before transfer or disposal of property.

SECTION 3: USER AND DATA ACCESS

Access Privileges to ServicePoint

Participating Agencies will apply the user access privilege convention set forth as follows:

- **User Access:** User access and user access levels will be deemed by the Executive Director of the Participating Agency in consultation with the HMIS Administrator. The HMIS Administrator will generate username and passwords within the Administrative function of ServicePoint.
- **User Name Format:** The HMIS Administrator will create all usernames using the first initial of the first name and last name. Example: John Doe's username would be jdoe. In the case where there are two people with the same first initial and last name, a sequential number should be placed at the end of the above format. Example: jdoe2, jdoe3.
- **Passwords:** Passwords are automatically generated from the system when a user is created. The HMIS Administrator will communicate the system-generated password to the user. The user will be required to change the password the first time they log onto the system. The password must be between 8 and 16 characters and contain 2 numbers. Passwords expire every 45 days.
- **Termination or Extended Leave from Employment:** The HMIS Administrator should terminate the rights of a user immediately upon termination from their current position. If a staff person is to go on leave for a period of longer than 30 days, their password must be inactivated within five business days of the start of their leave. The HMIS Administrator is responsible for removing users from the system. The HMIS Administrator must update the access list and signed agreements on a quarterly basis.

Access Levels for System Users

User accounts will be created and deleted by the HMIS Administrator under authorization of the Participating Agency's Executive Director.

User Levels:

There are seventeen levels of access to the ServicePoint system. These levels should be reflective of the access a user has to client level paper records and access levels should be need-based. Need exists only for those staff, volunteers, or designated personnel who work with (or supervise staff who work directly with) clients or have data entry responsibilities.

Access to Data

- **User Access:** Users will only be able to view the data entered by users of their own system. Security measures exist within the ServicePoint software which restricts agencies from viewing each other's data.
- **Raw Data:** Users who have been granted access to the ServicePoint Report Writer tool have the ability to download and save client level data onto their local computer. Once this information has been downloaded from the ServicePoint server in raw format to an agency's computer, these data become the responsibility of the agency. A Participating Agency should develop protocol regarding the handling of data downloaded from the Report Writer.
- **Agency Policies Restricting Access to Data:** The Participating Agencies must establish internal access to data protocols. These policies should include who has access, for what purpose, and how they can transmit this information. Issues to be addressed include storage, transmission and disposal of these data.
- **Access to Countywide ServicePoint Data:** Access will be granted, in aggregate form, based upon policies developed by the HMIS Committee.

Access to Client Paper Records

Participating Agencies will establish procedures to handle access to client paper records. These procedures include: identifying which staff has access to the client paper records and for what purpose; identifying how and where client paper records are stored; developing policy on length of storage and disposal procedures of paper records; and developing policy on disclosure of information contained in client paper records.

Physical Access Controls

Physical access to the system data processing areas, equipment and media must be controlled. Access must be controlled for the transportation of data processing media and other computer resources. The level of control is contingent on the level of risk and exposure to loss.

Access to computing facilities and equipment

- The HMIS Administrator will work with Participating Agencies to determine the physical access controls appropriate for their organizational setting based on the HMIS Data Security Plan.
- All those granted access to an area or to data are responsible for their actions. Additionally, those granting another person access to an area are responsible for that person's activities.

Media and hardcopy protection and transportation

- Printed versions of confidential data should not be copied or left unattended and open to unauthorized access.
- Media containing client-identified data will not be shared with any agency other than the agency that entered the data for any reason. HMIS data may be transported by authorized employees using methods deemed appropriate by the Participating Agency that meet the above standard. Reasonable care should be used, and media should be secured when left unattended.
- HMIS information in hardcopy format should be disposed of properly.

Unique User ID and Password

- **Discretionary Password Reset:** Initially each user will be given a password for one time use only. The first or reset password will be automatically generated by ServicePoint and will be issued to the User by the HMIS Administrator. Passwords will be communicated in written or verbal form. Temporary passwords can be communicated via email (as long as it is not in the same email message as the User ID). Contact the HMIS Administrator if a password needs to be reset.
- **Forced Password Change (FPC):** FPC will occur every 45 days once a user account is issued. Passwords will expire and users will be prompted to enter a new password. Users may not use the same password consecutively, but may use the same password more than once.
- **Unsuccessful Logon:** If a user unsuccessfully attempts to logon three times, the User ID will be "locked out", access permission revoked and unable to gain access until their account is reset.

Right to Deny User and Participating Agency's Access

The HMIS Administrator, Howard County Department of Citizen Services, may suspend or revoke a Participating Agency's or individual user's access for violation of the HMIS Data Security Plan.

The HMIS Administrator will investigate all potential violations of security protocols. Any agency that is found to have consistently and/or flagrantly violated security protocols may have their access privileges suspended or revoked.

SECTION 4: TRAINING AND TECHNICAL SUPPORT

The HMIS Administrator, Howard County Department of Citizen Services, will offer training on an as needed basis to Participating Agencies, in addition to group trainings. All users must receive ServicePoint training prior using the system. Training will include security policies and procedures.

Training Schedule

A training schedule will be set via email regularly. Agencies are asked to RSVP for all trainings. Training sessions will be offered at the Gateway Building unless otherwise noted.

Technical Support

The HMIS Administrator, Howard County Department of Citizen Services, will assist agencies in:

- Start-up and implementation
- On-going technical assistance
- Training
- Technical assistance with report writing

The following procedures shall be followed when requesting technical support:

- Agency Management Staff (Executive Director or Agency Point Person) will contact the HMIS Administrator.
- The HMIS Administrator will, if necessary communicate with Bowman Internet Systems, the ServicePoint vendor.
- The HMIS Administrator will be available Monday through Friday, between 8:00 a.m. and 5:00 p.m., excluding County, State, and Federal holidays, or unanticipated emergencies.

The HMIS Administrator will notify, if possible, Participating Agencies of planned interruption to service via email as well as posting in the ServicePoint News area. It is recognized by Participating Agencies that ServicePoint is a web-based product, hosted by Bowman Internet Systems. The HMIS Administrator, Howard County Department of Citizen Services, cannot control unanticipated interruptions of service by Bowman Internet Systems.

Planned Interruption to Service

The HMIS Administrator will notify, if possible, Participating Agencies of planned interruption to service via email as well as posting in the ServicePoint News area. It is recognized by Participating Agencies that ServicePoint is a web-based product, hosted by Bowman Internet Systems. The HMIS Administrator, Howard County Department of Citizen Services, cannot control unanticipated interruptions of service by Bowman Internet Systems.

Service Restoration

Unless the original communication stated the resumption time, HMIS staff will notify via e-mail that service has resumed.

SECTION 5: DATA RELEASE PROTOCOLS

Data Release Authorization and Distribution

All data that are to be publicly released must be in aggregate format.

Release of Data Principles (Participating Agency)

- Only de-identified aggregate data will be released.
- Program specific information will not be released without written consent of the Participating Agency Executive Director.
- There will be full access to aggregate data for all Participating Agencies.
- Aggregate data will be available in the form of an aggregate report or as a raw data set.
- Only aggregate data will be made directly available to the public.
- Parameters of the aggregate data, that is, where the data comes from, what it includes and what it does not include will be presented with each report.

Right to Deny Access to Client Identified Information

- Any request for client identified data from any person, agency, or organization other than the agency of origin will be forwarded to the HMIS Administrator for review.
- Pursuant to HMIS Administrator, any outside entity must obtain the written consent of every client contained within the database prior to the release of data.

Right to Deny Access to Aggregate Information

HMIS Administrator retains authority to deny access to all aggregate data contained within the system, on a local or private level. The State of Maryland will have the authority to pull ONLY aggregate information for reporting purposes as granted by the Howard County Continuum of Care.

When a person or organization requests data, the request will be reviewed by the HMIS Administrator. The State will retain authority to use aggregate data, as collected in the Data Warehouse, for federal and statewide reporting.

The HMIS Administrator, Howard County Department of Citizen Services, may amend these policies and procedures at any time with input from the HMIS Committee.

SECTION: GLOSSARY

Acronyms

CoC: Continuum of Care
CSHS: Coordinated System of Homeless Services
HUD: United States Department of Housing and Urban Development
HMIS: Homeless Management Information System
NOFA: Notice of Funding Availability

Definitions

Aggregate data: Communitywide data that are de-identified and can be used for analytical purposes.

Annual progress report (APR): A standard Federal reporting form used by the U.S. Department of Housing and Urban Development for CoC homeless grant programs.

Antivirus programs: Computer programs that detect and rid computer systems of electronic viruses and thus prevent and/or mitigate file corruption and data loss.

Application software: Computer programs designed to accomplish specific tasks or transactions. HMISs are application software.

Central server: A computer or group of computers that contains the main application software or aggregate data in a distributed HMIS.

Client(s): An individual or family experiencing homelessness, threatened with the imminent prospect of homelessness, or with a former experience of homelessness, **and** accessing services within the CoC.

Client confidentiality: Except as provided by law or incorporated in properly executed consent, a client's right to guaranteed privacy of the personal information that is stored within the HMIS.

Client consent: Oral permission to participate in the HMIS (or, in the case of information that is required by program funders, acknowledgment that the information is being collected, stored, and aggregated for reporting purposes within the HMIS). Written consent is written permission to share personal information that is stored in the HMIS with another agency. The HMIS client consent form should explicitly state how the data will be collected, shared, and used, and explain a client's right to protect and limit its use.

Client-level data: Data about an individual HMIS client.

Communications server: A dedicated server that remote users can connect to through communications devices such as modems.

Computer operating systems: Computer programs that manage end user interaction with the system. Microsoft Windows is an example of an operating system.

Computer networking: The process of connecting multiple computers to facilitate easy sharing of files or programs. Networked computers can share common resources such as a printer or a database.

Concurrent users: The number of computer users accessing a system simultaneously.

Connectivity: The technology used to upload/download data files to/from other computers or to link to the Internet.

Consent form: The consumer's written authorization to have their data input in an HMIS and/or shared with other agencies.

Continuum of Care (CoC): A coordinated approach at the local level to deliver services to persons who are homeless. A CoC generally includes a full range of emergency, transitional, and permanent housing and service resources to address the various needs of homeless persons. HUD issues an annual Notice of Funding Availability (NOFA), known as the CoC grant, to local communities for housing and service funds.

Coverage: The proportion of shelter users that is represented in the data.

Database: A collection of information organized so that a computer program can quickly select desired pieces of data. You can think of a database as an electronic filing system.

Data encryption: The conversion of plain text into masked data by scrambling it using a secret code that hides its meaning to any unauthorized viewer. Computers encrypt data by using algorithms or formulas. Encrypted data are not readable unless they are converted back into plain text via decryption.

Data sharing agreement: An agreement among participating agencies about the sharing of consumer data. The agreement should define which agencies will share what data elements under what particular circumstances.

Data warehouse: A system for storing, retrieving, and managing large amounts of data. Data warehouses contain a wide variety of data that present a coherent picture of conditions at a single point in time.

End user: The participating agency staff person who will be using the HMIS to enter and/or extract data.

Firewall: A hardware and/or software system that enforces access control between two networks.

Function: The specific capabilities or features that the HMIS performs.

Homeless Management Information System (HMIS): A computerized data collection system that stores information about persons experiencing homelessness, collected throughout the community from the various agencies that provide services to these individuals. Client-level information collected from each program can be aggregated with data from other programs using a unique client identifier to determine unduplicated system wide information, such as the overall level of homelessness, service effectiveness, and unmet community needs.

HMIS Administrator: The personnel responsible for overseeing the HMIS System.

Internet service provider (ISP): Any company that provides individuals or organizations with internet service.

Local area network (LAN): A network that is geographically limited, allowing easy interconnection of computers within offices or buildings.

Logon process: The procedure by which a computer network authenticates a user.

Longitudinal data: Information collected about particular individuals over time.

Network: Several computers or computer systems linked to one another.

Participating agency: An agency that participates in the HMIS.

Real-time: Pertaining to the current moment. Technology that allows a user to receive data during the actual time that it is entered into the system.

Record-level encryption: Data encryption that occurs at the field (data element) level within an information record.

Secure Socket Layer (SSL) protection: A communications protocol used to secure sensitive data. SSL is normally described as wrapping an encrypted envelope around message transmissions over the Internet.

Security: Absolute protection of the client and program information stored in the HMIS from unauthorized access, use, or modification. Servers can host and send files, data, or programs to client computers.

Site: A location that uses an HMIS and at which services to homeless and at-risk consumers are provided.

Site preparation: Preparation for installation of a new HMIS.

Software license: The right of an organization or individual to use or access a computer program developed by a third party, for a fee.

Software license agreement: Agreement between the developer of a software product and its users that specifies the rules under which software distribution, installation, and usage can occur.

Software release: A version of a software product that is available on the market.

Systems implementation: A stage in the HMIS project during which the various system components (hardware, software, databases, etc.) are created or acquired, assembled, and put into operation.

Technical capacity: The documented sets of technical skills and resources available for undertaking an HMIS project.

Technical requirements: The documented sets of technical skills and resources necessary for undertaking an HMIS project.

Undisclosed locations: Sites, such as shelters for victims of domestic violence, which have chosen to hide their location in order to protect program consumers.

Unique client identifier (ID): A code associated with a single individual that can be used to create an unduplicated client count, but which cannot be used to identify that individual.

Vendor developed: A commercially developed software system.

Web-enabled application: Application software designed to operate as an Internet application. Users access the system with a Web browser such as Netscape or Internet Explorer.

Wide area network (WAN): A network that is not geographically limited, and can link computers in different locales and extend over large distances. A WAN is often used to connect computers that are not located in the same office or building.

SECTION: ATTACHMENTS

Data Quality Plan

Howard County HMIS

Data Quality Plan

December 2013

Timeliness of Data

In order to generate accurate, meaningful reports, the HMIS database must contain the most current information on the clients served. Ideally, information will be entered as soon as it is collected, to ensure the most current data. If that is not possible to enter the client information immediately, the information must be entered as soon as possible.

Standards:

- Client information is entered within 5 business days of the occurrence in which a service is provided.
- Client information is updated regularly at exit or annual assessment – per requirements relative to each universal and program specific data elements.

Data Accuracy

It is critical for information entered into the HMIS database to accurately represent the people receiving services from Participating Agencies. Inaccurate data is more harmful than incomplete information. If information is incomplete it is possible to acknowledge this gap. Users should understand that it is better to enter nothing (or “don’t know” or “refused” if a question is required) than to enter inaccurate information.

Standards:

- At least 95% of data entered into HMIS must reflect what clients report.
- Staff entering information into HMIS must enter information as it is stated by the client. All users and Participating Agencies must enter data consistently, in the same way.

Data Completeness

Each month the HMIS Administrator will run data completeness reports for all Participating Agencies to monitor services, Entry/Exits, and null data elements. A “grade” of “B” or above is expected from all agencies. Reports will be analyzed to identify weaknesses in data for each participating agency, to be addressed at the next training opportunity. If the “grade” is less than a “B,” an emergency training session will be called with the agency.

Standards:

- All HUD funded homeless assistance programs must enter into HMIS.
- All Universal Data Elements will be entered.
- At least 95% of clients will have complete program data elements entered.
- At least 95% of clients will have services entered, when provided.
- At least 95% of clients that exit a program will have exit destinations entered.
- 5% is the maximum limit for null data.
- 5% is the maximum limit for “don’t know” and “refused” responses.

Training

Regular group trainings will be offered in a suitable facility where each attendee can have an individual work station.

Trainings will also be offered on an as-needed basis. As-needed trainings can be requested by the Participating Agency or the HMIS Administrator. The HMIS Administrator may request a training session if it is determined that an "emergency" training is necessary or an upgrade to the system occurs.

If requested to do so by a Participating Agency, the HMIS Administrator will also negotiate a designated time to spend with the agency on a regular basis.

See Training Section of Howard County HMIS Policies and Procedures.

Communication

The HMIS Administrator will be available during business days from 8:00 a.m. – 5:00 p.m. to answer questions.

A quarterly newsletter will be sent to all users with upgrade information, data entry tips, and upcoming trainings and events.

Security Plan

Howard County HMIS Security Plan

December 2013

The Department of Housing and Urban Development (HUD) requires implementation of security standards. Security standards are directed to ensure the confidentiality, integrity, and availability of all HMIS information; protect against any reasonably anticipated threats or hazards to security; and ensure compliance by end users. Written policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements.

Security Awareness

The HMIS Administrator will ensure all users receive security training prior to using the system. Security training is a part of user training and covered in user training sessions.

See Training Section of Howard County HMIS Policies and Procedures.

Physical Safeguards

Access to areas containing equipment, data, and software will be secured. All client-identifying information will be strictly safeguarded in accordance with the latest technology available. Data will be secured by, at least, the following:

- Server hardware physical security (locked office)
- Server software security (username accounts/password protection)
- Network software security (firewall)
- Network hardware security (locked office)

Users will:

- Not share login information with any other individual.
- Reset password every 45 days.
- Log out of the HMIS when leaving their computer.
- Close/log out of the HMIS when any other individual not authorized to view data is able to view monitor.
- Not release/distribute report unless they are in aggregate form, with no identifying information.

See User and Data Access Section and Data Release Protocols Section of Howard County HMIS Policies and Procedures.

Technical Safeguards

Anti-virus protection shall be installed on each workstation used to access the HMIS, whether from a Participating Agency, or from a remote location.

- A Participating Agency or a user's access may be suspended or revoked for suspected or actual violation of security protocols.
- All potential violations will be investigated.

Please refer to Bowman Securing Client Data (attached) in reference to HMIS Client Information Security.

HMIS Administrator and HMIS Committee will annually review and revise, as needed, policies and agreements that protect and control access to HMIS information.

Bowman System Security Document available upon request.

Privacy Policy

Howard County HMIS/SERVICEPOINT Privacy Policy Notice

Effective 1 October 2004

Revised 1 December 2013

THIS NOTICE DESCRIBES HOW PRIVACY INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ AND REVIEW THIS DOCUMENT CAREFULLY. THE PRIVACY OF YOUR PERSONAL INFORMATION IS IMPORTANT TO US.

Purpose of this Notice

The Howard County Department of Citizen Services, and its local homeless service providers, is required to collect information about persons who access services through the use of the Homeless Management Information System (HMIS)/ServicePoint. ServicePoint is a web-based software application designed to record and store client-level characteristics, service needs and usage of services by homeless persons. This method of data collection allows the Department and its service providers to coordinate services more efficiently, produce statistical reports, and share information with selected partner agencies if the client signs a Release of Information (ROI). Please note that even if you do not want your information to be shared with other agencies, or your actual name entered into the system, we must still record some information in the system, taking extreme care to protect your name and privacy. Even if you choose to allow us to share information with other agencies, records about substance abuse, physical and mental health, HIV, and domestic violence will not be shared without your specific written or informed consent.

Programs Covered by this Notice

With the exception of Domestic Violence agencies, the HMIS Data and Technical Standards Notice required all HUD McKinney-Vento funded programs that assist homeless persons to collect "Universal Data Elements" and, when applicable, "Program Specific Data Elements" for each client assisted. In addition, Participating Agencies in the Coordinated System of Homeless Services (CSHS) must enter the same information.

Legal Duty

We are required by applicable federal and state law to maintain the privacy of your private personal information. This Notice must be available at the service delivery site and be posted in a clear and prominent location where it is reasonable to expect any individuals seeking service to be able to read the Notice. Procedures are in place for accepting and considering complaints about privacy and security policies. Every staff member entering for accessing data in the system is required to sign a confidentiality agreement and receive new user and on-going privacy training.

Amendment Policy/Right to Receive Copy of this Notice

We reserve the right to change this Notice at any time. This Notice is not a legal contract. If changes are made a copy of the revised Notice will be posted at all service locations. You may request a copy of our HMIS Privacy Policy at any time. For more information about our privacy practices, or for additional copies of this Notice, please contact us using the information listed at the end of this Notice.

Protected Personal Information (PPI)

Only information that is appropriate for the programs covered by this Notice is collected. All information is collected by lawful and fair means. Copies of all forms that collect PPI are given to clients. Any request by clients to correct inaccurate information must be considered. Changes, deletions, or supplements should be notated where inaccurate or incomplete. At initial entry into a program, and again at each annual review, all forms and information are explained. All Release of Information forms must be signed every two years. The collection and use of all personal information is guided by strict standards of confidentiality.

Howard County Department of Citizen Services • 6751 Columbia Gateway Drive, 3rd Floor, Columbia, Maryland 21046
Telephone (410) 313-6400 Fax (410) 313-6424 TTY (410) 313-6401

Participation Agreement

HMIS PARTICIPATION AGREEMENT

BETWEEN

Howard County, Maryland

Department of Citizen Services

and

[Participating Agency]

This Agreement is made and entered into on this _____ day of _____, 20____, by and between **Howard County, Maryland**, a body corporate and politic, hereinafter referred to as the "County," and [Participating Agency], hereinafter known as the "Participating Agency," sometimes referred to herein individually as "Party" and collectively as "the Parties."

I. INTRODUCTION

The federal Department of Housing and Urban Development requires that all entities receiving federal funds for homeless services establish and maintain a Homeless Management Information System ("HMIS"). The County, through the Department of Citizen Services ("the Department") uses ServicePoint, developed by Bowman Systems, as its HMIS.

ServicePoint is a web-based application that provides client tracking, case management, service and referral management, bed availability for shelters, resource indexing, and reporting. The Department is the lead agency for the Continuum of Care for Homeless Services in Howard County and is responsible for the implementation of ServicePoint.

ServicePoint allows Participating Agencies within the Howard County Continuum of Care for Homeless Services to share information on common clients. Goals of the Continuum include: an ability to expedite client intake procedures; improved referral accuracy; increased case management and administrative tools; and the ability to follow demographic trends and service utilization patterns of families and individuals experiencing homelessness or at risk of homelessness.

Access to ServicePoint is limited to Participating Agencies. When used correctly and faithfully by all involved parties, ServicePoint is designed to benefit multiple stakeholders, including County Government, homeless service agencies, and the consumers of homeless services, through a more effective and efficient service delivery system.

II. Confidentiality

A. Federal and State Regulations

1. The Participating Agency will uphold relevant Federal and State confidentiality regulations and laws that protect client records. The Agency will only release confidential client records with written consent by the client, or the client's guardian, unless otherwise provided for in the regulations or

laws. A client is anyone who receives services from the Participating Agency and a guardian is one legally in charge of the affairs of a minor or a person deemed incompetent.

B. Consent and Documentation

1. The Participating Agency will provide a verbal explanation of ServicePoint and arrange for a qualified interpreter or translator in the event that a client is not literate in English or has difficulty understanding the consent form(s).
2. The Participating Agency will not solicit or input information from clients into ServicePoint unless the information is essential to provide services or conduct evaluation.
3. The Participating Agency will ensure that all staff or volunteers who are issued a User Identification and Password to ServicePoint abide by this Partnership Agreement, including the confidentiality rules and regulations listed in this Partnership Agreement. Each user will be required to sign a User Agreement.
4. The Participating Agency will maintain all client authorizations for release of information for a period of five (5) years.

III. Participant Agency Responsibilities

- A. The Participating Agency agrees to enter basic client data into ServicePoint including all HUD required data elements. The Participating Agency shall not permit users to share user identifications and passwords.
- B. The Participating Agency will not give or share assigned user identification and passwords to access ServicePoint with any other organization, governmental entity, business, or individual.
- C. The Participating Agency will not misrepresent its client base in ServicePoint by knowingly entering inaccurate information.
- D. The Participating Agency will enter a client into ServicePoint within five business days of client intake. Completeness and accuracy of data entry must meet standards set by the Department. Compliance with these standards will be monitored monthly by the Department. Standards will be established in conjunction with participating agencies and will be provided as an addendum to this agreement.
- E. The Participating Agency will designate a staff person to serve as a liaison with the ServicePoint Administrator. The liaison will be responsible for scheduling staff training, requesting reports, establishing workflow and other matters related to internal ServicePoint operations.
- F. Users are required to attend a minimum of four meetings/trainings per year. See IV. E. below.

IV. Department Responsibilities

- A. Except as provided in IV. B, the Department will pay the costs of the contract with Bowman Systems.
- B. The Department will provide the appropriate number of licenses for each Participating Agency up to a maximum of ten licenses per Agency.
- C. The Department will perform all required system maintenance.
- D. The Department will respond to user requests within two business days.
- E. The Department will provide technical assistance to all ServicePoint users. In addition to on-going assistance, the Department will hold bi-monthly meetings/trainings for all users.

V. Access to Information

- A. The Participating Agency understands that it will retain access to all identifying and statistical data on the clients it serves.

- B. The Participating Agency understands that the Department of Citizen Services will have access to all client information to run aggregate reports for planning, funding, and database maintenance purposes. The Department of Citizen Services will not release any identifying information to any other Participating Agency, organization, governmental entity, business or individual.

VI. Termination

- A. **In Effect Until Terminated.** This agreement shall remain in effect unless terminated in writing by either Party, with 30 days' advance written notice.
- B. **Termination for Default.** Notwithstanding paragraph A of this section, the County may terminate this agreement immediately if the Participating Agency commits a serious violation of this Partnership Agreement, with the County at its sole discretion to determine what constitutes a serious violation. For a violation that the County determines to be less serious, the County may temporarily suspend the Participating Agency's access to ServicePoint until the violation is corrected. If the Participating Agency has a history of repeated violations, the County may terminate this Partnership Agreement.

VII. Indemnification

The Participating Agency agrees to indemnify and hold the County harmless from and against any and all claims, actions, damages, liability and expense, including reasonable attorney fees and costs of defense, in connection with loss of life, personal or bodily injury and/or damage to property that may be done or suffered by reason of the Participating Agency's fault or negligence in the performance of or failure to perform its responsibilities as stated in this Partnership Agreement, or occasioned all or in part by any act or omission of the Participating Agency, its agents or employees.

VIII. Insurance

The Participating Agency shall obtain and maintain general liability insurance as necessary to protect in any legal action, tort, contract, or other liability which may be raised against the Participating Agency or the County. The Participating Agency shall provide the County with documentation of insurance as the County may require, including evidence that the policies may not be terminated without thirty (30) days' prior written notice to the County.

IX. Miscellaneous

- A. This agreement may be amended by written agreement executed by both Parties.
- B. Neither Party shall transfer or assign any rights or obligations without the written consent of the other party.
- C. The contractual obligation of the County under this Agreement is contingent upon the availability of appropriated funds from which payment for ServicePoint and its support can be made.
- F. This Agreement shall be construed and enforced in accordance with the laws of the State of Maryland.

[SIGNATURES APPEAR ON FOLLOWING PAGE]

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed on by affixing hereon their respective seals and signatures of the proper offices.

WITNESS:

PARTICIPATING AGENCY:

Name

Name

Title: _____

ATTEST:

HOWARD COUNTY, MARYLAND

_____ BY: _____

Lonnie R. Robbins
Chief Administrative Officer

Ken Ulman
County Executive

APPROVED for Legal Sufficiency
this ____ day of _____, 20__.

APPROVED for Financial Sufficiency
this ____ day of _____, 20__.

Margaret Ann Nolan
County Solicitor

Stanley J. Milesky
Acting Director of Finance

APPROVED for Program Sufficiency
this ____ day of _____, 20__

Lois Mikkila, Director
Department of Citizen Services

End User License Agreement

Homeless Management Information System

End User License Agreement

This agreement is entered into on the _____ day of _____, 2013 between Howard County Government and [individual's name] _____.

This document contains the specific obligations that each end user and Howard County Government must follow in order to participate in the Homeless Management Information System (HMIS).

1. The End User will fully comply with the End User Terms within these Policies and Procedures and hereby agrees to fully indemnify and hold harmless Howard County Government from any unauthorized use, improper use, or misuse of the software and the system by the Agency and/or its staff, or any violation of law rising out of or in connection with the acts or omissions of Agency and its staff and the Agency's participation in the HMIS reporting process.
2. All End Users must be trained by the HMIS administrator prior to obtaining access to the _____ system; all staff will be trained on relevant information security issues.
3. End Users will adhere to the HMIS Client Release Form and the Partnership Agreement that outline specific policies regarding release of aggregate data.
4. End Users are responsible for protecting institutional information to which they have access and for reporting security violations.
5. End Users must comply with the data security policy and standards as described in these Policies and Procedures.

By signing this document, I agree to abide by all policies as stated in the Howard County Department of Citizen Services HMIS Partnership Agreement.

[Individual's Signature]

Catherine Wellman, HMIS Administrator

Confidentiality Agreement

Confidentiality Agreement

1. I understand that I will be allowed access to confidential personal and health information and/or records in order to perform my specific job duties. I further understand and agree that I am not to disclose confidential personal and health information and/or records without the prior consent of the appropriate person or authority (s).
2. I understand that all User Identification and Passwords to access the Howard County Government HMIS are issued on an individual basis. I further understand that I am solely responsible for all information obtained, through system access, using my unique identification. At no time will I allow any other person to use my User Identification and/or Password to log on to the Howard County Government HMIS. I understand that accessing or releasing confidential personal and health information and/or records, or causing confidential personal and health information and/or records to be accessed or released, by myself, other individuals, clients, relatives, etc., outside the scope of my assigned job duties constitute a violation of this agreement.
3. By affixing my signature to this document I acknowledge that I shall abide by all of the relevant laws, regulations, and the Howard County Government HMIS Partnership Agreement concerning access, use, maintenance and disclosure of confidential personal and health information and/or records which shall be made available to me through my use of the Howard County HMIS. I further agree that it is my responsibility to assure the confidentiality of all personal and health information, which has been issued to me in confidence, even after my access to the Howard County Government HMIS, has ended. Pursuant to this agreement I certify that I have read and understand my obligations and responsibilities in connection with following laws concerning confidential personal and health information and/or records. I agree to fully indemnify and hold harmless the County from any unauthorized use, improper use, or misuse of the software and the system by the Agency and/or its staff, or any violation of law arising out of or in connection with the acts or omissions of Agency and its staff and the Agency's participation in the HMIS reporting process.

[Individual's Signature]

Date

Catherine Wellman, HMIS Administrator

Date

Client Authorization Form

Client Authorization

Homeless Management Information System

Name of Agency: _____

Client Information:

Last Name _____ First Name _____ Middle Initial _____

Date of Birth _____ Social Security Number _____ - _____ - _____

The Howard County Homeless Management Information System (HMIS) is administered by the Howard County Department of Citizen Services (DCS), a part of the Howard County Government. It is designed to help improve services to those members of our community who are experiencing homelessness, or who are at risk of homelessness. The DCS does this by allowing personnel at Participating Agencies to share information needed for service delivery, and to track demographic trends and service patterns. The HMIS is a web-based product called ServicePoint, which is a secure, encrypted software product. Your personal records are secured at the highest level of encryption currently available.

I understand that all information gathered about me is personal and private and I am releasing it in confidence. I have reviewed and understand the Privacy Policy Notice explaining ServicePoint and its intended use within the Howard County Continuum of Care. I further understand that basic identifying information may be shared with other Participating Agencies including, but not limited to: The Community Action Council, Bridges to Housing Stability Inc., Grassroots Crisis Intervention Center, the Howard County Department of Housing and Community Development, the Howard County Mental Health Authority, and Humanim, Inc. Unless I make a formal request to the Participating Agency listed above, to the Howard County DCS, or to the System Administrator that I no longer want to participate in the HMIS, this release will remain in effect for two (2) years from today, and will expire on _____.

I authorize the Howard County DCS to obtain and share my basic identifying information and non-confidential service information with other Participating Agencies. Under no circumstances will medical, mental health, substance abuse, or domestic violence information or case notes be shared.

Date

Client's Authorizing Signature

Based on the above information, I authorize basic identifying information and non-confidential service transactions of my dependent(s) to be shared as noted above.

Date

Client's Authorizing Signature

Chapter 1 Statement of Policies and Objectives	
Chapter 2 ACC and Administrative Fees	
Chapter 3 Compliance, Recordkeeping and Reporting	
Chapter 4 Program Eligibility	
Chapter 5 Applying for Admission	
Chapter 6 Establishing Preferences and Waiting List Maintenance	
Chapter 7 Subsidy and Occupancy Standards	
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Chapter 11 Request for Tenancy Approval and HAP Contract Execution	
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Chapter 15 Continued Occupancy, Moves and Portability	
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Chapter 17 Denial and Termination of Assistance	
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Chapter 22 Special Housing Types	
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Chapter 24 Family Self-Sufficiency	
Chapter 25 HUD Special Policy Areas	
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Chapter 27 Public Housing Conversion Under RAD	Addendum A –
Program Integrity	
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Glossary	

CHAPTER 6 - ESTABLISHING PREFERENCES & WAITING LIST MAINTENANCE [24 CFR Part 5, Subpart D; 982.54(d)(1); 982.204, 982.205, 982.206]

INTRODUCTION

It is a HUD requirement and the PHA's objective to ensure that families are placed on and selected from the waiting list for admissions in proper order and thus in accordance with the policies in this Administrative Plan. The maintenance of a viable waiting list ensures that an adequate pool of qualified applicants will be available to utilize program funds in a timely manner. Proper waiting list management is a SEMAP requirement.

HCHC operates a single waiting list for the Housing Choice Voucher Program. The tenant-based waiting list includes local preferences and priorities that the HCHC has adopted to meet local housing needs. With very few exceptions selection from the waiting list and subsequent admission is made in accordance with the process described in this plan

It is important to clarify the following when the HCHC manages a waiting list using preferences:

- HCHC uses a preference system to rank applications on and to select applications from the waiting list.
- Preferences are local criteria approved by the PHA on, giving certain populations priority placement on the waiting list. Preferences are subject to change. This change does not disqualify an application, but will change waiting list placement.
- Applicants are selected from the waiting list based on preference ranking; however a lower ranked applicant may be approved for admission prior to a higher ranked applicant if the higher ranked applicant has not completed the eligibility process.

A. WAITING LIST [24 CFR 982.204]

The HCHC uses a single waiting list for admissions to the Housing Choice Voucher Program. Except for Special Admissions, applicants will be selected from the waiting list in accordance with policies and preferences and income targeting requirements defined in this Administrative Plan. The PHA maintains information that permits proper selection from the waiting list.

The waiting list contains the following information for each applicant listed:

- Applicant Name
- Family Size
- Date and time of application
- Preference claim
- Racial or ethnic designation of the head of household
- Family gross annual income

B. PREFERENCES & SELECTION [24 CFR 982.207]

The HCHC's method for selecting applicants from a preference category leaves a clear audit trail that can be used to verify that each applicant has been selected in accordance with the method specified in the administrative plan.

C. LOCAL PREFERENCES [24 CFR 5.410]

Local preferences will be used to organize and select applicants from the waiting list. Each local preference will be organized by application date and time.

HUD Notice 98-64 eliminates the public notice and comment requirement when changing a preference system. HCHC must notify all applicants about the preference change, giving the applicants the opportunity to qualify for new preferences.

An applicant will not be granted any local preference if any member of the family has been evicted from housing assisted under a 1937 Housing Act program during the past three years because of drug-related criminal activity or felonious charged criminal activity.

The HCHC will grant an exception to such a family if:

- The responsible member has successfully completed a rehabilitation program.
- The evicted person clearly did not participate in or know about the drug-related activity.
- The evicted person no longer participates in any drug related criminal activity.

If an applicant makes a false statement in order to qualify for a local preference, the HCHC will deny the local preference and remove the application from the waiting list.

- The HCHC uses the following Local Preference system: Residency
- Emergency (when subsidy is available):
 - Involuntary displacement
 - Substandard Housing
 - Long Term Homelessness

Residency Preference

Applicants who live, work or have a bona fide offer to work in Howard County on the date of notice that they have reached the top of the waiting list will receive a preference over non-residents.

Emergency

Issuance of assistance based on the Emergency preference is contingent upon the availability of funding.

The HCHC will continue to accept applications from families requiring “Emergency” Placement during periods when the waiting list is closed, unless these families are specifically excluded from applying in the notice of Waiting List Closure.

Involuntary displacement is defined as follows:

- An otherwise eligible family, who resides in Howard County, displaced by a no fault fire or flood or other natural disaster when, replacement housing has not been offered by the landlord at a comparable rate, or if the damaged unit is not proposed to be restored to use and replacement housing cannot reasonably be located at or near the pre-disaster housing cost. If the applicant or family is found to have caused the fire or flood, HCHC will deny assistance.

- An otherwise eligible family, who was a resident of a Howard County public housing unit or Howard County voucher holder in a federally declared disaster area at the time that the area was so designated, shall receive a priority on the waiting list for a period up to six months from the date of designation. HCHC reserves the right to limit the number of families assisted under this provision in order to protect the interests of County residents currently waiting to be assisted.
- An otherwise eligible family, who resides in Howard County, displaced by eminent domain proceedings, by any Federal, State, or local governmental body in conjunction with public improvement or development. This does not include any action taken in connection with code enforcement.
- An otherwise eligible family, who resides in Howard County, displaced by an action which is the result of a decision by the courts, requiring the landlord to take certain actions when; 1) it is not possible for the landlord to correct the deficiency with the family in place, and 2) the landlord is not under any obligation to provide alternative housing.
- An otherwise eligible family, who resides in Howard County, displaced by lead paint poisoning confirmed by a knowledgeable medical entity or professional or the court requires the landlord to take abatement action and; 1) it is not possible for the landlord to correct the deficiency with the family in place, and 2) the landlord is not under any obligation to provide alternative housing.
- An otherwise eligible family, who resides in Howard County, displaced by the sale, demolition or discontinuance of a residential property which results in the loss of a housing unit which was previously affordable to a family of low or moderate income, where the HCHC has made a determination that the loss of such housing will create an undue hardship on the families being displaced.
- An otherwise eligible family, who resides in Howard County, displaced due to the threat of physical violence and is participating in a Witness Protection Program. The family must meet HCHC's eligibility criteria regarding illegal drugs and violent criminal activity, and must currently live or work in Howard County. Families must agree to relocate outside of Howard County in order to qualify for this preference, unless they are approved by the Commission due to special circumstances to remain in Howard County.
- An otherwise eligible family, who resides in Howard County, participating in a local, Federal or State funded demonstration program designated by HCHC as critical to the fair and equitable delivery of housing services to groups who are under represented on the waiting list.

Involuntarily Displaced applicants must also meet the following additional requirements:

- Have vacated or will vacate their unit within no more than six months from the date of certification or verification
- The Action by a housing owner is beyond an applicant's ability to control, and occurs despite the applicant having met all previous conditions of occupancy and is other than a rent increase.
- The owner is not an immediate family relative, there has been a previous rental agreement, and the applicant has not been part of the owner's household immediately prior to application.

Substandard Housing is defined as follows:

- An otherwise eligible family, residing in Howard County, pursuant to a recognized lease, occupancy agreement, deed, title, or other documentation acceptable to HCHC whose housing meets one of the following conditions, as verified by the Department of Inspections, License and Permits, the Department of Public Works, the Health Department, or an equivalent Federal, State, or local governmental body, and will not be corrected by the landlord:
 - Lacks an adequate or safe source of heat,
 - Does not have operable indoor plumbing, or
 - Does not have a usable, flushing toilet.
- An otherwise eligible family, who resides in Howard County, pursuant to a recognized lease, occupancy agreement, deed, title, or other documentation acceptable to HCHC, and the unit has been declared unfit by the Department of Inspections, License and Permits, Department of Public Works, the Health Department or an equivalent Federal, State, or local governmental body, for one or more of the following reasons:
 - Unsafe levels of lead paint, when there is a child below the age of seven;
 - Unsafe levels of asbestos; or
 - The presence of a chemical agent which has been medically documented as harmful to a member of the household.

Substandard Housing is dilapidated (does not provide safe, adequate shelter; has one or more critical defects or a combination of defects requiring considerable repair; endangers the health, safety, and well being of family) if the following exists:

- Does not have operable indoor plumbing;
 - Does not have usable flush toilet in the unit for the exclusive use of the family;
 - Does not have usable bathtub or shower in unit for exclusive family use;
 - Does not have adequate, safe electrical service;
 - Does not have an adequate, safe source of heat;
 - Should, but does not have a kitchen; or
- Has been declared unfit for habitation by a government agency;

Long Term Homelessness:

An otherwise eligible family who for the past 90 days:

- Had a primary night-time residence that was a(n):
 - Supervised public or private operated shelter designated to provide temporary living accommodations,
 - Institution that provides temporary residence for individuals intended to be institutionalized (not incarcerated, i.e. jails and prisons),
 - Public or private place not designated or normally used as regular sleeping place for humans that can be confirmed by the Police or a county Homeless Agency.

This priority for service is limited to a maximum of 15 vouchers during any calendar year, when funding is available and not awarded for a special purpose.

HCHC will use date & time of application as the initial criteria for selecting the 15 homeless families from the waiting list. If all 15 slots are not filled due to a lack of homeless families currently on the waiting list a "Homeless Lottery" will be held to select the remaining families. All other applicants in the "Homeless Lottery" that are not selected will have their applications placed on the waiting list if the waiting list remains open for persons experiencing Long Term Homelessness.

D. INITIAL DETERMINATION OF LOCAL PREFERENCE QUALIFICATION

[24 CFR 5.415]

An applicant's certification that they qualify for a preference will be accepted without verification at the time that the application is submitted for waiting list placement. When the family is selected from the waiting list for the final eligibility determination the claim of a preference will be verified.

If the verification process indicates that an applicant does not qualify for a local preference, the applicant will be returned to the waiting list, but will be given an opportunity for an Informal Review.

If the verification process indicates that an applicant does not qualify for the local preference and the preference claim was the only reason for placement on the waiting list, the family will be removed from the waiting list.

While on the waiting list the applicant's situation may change and affect the family's entitlement to a preference. Applicants are required to notify HCHC in writing of all changes that impact the claim of a preference.

While on the waiting list an applicant may claim an additional preference. The application will be repositioned on the waiting list according to preference ranking and application date and time, except in such cases where the waiting list was only open to families claiming a particular preference. In this case the applicant must prove that they qualify for the first preference before claiming another.

HCHC will notify an applicant in writing of a preference denial. The notification will explain the reason for the denial and advise the applicant of their right to an Informal Review. If the preference denial is upheld as a result of the Informal Review or the applicant does not request the Informal Review, the applicant will be placed on the waiting list without benefit of the preference.

If an applicant falsifies documents or makes false statements in order to qualify for any preference, they will be removed from the waiting list. Applicants making false statements to claim a preference will be ineligible for assistance for three years from the date of their selection from the waiting list.

E. INCOME TARGETING

In accordance with the Quality Housing and Work Responsibility Act of 1998, each fiscal year the HCHC will reserve a minimum of seventy-five percent of its HCVP new admissions for families whose income does not exceed 30 percent of the area median income. HUD refers to these families as “extremely low-income families.” The HCHC will admit families who qualify under the Extremely Low-Income limit to meet the income targeting requirement, regardless of preference. This practice is known as income targeting. When necessary to meet this requirement applicants will be skipped on the waiting list until the first extremely low-income family is reached.

The HCHC will limit admission of very low income families to heads of households who are elderly, disabled or to families currently residing in homeless shelters.

The HCHC’s income targeting requirement does not apply to low-income families continuously assisted as provided for under the 1937 Housing Act. The HCHC is also exempted from this requirement where the HCHC is providing assistance to low income or moderate-income families entitled to preservation assistance under the tenant-based program as a result of a mortgage prepayment or opt-out.

An applicant reaching the top of the waiting list that has a verified annual income which exceeds the Extremely Low income limit will be permanently removed from the waiting list.

F. TARGETED FUNDING [24 CFR 982.203]

When HUD awards special funding for certain family types, families who qualify are placed on the regular waiting list. When a specific type of funding becomes available, the tenant-based and project-based waiting lists are searched for the first available family meeting the targeted funding criteria. The HCHC reserves the right to use this assistance under the “Interim Use” policy. [See Glossary under “Interim Use” for definition].

Applicants who are admitted under targeted funding which are not identified as a Special Admission are identified by codes in the automated system. The HCHC has the following "Targeted" Programs:

- Mainstream Allocation Plan for Persons with Disabilities
- HOPWA
- Non-Elderly Persons with Disabilities

G. PREFERENCE AND INCOME TARGETING ELIGIBILITY [24 CFR 5.410]

Cross-Listing of Different Housing Programs and Section 8 [24 CFR 982.205(a)]

The HCHC will not merge its waiting lists. However, if the Housing Choice Voucher waiting list is open when the applicant is placed on another waiting list, the HCHC must offer to place the family on its tenant-based assistance list.

Other Housing Assistance [24 CFR 982.205(b)]

Other housing assistance means a Federal, State or local housing subsidy, as determined by HUD, including public housing.

The HCHC may not take any of the following actions because an applicant has applied for, received, or refused other housing: [24 CFR 982.205(b)]:

- Refuse to list the applicant on the HCHC waiting list for tenant-based assistance;
- Deny any admission preference for which the applicant is currently qualified;
- Change the applicant's place on the waiting list based on preference, date of application, or other factors affecting selection under the HCHC selection policy; or
- Remove the applicant from the waiting list.

H. SPECIAL ADMISSIONS [24 CFR 982.54(d)(e), 982.203]

If HUD awards a HCHC program funding that is targeted for specifically named families, the HCHC will admit these families under a Special Admission procedure.

Special admissions families will be admitted outside of the regular waiting list process. They do not have to qualify for any preferences, nor are they required to be on the program waiting list. The HCHC maintains separate records of these admissions.

The following are examples of types of program funding that may be designated by HUD for families living in a specified unit:

- A family displaced because of demolition or disposition of a public or Indian housing project;
- A family residing in a multifamily rental housing project when HUD sells, forecloses or demolishes the project;
- For housing covered by the Low Income Housing Preservation and Resident Homeownership Act of 1990;
- A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term; and
- A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

Applicant's who are admitted under Special Admissions, rather than from the waiting list, are identified in the HCHC's database with special codes.

I. EXCEPTIONS FOR SPECIAL ADMISSIONS [24 CFR 982.203, 982.54(d)(3)]

If HUD awards a HCHC program funding that is targeted for specifically named families, the HCHC will admit these families under a Special Admission procedure.

Special admissions families will be admitted outside of the regular waiting list process. They do not have to qualify for any preferences, nor are they required to be on the program tenant-based and the project-based waiting lists. The HCHC maintains separate records of these admissions.

The following are examples of types of program funding that may be designated by HUD for families living in a specified unit:

- A family displaced because of demolition or disposition of a public or Indian housing project;
- A family residing in a multifamily rental housing project when HUD sells, forecloses or demolishes the project;
- For housing covered by the Low Income Housing Preservation and Resident Home-ownership Act of 1990;
- A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term; and
- A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

J. FINAL VERIFICATION OF PREFERENCES [24 CFR 5.415]

Preference information on applications will be updated as applicants are selected from a waiting list. At that time, the HCHC will obtain necessary verifications of preference at the interview and by third party verification.

If the preference verification indicates that the applicant does not qualify for the preference the applicant will be returned to the waiting list without the local preference and given an opportunity for an Informal Review.

Changes in an applicant's circumstances while on the waiting list may affect the family's entitlement to a preference. Applicants are required to notify the HCHC in writing when their circumstances change. When an applicant claims an additional preference, the application will be appropriately re-ranked. The exception to this is, if at the time the family applied, the waiting lists were only open to families who claimed that preference. In such case, the applicant must verify that they were eligible for the first preference before they are returned to the waiting lists with the new preference.

K. PREFERENCE DENIAL [24 CFR 5.415]

If the HCHC denies a preference, the HCHC will notify the applicant in writing of the reasons why the preference was denied and offer the applicant an opportunity for an Informal Review. If the preference denial is up-held as a result of the meeting, or the applicant does not request a meeting, the applicant will be placed on the waiting list without benefit of the preference. Applicants may exercise other rights if they believe they have been discriminated against.

If the applicant falsifies documents or makes false statements in order to qualify for any preference, her/his application will be removed from the waiting list. Applicants making false statements to claim a preference will be ineligible to re-apply for assistance for three years from the date of final determination.

L. REMOVAL FROM WAITING LIST AND PURGING [24 CFR 982.204(c)]

HCHC will contact all the applicants on the waiting list periodically to update all applicant information, including preferences. Applicants that do not respond to these types of notices, in a reasonable amount of time as indicated in the notice, will be removed from the waiting list.

Grounds for removal from the waiting list include:

- Failure to respond to two notices that the applicant has reached the top of the waiting list.
- Return of any correspondence marked “unable to forward”, “insufficient address” or “addressee unknown”.
- Attempted fraud in order to qualify for assistance, or to lower monthly tenant rent payments.
- Failure to sign all required forms or supply necessary documentation to determine eligibility within required agency guidelines (unless HCHC determines that the failure was beyond the applicant’s ability to control).

A reasonable accommodation will be made for persons with disabilities, upon request, so that they may fully access and participate in the application and eligibility process.

Howard County Continuum of Care Policies & Procedures

of assistance that are of lifelong or extended duration and are individually planned and coordinated.

- ii. An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs (1)(i) through (v) of the definition of developmental disability in this section if the individual, without services and supports, has a high probability of meeting these criteria later in life.

Order of Priority

For the Howard County CoC Programs providing PSH that are dedicated to and prioritizes persons experiencing chronic homelessness, the following order of priority is followed:

- 1) First Priority—Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness* **and** with the *Most Severe Service Needs*.
 - 1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 (B.2 of this document) for which **both** of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
 - ii. The Howard County CoC's CSHS has identified the chronically homeless individual or head of household, who meets all of the criteria meeting the definition of chronically homeless, of the family as having severe service needs (see Severe Service Needs of this document).
- 2) Second Priority—Chronically Homeless Individuals and Families **with** the *Longest History of Homelessness*.
 - 1) A chronically homeless individual or head of household, as defined in 24 CFR 578.3 (B.2 of this document), for which **both** of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
 - ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria listed under First Priority.
- 3) Third Priority—Chronically Homeless Individuals and Families **with** the *Most Severe Service Needs*.
 - 1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom **both** of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and

Howard County Continuum of Care Policies & Procedures

- ii. The Howard County CoC's CSHS has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, and the family has Severe Service Needs, see Severe Service Need of this document.
- 4) **Fourth Priority**—All Other Chronically Homeless Individuals and Families.
- 1) A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
 - i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length the four occasions is less than 12 months; and
 - ii. The Howard County CoC's CSHS has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs

Permanent Supportive Housing (PSH) Disability Qualification

The Permanent Supportive Housing for Persons with Disabilities projects only accept homeless persons with a verified disability, and prioritizes units that are not already dedicated to the chronically homeless, to those who are experiencing chronic homelessness, based on the determined Order of Priority. The head of household or a minor may qualify the household for acceptance into the program for the qualifying disability. *Source Documentation of Disability* must be collected at program acceptance, and is not to be recollected at annual recertification.

Transitional Housing (TH)

The transitional housing program does not require a person to be chronically homeless or have a disability. However, acceptance into the program is through the CSHS placement process, which ranks persons and households based on level of vulnerability (See CSHS Policy and Procedures). The household must be able to obtain employment and be self-sustaining within 24 months of entry into the TH program.

Source Documentation

All Recipients and Subrecipients must maintain documentation, obtained at intake, to demonstrate the eligibility of households served through CoC programs, and maintain and follow written intake procedures to ensure compliance with the homeless, chronically homeless, Severe Service Needs, and Disability definitions. Lack of third-party documentation (priority source) will not prevent an individual or family from being immediately admitted to emergency shelter, receiving street outreach services, or being admitted to shelter or receiving services provided by a victim service provider. However, the provider must document in the case file must the due diligence to obtain third party verification.

Order of Priority for Source Documentation:

- 1) Third-party documentation,
 - a. Records contained in an HMIS or comparable database used by victim service or legal service providers are acceptable evidence of third-party documentation and intake worker observations if the HMIS retains an auditable history of all entries, including the person who

Performance Measurement Module (Sys PM)

Summary Report for MD-504 - Howard County CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH		218		118			87	
1.2 Persons in ES, SH, and TH		253		192			105	

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

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

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

Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	0	0		0		0		0	
Exit was from ES	77	0	0%	0	0%	0	0%	0	0%
Exit was from TH	27	4	15%	0	0%	0	0%	4	15%
Exit was from SH	0	0		0		0		0	
Exit was from PH	1	0	0%	0	0%	0	0%	0	0%
TOTAL Returns to Homelessness	105	4	4%	0	0%	0	0%	4	4%

Performance Measurement Module (Sys PM)

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	170	166	-4
Emergency Shelter Total	114	87	-27
Safe Haven Total	0	0	0
Transitional Housing Total	34	36	2
Total Sheltered Count	148	123	-25
Unsheltered Count	22	43	21

Metric 3.2 – Change in Annual Counts

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

	Previous FY	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons		271	
Emergency Shelter Total		237	
Safe Haven Total		0	
Transitional Housing Total		34	

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

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		41	
Number of adults with increased earned income		0	
Percentage of adults who increased earned income		0%	

Performance Measurement Module (Sys PM)

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		41	
Number of adults with increased non-employment cash income		0	
Percentage of adults who increased non-employment cash income		0%	

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		41	
Number of adults with increased total income		0	
Percentage of adults who increased total income		0%	

Metric 4.4 – Change in earned income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		1	
Number of adults who exited with increased earned income		1	
Percentage of adults who increased earned income		100%	

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		1	
Number of adults who exited with increased non-employment cash income		0	
Percentage of adults who increased non-employment cash income		0%	

Metric 4.6 – Change in total income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		1	
Number of adults who exited with increased total income		1	
Percentage of adults who increased total income		100%	

Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.		183	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		26	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)		157	

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.		192	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		33	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)		159	

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in 2016.

Performance Measurement Module (Sys PM)

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Previous FY	Current FY	Difference
Universe: Persons who exit Street Outreach		0	
Of persons above, those who exited to temporary & some institutional destinations		0	
Of the persons above, those who exited to permanent housing destinations		0	
% Successful exits			

Metric 7b.1 – Change in exits to permanent housing destinations

	Previous FY	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited		196	
Of the persons above, those who exited to permanent housing destinations		108	
% Successful exits		55%	

Metric 7b.2 – Change in exit to or retention of permanent housing

	Previous FY	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH		69	
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations		69	
% Successful exits/retention		100%	