Before Starting the CoC Application

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC’s project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.
6. Questions marked with an asterisk (*), which are mandatory and require a response.
1A. Continuum of Care (CoC) Identification

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: TN-509 - Appalachian Regional CoC

1A-2. Collaborative Applicant Name: Appalachian Regional Coalition on Homelessness

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Appalachian Regional Coalition on Homelessness
1B. Continuum of Care (CoC) Engagement

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

<table>
<thead>
<tr>
<th>Organization/Person Categories</th>
<th>Participates in CoC Meetings</th>
<th>Votes, including selecting CoC Board Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Government Staff/Officials</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>CDBG/HOME/ESG Entitlement Jurisdiction</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Law Enforcement</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Local Jail(s)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Hospital(s)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>EMS/Crisis Response Team(s)</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Mental Health Service Organizations</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Substance Abuse Service Organizations</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Affordable Housing Developer(s)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Disability Service Organizations</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Disability Advocates</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Public Housing Authorities</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>CoC Funded Youth Homeless Organizations</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Non-CoC Funded Youth Homeless Organizations</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Youth Advocates</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>School Administrators/Homeless Liaisons</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>CoC Funded Victim Service Providers</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Non-CoC Funded Victim Service Providers</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Domestic Violence Advocates</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Street Outreach Team(s)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>LGBT Service Organizations</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Agencies that serve survivors of human trafficking</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Other homeless subpopulation advocates</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Homeless or Formerly Homeless Persons</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Mental Illness Advocates</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Substance Abuse Advocates</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Applicant: Appalachian Regional Coalition on Homelessness
Project: TN-509 CoC Registration FY2018
1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.

ARCH (CoC) Collaborative Applicant (CA) leads the CoC in developing a Crisis Response System that includes all organizations – homeless service providers, jails, hospitals, educators – and considers opinions primarily via email and ARCH website. Additionally, the CA performs phone solicitation and outreach to homeless service providers. Invitations are disseminated via email announcing bi-monthly meetings with published agenda to review funding opportunities; trainings regarding NOFAs; applications processes; and new partnership and collaboration possibilities. All interested parties are contacted to solicit opinions with consideration given to feedback, resulting in formation of committees composed of experienced knowledgeable persons dedicated to ending homelessness. The committees, representing a broad array of stakeholders such as domestic violence service providers, youth providers and behavioral mental health providers, identify service gaps and determine proactive solutions to close gaps to end homelessness.

1B-2. Open Invitation for New Members. Applicants must describe:
(1) the invitation process;
(2) how the CoC communicates the invitation process to solicit new members;
(3) how often the CoC solicits new members; and
(4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.

(1) ARCH CA transparently provides invitations to all interested parties to attend bi-monthly CoC meetings, posted monthly to website. Meetings are announced publically via email, ARCH website, and social media, and individuals are encouraged to join ARCH throughout the entire year. Each meeting includes relevant organizations or individuals who are invited to speak about their mission in detail and the services they provide. Formerly homeless person(s) are invited to be on the Board of Directors. (2) ARCH Outreach Director solicits new members while conducting agency outreach. The CoC solicits new members via social media, website utilization, networking, and via mass email. (3) The CoC solicits members on a daily basis while networking with partner agencies and performing CoC planning activities. ARCH applied and was awarded an AmeriCorps Evidence-Based Planning Grant in FY17-18 to promote the Housing First model to establish Coordinated Entry Access at Host Sites throughout the CoC. ARCH was awarded FY18-19 AmeriCorps Rural Intermediary grant to contract with Host Agencies (participating members) for
placement of AmeriCorps members to perform Screening Intake and VI-SPDAT at host/access sites. (4) ARCH hosts the Mayors Challenge, Landlord Summit, Housing First Summit, VA Stand down, CoC Planning meetings, Martin Luther King Day of Service, Serving Those Who Have Served, and other events to encourage participation of homeless and formerly homeless individuals.

1B-3. Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals. (limit 2,000 characters)

ARCH CA facilitates CoC Planning meeting yearly and issues a Request for Proposal, widely circulated to homeless and social service agencies, CoC members, and other community groups. ARCH publically posted the request for proposals and notified the public of acceptance and consideration of proposals from organizations not previously funded via mass E-mail, NPR, Social Media and posted to ARCH website on 7/6/18. Mainstream organizations interested in enhancing knowledge and determining project feasibility are invited to participate in training regarding HUD priorities and regulations, project eligibility, review criteria, deadlines, and One CPD Resources. CoC NOFA Planning Workshop was held on 7/10/18. Additionally, the 2018 CoC NOFA Workshop power point presentation was posted to the website, which included instructions for registration in E-Snaps, SAM and DUN & Bradstreet. Project review criteria, application due date, ranking, posting, and appeals deadlines were posted on 7/16/18.
1C. Continuum of Care (CoC) Coordination

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

<table>
<thead>
<tr>
<th>Entities or Organizations the CoC coordinates planning and operation of projects</th>
<th>Coordinates with Planning and Operation of Projects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Opportunities for Persons with AIDS (HOPWA)</td>
<td>Yes</td>
</tr>
<tr>
<td>Temporary Assistance for Needy Families (TANF)</td>
<td>Yes</td>
</tr>
<tr>
<td>Runaway and Homeless Youth (RHY)</td>
<td>Yes</td>
</tr>
<tr>
<td>Head Start Program</td>
<td>Yes</td>
</tr>
<tr>
<td>Funding Collaboratives</td>
<td>Yes</td>
</tr>
<tr>
<td>Private Foundations</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through other Federal resources</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through State Government</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through Local Government</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through private entities, including foundations</td>
<td>Yes</td>
</tr>
<tr>
<td>Other:(limit 50 characters)</td>
<td></td>
</tr>
</tbody>
</table>

1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:
(1) consulted with ESG Program recipients in planning and allocating ESG funds; and
(2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.
(limit 2,000 characters)

(1) CoC/ESG recipients serve on the Planning Committee and meet bi-monthly to discuss needs, gaps in service and update performance standards and outcomes. CoC representatives attend City Advisory Council meetings to present annual ESG applications (and CDBG) for set-aside selection. CoC...
coordinates services with providers serving individuals, families, unaccompanied youth, and persons fleeing domestic violence who are at risk of being homeless. PIT and HIC data are evaluated and strategies formulated at bi-monthly CoC meetings that include representation from private and public sectors. CoC/ESG Written Standards were written by ARCH and adopted by the CoC in October 2014. (2) Tennessee Housing Development Agency (THDA), ESG state pass-through agency, provides surveys to CoC Collaborative Applicant (CA) to determine applicant participation in CoC when funding competitive ESG applications and ARCH consolidates quarterly ESG reports to evaluate performance. Additionally, the CoC assists Participating Jurisdiction with the Consolidated Plan; advocates for the development of affordable housing on behalf of high barrier low-income clients; educates housing providers, local officials and citizens about fair housing, and determines strategies to meet the unmet housing/service needs of our homeless populations. ARCH meets with local Community Development Offices on a quarterly basis to discuss ending homeless strategies, which are incorporated into the NE TN Home Consortium Consolidated Plan.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?
Yes to both

1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)?
Yes

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:
(1) the CoC’s protocols, including the existence of the CoC’s emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and
(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)

(1) ARCH provides evidence-based practice training regularly including trauma-informed care, human trafficking, motivational interviewing, & victim centered training that places the crime victim’s priorities, needs and interests first. Survivors referred via Coordinated Entry (CE) have equal access to housing options & related supportive services. Annually DV providers are provided with training addressing best practices. ARCH has incorporated an Emergency Transfer to its Written Standards. Safe Passage, DV provider, has staff member located at Family Justice Center to prioritize survivor’s safety needs, accommodate their unique circumstances & maximize choice. ARCH was awarded an AmeriCorps Housing First grant to establish a Crisis Response
System at additional access sites using AmeriCorps members to assist with intake, outreach and SOAR assessments (rapid SSI/SSDI approval). ARCH trains members & staff on the dynamics of DV, privacy, confidentiality, & safety planning, including how to handle emergency situations at Access Sites. ARCH CE Policies & Procedures require households at risk of harm at assessment to be referred to DV provider using referral criteria based on system design, program capacity, resource limitations, placement & geographic considerations.

(2) ARCH CoC maximizes client choice through its CE process that will be designed to safely refer the household to the identified DV provider, either with a warm hand-off including a phone call and transportation either by ARCH or the DV provider. ARCH CE process will ensure DV victims have access to full range of housing & trauma-informed service intervention options, including prevention, RR, & other housing and mainstream services. The CoC has safety, planning & confidentiality policies in place to remove target-population specific barriers for access to the CE process, taking into consideration individual needs, vulnerabilities & risk factors during assessment & prioritization processes.

1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking.

(limit 2,000 characters)

ARCH DV Committee members plan for presentation/annual training at bi-monthly CoC meetings and annual Housing/Homeless Symposium. ARCH provides Housing First evidence-based practice training to CoC membership, including Coordinated Entry staff and all AmeriCorps members in Trauma Informed Care; Seeking Safety; Critical Time Intervention; Recognizing Human Trafficking; motivational interviewing; harm reduction; and victim-centered practices. Adverse Childhood Experience surveys will be presented to the CoC for vote to include with 2019 PIT survey.

1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database.

(limit 2,000 characters)

ARCH collaborates with local DV service providers to provide sufficient data to evaluate community needs in compliance with VAWA 2005. ARCH does not require identifiable data of persons served by the local DV service provider. DV providers submit quarterly ESG reports to ARCH HMIS Lead agency and upload de-identified, aggregate demographic information from DV provider software (Apricot) for annual CAPER. Gap analysis is performed at bi-monthly DV Committee meetings and report provided to HMIS Administrator. ARCH uses unduplicated total number of individuals and/or families served, the average length of stay in shelter, and reasons for re-entry to assess each community’s need for housing services for DV, dating violence, sexual assault, and stalking survivors. This data is used by the DV Committee for decision making and community planning processes.
1C-4. DV Bonus Projects. Is your CoC applying for DV Bonus Projects?  Yes

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

<table>
<thead>
<tr>
<th>SSO Coordinated Entry</th>
<th>X</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH</td>
<td></td>
</tr>
<tr>
<td>Joint TH/RRH</td>
<td>X</td>
</tr>
</tbody>
</table>

1C-4b. Applicants must describe:
(1) how many domestic violence survivors the CoC is currently serving in the CoC’s geographic area;
(2) the data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

(1) On Average the Appalachian Regional Coalition on Homelessness Continuum of Care serves approximately 127 families affected by domestic violence per month. Between July 1, 2017 and June 30, 2018, local organizations served 1525 persons in domestic violence situations.(2) Data source is Apricot by Social Solutions, reported by the Washington County Family Justice Center. (3) Data source is Apricot by Social Solutions, reported by the Washington County Family Justice Center.

1C-4c. Applicants must describe:
(1) how many domestic violence survivors need housing or services in the CoC’s geographic area;
(2) data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

(1) There are 65 total domestic violence survivors in need of housing services CoC area wide.
(2) ARCH solicited data from area DV providers via email and phone calls and reviewed aggregate ESG data reported quarterly to HMIS Administrator.
(3) The data was reported in aggregate by the area DV Providers to ARCH via email and Family Justice Center by phone call, CAPER reports, and DV Committee report.

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:
(1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;
(2) quantify the unmet need for housing and services for DV survivors;
(3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and
(4) describe how the CoC determined the unmet need for housing and services for DV survivors.
(limit 3,000 characters)

(1) Housing is a huge obstacle for DV survivors. Large percentages of DV survivors have a criminal background, and greater percentages have zero income, preventing them from obtaining affordable housing. Affordable housing is scarce with waiting lists ranging from one to two years. Scarcity of affordable housing is a huge barrier in full recovery, as survivors fear being homeless or become desperate, returning to their abuser. Additionally, data provided by DV providers demonstrate 40% or more of DV survivors have housing backgrounds (evictions, rent arrearage, etc.) that keep them from being eligible for most income-based housing options. Due to the immense size of our rural service area - 2897 square miles in the Appalachian Mountains of East Tennessee - ARCH has struggled with the implementation of an effective CE system that encompasses all homeless service providers, especially DV providers. Non-CoC-funded shelters do not report in HMIS or participate in Coordinated Entry, especially small, rural providers, who have no connection with or knowledge of other service providers in their area. Domestic violence shelters are especially isolated due to VAWA prohibition of entering client-level data into HMIS, which leaves them no mechanism for referral to housing and service programs. Realizing these limitations, ARCH is applying for DV SSO-CE and was awarded an AmeriCorps Housing First grant in 2018 to establish additional CE access sites to connect DV victims to appropriate services using AmeriCorps members to perform intake and outreach and SOAR assessments. (2) There is a wait list of 2 years for public housing and HCV. There are only 7 DV providers in the 8-county region and only two are funded under ESG RRH for a total of $200,000 for the entire CoC. There is limited funding to relocate or permanently house DV survivors in safe affordable housing, or transitional housing while the survivor is searching for permanent housing, on a PH wait list, or seeking employment. (3) Data source used to quantify the unmet need for housing and services includes PH and HCV wait list, and aggregate de-identified data uploaded to HMIS from Apricot. (4) CoC Director met with DV Committee and HMIS Administrator in Fall 2017 to discuss needs assessment for DV population and area service providers, specifically addressing better coordination and collaboration, maintaining client confidentiality and incorporation into CE. Specifically, ARCH and DV Committee addressed CAPER reporting difficulties experienced by DV providers and consulted with HUD Field Office to determine whether build-out of privatized DV module with existing HMIS is allowable. It was determined due to federal restrictions, it is not. Additionally, ESG quarterly reports submitted to CA revealed limited RR resources available to DV clients and minimal permanent housing assistance.

1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors.
(limit 2,000 characters)

(1) ARCH CE-SSO DV Bonus project will enhance its CE system to address the lack of connection to CoC-funded services, i.e. Permanent Supportive Housing, Dedicated Plus, RR, etc., by establishing protocol for safely referring DV clients to service providers while maintaining client confidentiality. ARCH will implement its Safety Transfer Plan and will partner with DV providers to ensure
Trainings are provided by informed experts in the field of DV, dating violence, sexual assault, stalking and human trafficking. ARCH CE Policies & Procedures will be incorporated so that staff refer households at risk of harm at time of assessment to a DV provider using referral criteria that will be established based on our system design, program capacity, resource limitations and placement with geographic considerations. The CE process will be designed to safely refer the household to the identified DV provider, either with a warm hand-off including a phone call and transportation either by ARCH or the DV provider. ARCH CE process will ensure DV victims have access to full range of housing and trauma-informed service intervention options available, including prevention, RR, and other housing and mainstream services. (2) Abuse Alternatives Joint TH/RR/PSH project will provide this DV provider with a van for safely transporting clients to ARCH Coordinated Entry access sites for connection to services and to other services, i.e. employment training, legal, mental health and outpatient health services. Transportation is a huge issue for the entire CoC, DV and non-DV alike, as our geographic terrain is primarily rural. (3) KHRA's Joint TH/RR/PSH project will provide 12 units and 24 beds of Rapid Rehousing funding to those DV providers who do not receive ESG RR. Only two DV providers in the entire CoC are ESG RR recipients, with combined funding of only $200,000.

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:

- (1) rate of housing placement of DV survivors;
- (2) rate of housing retention of DV survivors;
- (3) improvements in safety of DV survivors; and
- (4) how the project applicant addresses multiple barriers faced by DV survivors.

(limit 4,000 characters)

Abuse Alternatives Joint TH-RR-PSH: (1) Rate of Housing Placement: 30 days. (2) Rate of housing retention of DV survivors: 36%. (3) Improvements in safety of DV survivors: Abuse Alternative staff provides DV survivors access to information, education, referral and other necessary social and economic support to make informed decisions that best reflect their interests and needs. Rather than attempting to eliminate the violence, which is not controlled by the victim, the empowerment approach uses knowledge dissemination, training, and counseling to create a set of services that victims control, such as post-victimization assistance and risk minimization which in turn improves safety. (4) How the project applicant addresses multiple barriers faced by DV survivors: The majority of clients are not employed, therefore, employment assistance and job training programs are offered in house and by referral. The related challenge is clients have no transportation in predominantly rural service area. Abuse Alternatives is requesting a 15-passenger van to ensure clients are transported safely to Access Sites and programs/services. Clients are taught resume writing skills and application assistance, budgeting, money management and parenting skills. Referrals are made for legal, mental health and outpatient health services. Once clients residing in the shelter are stabilized and ready for permanent housing, they will be transported to CE Access Sites to apply for RRH or PSH. ARCH CE-SSO: (1) Rate of Housing Placement: 30 days; (2) Rate of housing retention of DV survivors: DV providers report aggregate demographic data to HMIS only. ARCH plans to incorporate this
measure if awarded CE-SSO Program. (3) Improvements in safety of DV survivors: ARCH will address safety concerns through ongoing CE staff training to include updated safety protocols placed in the CoC Written Standards Manual, the Coordinated Assessment Policies and Procedures, and VAWA (2013). ARCH CE system includes safety tips, safety transfer plan, lethality risk assessments & training protocol on the dynamics of DV, privacy and confidentiality, and how to handle emergency situations at CE Access Sites. ARCH partners with DV providers to ensure trainings are provided by informed experts in the field of DV, dating violence, sexual assault, stalking and human trafficking. (4) How the project applicant addresses multiple barriers faced by DV survivors: As CA, ARCH facilitates bi-monthly planning meetings to identify gaps in services and has identified a need for the coordination of services for development of a Crisis Response System to ensure low barrier entry to housing with wraparound mental and behavioral health. ARCH CE process will ensure DV victims have access to full range of housing and trauma-informed, culturally competent service intervention options. KHRA Joint TH-RR-PSH: (1) Rate of Housing Placement: 30 days. (2) Rate of housing retention of DV survivors: Data unavailable. (3) Improvements in safety of DV survivors: Kingsport Housing & Redevelopment Authority includes domestic violence in its list of preferences for housing assistance, and works with victims of domestic violence to ensure they are safely housed as quickly as possible through the Housing Choice Voucher program, which covers 6 of the 8 counties within the CoC. (4) How the project applicant addresses multiple barriers faced by DV survivors: KHRA works with service provider partners in the community to ensure program participants receive wrap-around services to help them gain self-sufficiency and protect them from anyone who may pose a threat to their personal safety. KHRA Special Housing staff will help program participants to obtain housing that meets Housing Quality Standards. KHRA staff will work with landlords to mediate any disputes that may arise to ensure that program participants remain stably housed.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC’s geographic areas:

(1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;
(2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and
(3) Indicate whether the PHCoC has a move on strategy. The information should be for Federal Fiscal Year 2017.

<table>
<thead>
<tr>
<th>Public Housing Agency Name</th>
<th>% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry</th>
<th>PHA has General or Limited Homeless Preference</th>
<th>PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson City Housing Authority</td>
<td>22.00%</td>
<td>Yes-Both</td>
<td>No</td>
</tr>
<tr>
<td>Both Kingsport Housing Authority</td>
<td>31.00%</td>
<td>Yes-Both</td>
<td>No</td>
</tr>
<tr>
<td>Bristol Housing Authority</td>
<td>0.00%</td>
<td>Yes-Both</td>
<td>No</td>
</tr>
</tbody>
</table>
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-5a.** For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)

The Regional Housing Facilitator routinely visits PHAs to encourage those without homeless admission preference in their written policy to incorporate a homeless admission preference. ARCH is following the CoC and PHA Collaboration Guidebook recommendations and encourages PHAs to follow PIH Notice 2013-15 at bimonthly planning meetings. ARCH Outreach, AmeriCorps Program Director and Regional Housing Facilitator will continue to speak to each PHA that has no preference and help them connect the dots between Point-In-Time (PIT) count, Homeless Management Information Systems (HMIS) data, the community’s strategic Plan to End Homelessness, the Consolidated Plan, and the PHA Plan process to adopt a homeless admission preference.

**1C-5b. Move On Strategy with Affordable Housing Providers.** Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? **No**

**1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT).** Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness. (limit 2,000 characters)

ARCH has Written Standards that follow 24 CFR 576.407 (a-b) & HUD’s “Equal Access to Housing in HUD programs, Regardless of Sexual Orientation or Gender Identity” final rule, published on Sept. 21, 2016. ARCH has trained CoC participants who interact directly with potential clients and refers to CPD Notice 15-02 for guidance. Anti-discrimination Equal Access annual training was implemented at CoC bi-monthly meeting held on August 14, 2018. ARCH implemented HUD’s Equal Access Rule in its Written Standards, found at www.appalachianhomeless.org pg. 10, paragraph 14. A copy of the PowerPoint training and Written Standards were provided to all participants.

**1C-6a. Anti-Discrimination Policy and Training.** Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access
Final Rule and the Gender Identity Final Rule.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?</td>
<td>Yes</td>
</tr>
<tr>
<td>2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?</td>
<td>Yes</td>
</tr>
<tr>
<td>3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual’s Gender Identity (Gender Identity Final Rule)?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC’s geographic area. Select all that apply.

- Engaged/educated local policymakers:
  - X
- Engaged/educated law enforcement:
  - X
- Engaged/educated local business leaders:
  - X
- Implemented communitywide plans:
  - X
- No strategies have been implemented:
- Other:(limit 50 characters)
  - Implemented drug courts
  - X

1C-8. Centralized or Coordinated Assessment System. Applicants must:

1. demonstrate the coordinated entry system covers the entire CoC geographic area;
2. demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;
3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
4. attach CoC’s standard assessment tool.

(limit 2,000 characters)

(1) ARCH CE System has been implemented in phases, first concentrating on the 3 largest cities in the area, Johnson City, Kingsport and Bristol, by establishing access sites in each City at ARCH satellite offices and area shelters. Phase Two involves establishing access sites in the rural, outlying counties, which is more challenging. In both the Cities and Counties, ARCH, a newly funded AmeriCorps Rural Intermediary, has begun to place AmeriCorps members at Host sites to perform screening intake and VI-SPDAT, which
determines placement on priority list, and make subsequent “smart referrals” (through HMIS CE module) to appropriate, available RR/PSH/TH/ES providers. The AmeriCorps program is especially suitable for our largely rural service area as host sites provide a no wrong door approach and members, largely BSW interns, are provided Housing First evidence-based training while giving back to the community. (2) In addition to performing intakes, AmeriCorps members perform outreach to reach those populations who are least likely to apply for homelessness assistance. ARCH Outreach Team involves weekly forays to known encampments, rotating geographically, to identify, engage and educate. Assessments are done in the field. ARCH Outreach Team maintains the By-Name List and ARCH Homeless Programs Director is SOAR (SSI/SSDI, Outreach Access and Recovery) certified, researching medical records and submitting summaries to local SSA for rapid approval of SSI/SSDI for homeless populations with no income, and is an integral part of ARCH Outreach effort. (3) ARCH follows a triage assessment process. Length of Homelessness and chronicity are determined using CoC-wide Standardized Screening Assessment Tool, then Vulnerability Index-Service Prioritization Decision Assessment Tool (VI-SPDAT) is performed, which assigns a score based on acuity. Clients scoring 9 or higher are placed on the Priority List and referred to appropriate available service provider RR/ES/TH/PSH.
1D. Continuum of Care (CoC) Discharge Planning

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

<table>
<thead>
<tr>
<th>System of Care</th>
<th>Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Care:</td>
<td>X</td>
</tr>
<tr>
<td>Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Mental Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Correctional Facilities:</td>
<td>X</td>
</tr>
<tr>
<td>None:</td>
<td></td>
</tr>
</tbody>
</table>

1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

<table>
<thead>
<tr>
<th>System of Care</th>
<th>Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Care:</td>
<td>X</td>
</tr>
<tr>
<td>Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Mental Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Correctional Facilities:</td>
<td>X</td>
</tr>
<tr>
<td>None:</td>
<td></td>
</tr>
</tbody>
</table>
1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:
(1) objective criteria;
(2) at least one factor related to achieving positive housing outcomes;
(3) a specific method for evaluating projects submitted by victim services providers; and
(4) attach evidence that supports the process selected.

<table>
<thead>
<tr>
<th>Used Objective Criteria for Review, Rating, Ranking and Section</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Included at least one factor related to achieving positive housing outcomes</td>
<td>Yes</td>
</tr>
<tr>
<td>Included a specific method for evaluating projects submitted by victim service providers</td>
<td>Yes</td>
</tr>
</tbody>
</table>

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:
(1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and
(2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.
(limit 2,000 characters)

(1) Consideration was given to vulnerable populations & percentage of beds targeted to chronically homeless. Renewal projects that targeted participants from at-risk populations including Veterans, youth, domestic violence, chronic illness, HIV, alcohol & drug abuse, and families with children earned max 10 pts. (2) Projects earned max 20 pts. for percentage of beds dedicated to chronically homeless. Bonus projects were given priority as follows: 1) DV project; 2) Joint TH-RRH-PSH or RRH-PH; 3) Dedicated Plus. Total 7 pts. for DV Bonus addressing unmet needs of DV survivors; safety practices (SSO projects) & Housing First; & addressing barriers faced by DV survivors. Bonus RR-PSH Projects earned max 4 pts. for type of housing proposed fits the needs of program participants; type of supportive services offered to program participants ensures successful retention/help to obtain permanent housing; a specific plan for ensuring program participants are individually assisted to obtain the benefits of mainstream health, social, and employment programs; and program participants are assisted to obtain and remain in permanent housing in a manner that fits their need. Joint TH-RRH-PSH earned max. 6 pts. for the same categories with the addition of 1 pt. for how the proposed project will provide

Applicant: Appalachian Regional Coalition on Homelessness
Project: TN-509 CoC Registration FY2018
enough RRH assistance to ensure at any given time a program participant may move from TH to PH; and 1 pt. for whether the project adheres to a Housing First model. SSO-Coordinated Entry Project earned max 4 pts. for how the CE system is easily available/reachable for all persons within the CoC who are seeking information regarding homelessness assistance; accessibility for persons with disabilities within the CoC; strategy for advertising designed specifically to reach homeless persons with the highest barriers within the CoC; standardized assessment process; and ensures program participants are directed to appropriate housing & services that fit their needs.

1E-3. Public Postings. Applicants must indicate how the CoC made public:

1. objective ranking and selection process the CoC used for all projects (new and renewal);
2. CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and
3. attach documentation demonstrating the objective ranking, rating, and selection process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.

<table>
<thead>
<tr>
<th>Public Posting of Objective Ranking and Selection Process</th>
<th>Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings</th>
</tr>
</thead>
<tbody>
<tr>
<td>CoC or other Website</td>
<td>☐ CoC or other Website</td>
</tr>
<tr>
<td>Email</td>
<td>☐ Email</td>
</tr>
<tr>
<td>Mail</td>
<td>☐ Mail</td>
</tr>
<tr>
<td>Advertising in Local Newspaper(s)</td>
<td>☐ Advertising in Local Newspaper(s)</td>
</tr>
<tr>
<td>Advertising on Radio or Television</td>
<td>☐ Advertising on Radio or Television</td>
</tr>
<tr>
<td>Social Media (Twitter, Facebook, etc.)</td>
<td>☐ Social Media (Twitter, Facebook, etc.)</td>
</tr>
</tbody>
</table>

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between the FY 2014 and FY 2018 CoC Program Competitions.

Reallocation: No

1E-4a. If the answer is “No” to question 1E-4, applicants must describe how the CoC actively reviews performance of existing CoC Program-funded projects to determine the viability of reallocating to create new high performing projects. (limit 2,000 characters)
ARCH CoC reviews the populations experiencing homelessness and identifies the types and amount of interventions needed by creating a population breakdown showing how many people in various population categories experience homelessness over the course of the year. The breakdown includes unaccompanied adults; unaccompanied adults experiencing chronic homelessness; unaccompanied underage youth (under 18); unaccompanied transition-aged youth (18-24); families with children; families with children experiencing chronic homelessness; Veterans; and people fleeing domestic violence. In addition to looking at homeless populations, ARCH CoC analyzes stock of housing and services and determines whether they meet the needs of people experiencing homelessness and determines where there are gaps. ARCH specifically reviews outcomes that measure the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations, and assesses each individual program’s contribution to the CoC’s goal of 80% or higher; this outcome was actually 95%, exceeding CoC-wide goal. This is the basis for ARCH CoC PSH priority. All Renewal projects are PSH except for HMIS, which is required; therefore no reallocation was deemed necessary.

1E-5. Local CoC Competition. Applicants must indicate whether the CoC:
(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline–attachment required;
(2) rejected or reduced project application(s)–attachment required; and
(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline–attachment required.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.</td>
<td></td>
</tr>
<tr>
<td>(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.</td>
<td>Yes</td>
</tr>
<tr>
<td>(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?</td>
<td>Yes</td>
</tr>
</tbody>
</table>
2A. Homeless Management Information System (HMIS) Implementation

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required.

2A-1a. Applicants must:
(1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and
(2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).


2A-3. HMIS Vendor. What is the name of the HMIS software vendor?

2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area.

2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:
(1) total number of beds in 2018 HIC;
(2) total beds dedicated for DV in the 2018 HIC; and
(3) total number of beds in HMIS.

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Total Beds in 2018 HIC</th>
<th>Total Beds in HIC Dedicated for DV</th>
<th>Total Beds in HMIS</th>
<th>HMIS Bed Coverage Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelter (ES) beds</td>
<td>331</td>
<td>72</td>
<td>142</td>
<td>54.83%</td>
</tr>
<tr>
<td>Safe Haven (SH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing (TH) beds</td>
<td>120</td>
<td>0</td>
<td>33</td>
<td>27.50%</td>
</tr>
<tr>
<td>Rapid Re-Housing (RRH) beds</td>
<td>107</td>
<td>0</td>
<td>107</td>
<td>100.00%</td>
</tr>
<tr>
<td>Permanent Supportive Housing (PSH) beds</td>
<td>483</td>
<td>25</td>
<td>271</td>
<td>59.17%</td>
</tr>
<tr>
<td>Other Permanent Housing (OPH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months.

( limit 2,000 characters)

Many of the shelter beds within our 8-county, 2489-square mile region, are rural faith-based ES who have no interest in participating in HMIS reporting since they do not receive HUD funding. Of the 120 Transitional Housing beds, 33 are Veteran Affairs Grant Per Diem; the rest are small, non-profit, faith-based TH programs who also do not receive HUD funding and will not report in HMIS. Of the 483 total PSH beds, 175 are HUD-Veterans Affairs Supportive Housing (VASH) PSH beds, which are not reported in HMIS; the VA Homeless Program reports bed data in Department of Veterans Affairs HOMES nationwide database. In our CoC, which includes the City of Bristol, which straddles two states, we are not able to determine the services homeless clients who walk across the street from the Virginia to the Tennessee side have received due to two CoCs in two different states who use two different HMIS systems. ARCH CoC intends to increase this percentage by continuing to engage with non-CoC-funded providers to promote the benefit of utilizing the Coordinated Entry/HMIS system to report their available beds and access other service provider beds for referral purposes.


2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/30/2018
2B. Continuum of Care (CoC) Point-in-Time Count

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).

01/23/2018

2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).

04/30/2018
2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC’s sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC’s sheltered PIT count results. (limit 2,000 characters)
ARCH made no changes from 2017 to 2018 to an already successful shelter count process. PIT subcommittee meets in interim months to plan for geographic coverage. CoC members are trained at December CoC Meeting by PIT Subcommittee members and teams are established. The survey itself and survey process is reviewed and encampment mapping presented. Outreach teams meet weekly to engage street homeless, walk the Appalachian Trail, and look for new encampments to add to our coverage map. This year, ARCH CA worked with several service providers, specifically local United Way agencies to train in survey taking and successful engagement, which enhanced accuracy. Additionally, ARCH PIT was covered by local news stations increasing awareness and impacting outcome.

2C-2. Did your CoC change its provider coverage in the 2018 sheltered count? No

2C-2a. If “Yes” was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

| Beds Added: | 0 |
| Beds Removed: | 0 |
| Total: | 0 |

2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC’s 2018 sheltered PIT count? No
2C-3a. If “Yes” was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Beds Added:</td>
<td>0</td>
</tr>
<tr>
<td>Beds Removed:</td>
<td>0</td>
</tr>
<tr>
<td>Total:</td>
<td>0</td>
</tr>
</tbody>
</table>

2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable.

No

2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?

Yes

2C-5a. If “Yes” was selected for question 2C-5., applicants must describe:
(1) how stakeholders serving youth experiencing homelessness were engaged during the planning process;
(2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and
(3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count.
(limit 2,000 characters)

(1) Homes for Youth (H4Y), now operating as part of Keystone Development Inc., was created to help Johnson City youth, ages 18 through 25, who have no permanent residence and few resources. To locate the youth, who are often an invisible population, the JCHA networks with organizations such as Holston Home for Children, Youth Villages and Frontier Health, who work with children who have been placed under state custody and could become homeless after age 18. Once found, the young adults are given transitional housing and provided with case management through Youth Villages. A team of up to 12 mentors is provided to offer counseling and support and for teaching participants basic life skills. Each youth is asked to sign a contract outlining limitations and expectations. The H4Y committee includes JCHA Executive Director; ARCH Executive Director; Youth Villages Case Management; Schools Homeless Coordinator (17 cities and counties); Department of Child Services, Housing Authority staff, and Frontier Health, who meet monthly to discuss placement of unaccompanied youth transitioning from Foster Care. (2) ARCH CoC worked with H4Y and school systems McKinney-Vento Homeless Education Liaisons to determine where youth experiencing homelessness are most likely to be identified. DCS refers youth aging out of Foster Care to Youth Villages who provides the H4Y Committee a list of homeless youth. (3) The
McKinney-Vento Homeless Education Liaisons enlisted homeless student volunteers to participate in 2018 PIT count.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:
(1) individuals and families experiencing chronic homelessness;
(2) families with children experiencing homelessness; and
(3) Veterans experiencing homelessness.
(limit 2,000 characters)

(1) ARCH meets in October to plan for and train volunteers, students, service providers and CoC agencies to better identify and strategically count all populations experiencing homelessness. (2) The Homeless Education Liaisons include questionnaires regarding housing status in the first month of the first semester and again in the first month of the second semester to better assess housing status changes throughout the year and earmarks at-risk students for day of count. (3) ARCH Outreach Team includes VAMC staff. Outreach Team performs weekly forays into encampments and maintains a by-name list of homeless Veterans and compares the list with survey results to ensure accurate count of both chronic and non-chronic Veterans. Mountain Home VAMC is located in Johnson City, just a few blocks from ARCH CA office.
3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

| Number of First Time Homeless as Reported in HDX. | 1,106 |

3A-1a. Applicants must:
(1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;
(2) describe the CoC’s strategy to address individuals and families at risk of becoming homeless; and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)

(1) ARCH CoC identifies risk factors for persons becoming homeless the first time using CE screening tool, VI-SPADT, SAMHSA Center for Substance Abuse Tool (CSAT) SUD Screening tool, and conversation with clients. (2) ARCH CoC strategies address individuals and families at risk of becoming homeless by providing housing search, case management, landlord-tenant mediation, follow-up services, money management & financial assistance. ARCH has advertised the CE hotline through outreach efforts, public service announcements and posting of literature in prominent public places. VI-SPADT scores client vulnerability for homelessness on presentation. Assessment Specialists refer to available resources including ESG HP once risk is identified. ARCH strategically uses a wide array of prevention resources to help intervene at the point where persons may potentially become homeless. These efforts link people with resources like healthcare, criminal justice, and youth programs to develop discharge planning strategies for people who would otherwise exit institutional settings, resulting in homelessness. (3) ARCH HMIS Administrator is responsible for overseeing CoC strategies and monitors systems performance measures and data quality reports to analyze expediency of rapidly rehousing first-time homeless. ARCH CoC Director ensures a fully implemented selection process that connects housing resources according to priority, eligibility, and client choice, and shelter diversion is performed to end or reduce number of episodes of first-time homelessness.

3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:
(1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);
(2) describe the CoC’s strategy to reduce the length-of-time individuals and persons in families remain homeless;
(3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
(4) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the length of time individuals and families remain homeless.
(limit 2,000 characters)

(1) Current fiscal year average length of time homeless for persons in ES is 25 days. Current fiscal year average length of time homeless for persons in ES and TH is 41 days. (2) ARCH CoC strategies to reduce length of time individuals and persons in families remain homeless include Outreach Team identifying homeless risk factors at engagement and placing client on the By-Name list followed by monthly case conferencing with area shelters and housing providers. Additionally, the CoC reduces the length of homelessness by rapidly rehousing with SSVF and ESG RRH, and advertisement of the CE (CARE) hotline through outreach methodology and public service announcements. Posting of literature in prominent places provides easy access to services. (3) ARCH CoC identifies and houses individuals and persons in families with the longest lengths of time homeless using VI-SPDAT scores, which measures client vulnerability and prioritizes according to length of homelessness and severity of need. Assessment specialists refer to RR/PSH available services in accordance with Housing First. (4) ARCH HMIS Administrator compiles quarterly reports to measure CoC performance in reducing the length of time individuals and families remain homeless. HMIS Administrator leads bi-monthly HMIS Sub-Committee meeting where reports are reviewed and strategies formulated to reduce length of time homeless.

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:
(1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and
(2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.</th>
</tr>
</thead>
<tbody>
<tr>
<td>29%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.</th>
</tr>
</thead>
<tbody>
<tr>
<td>95%</td>
<td></td>
</tr>
</tbody>
</table>

3A-3a. Applicants must:
(1) describe the CoC’s strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and
(2) describe the CoC’s strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing.
destinations.
(limit 2,000 characters)

(1) ARCH CoC Coordinated Entry system ensures smart referrals are made, reducing client fatigue and promoting exits to permanent housing destinations for those in Emergency Shelters. VI-SPDAT determines client vulnerabilities and ensures shelter diversion, rapidly rehousing to permanent housing with minimal barriers in accordance with Housing First. ARCH CoC Coordinated Entry encompasses 8 counties and is incorporated into HMIS with Landlord Bank and dashboard of available units easily accessed by Intake Coordinators at client presentation. ARCH VA GPD TH program, funded in FY18-19 under the Bridge Model, requires chronically homeless Veterans to have a commitment for permanent housing – VASH, ESG, Dedicated Plus, RR, PSH – in hand within 14 days of admission. Veterans have 90 days to attain PH; ARCH case managers assist with housing navigation during this “bridge” period.

(2) ARCH CoC and supportive service agencies co-function to provide wraparound services and connect to mainstream benefits to sustain permanent housing and prevent homelessness from recurring. Additionally, educational classes, employment supports, budgeting classes, peer support, mental health, substance abuse treatment, anger management, relationship building, wellness plans, life skills, etc. are offered by ARCH and various agencies promoting enrichment and self-sustainability. ARCH AmeriCorps program is a holistic housing program, which measures output as the number of homeless clients receiving housing services including the development of affordable housing using AmeriCorps members to leverage services provided by Host Sites, i.e. Eastern Eight Community Development Corporation; Appalachian Community Federal Credit Union; Habitat for Humanity; Engage Tri-Cities, Watauga Recovery, ARCH, etc.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

<table>
<thead>
<tr>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX</td>
</tr>
<tr>
<td>9%</td>
</tr>
</tbody>
</table>

3A-4a. Applicants must:

(1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;

(2) describe the CoC’s strategy to reduce the rate of additional returns to homelessness; and

(3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the rate of additional returns to homelessness.

(limit 2,000 characters)

(1) Common factors of returns to homelessness are identified by VI-SPDAT and Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Treatment (CSAT) Tool, used to assess SMI, SUD and CODs for ARCH Cooperative Agreement to Benefit Homeless Individuals (CABHI) grant. Furthermore, ARCH hosts Masters level students whose theses will explore what Adverse Childhood Experiences (ACE) predict later in life, in
particular, homeless chronicity. ACE surveys are done at ARCH office and East Tennessee State University Downtown Day Center Clinic, and will be added to the 2019 PIT survey to analyze correlation with childhood trauma and homelessness. The CoC uses RRH to increase rate of moves to PH and PSH. Coordinated Entry process assesses clients and routes them to the best resource to meet their situation, including PSH and RRH. (2) Resource guidebooks are available at CE Access Sites informing individuals and family of available community services to prevent returns to homelessness. CoC partners, Eastern Eight Community Development and Appalachian Community Federal Credit Union conduct housing counseling, budgeting, credit counseling, etc. to reduce returns to homelessness and ARCH uses HMIS to measure the effectiveness of these strategies. (3) ARCH HMIS Administrator is responsible for compiling quarterly reports to measure CoC performance in reducing the rate of individuals and persons and families returning to homelessness. HMIS Administrator leads bi-monthly HMIS sub-committee meeting where reports are reviewed and strategies are formulated to reduce the rate of individuals and persons in families returning to homelessness.

3A-5. Job and Income Growth. Applicants must:
(1) describe the CoC’s strategy to increase access to employment and non-employment cash sources;
(2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
(3) provide the organization name or position title that is responsible for overseeing the CoC’s strategy to increase job and income growth from employment.
(limit 2,000 characters)

(1) ARCH CoC assists homeless Veterans gain employment and mainstream benefits by connecting to Mountain Home VAMC, CWT, IT, Voc. Rehab, HVRP, Training, Education Programs, and VA Employment Outreach Coordinator to increase income. Partnerships with State and local agencies help non-Veteran homeless individuals attain jobs/ training through TN Career Center, Vocational Rehabilitation, Workforce Development, and connect individuals with employers via job fairs to increase income. Attainment of cash income is facilitated by ARCH Certified SOAR Assessor who provides SOAR (SSI/SSDI, Outreach, Access and Recovery), rapid access to SSDI/ SSI and VA Disability Benefits. Clients are referred to DHS for TANF and assistance with child support for non-cash sources. (2) ARCH CoC works with Local Veterans’ Employment Representatives (LVERs) who provide assistance to Veterans by supervising the provision of all services to Veterans furnished by employment providers, including counseling, testing, and identifying training and employment opportunities; monitoring job listings from Federal contractors to see that eligible Veterans get priority in referrals to these jobs; monitoring Federal department and agency vacancies listed at local state employment service offices; promoting and monitoring the participation of Veterans in Federally-funded employment and training programs; and contacting community leaders, employers, unions, training programs and Veterans’ Service Organizations so eligible Veterans get services to which they are entitled. Non-Veterans are referred to Behavioral Mental Health Providers for development of Individual Placement and Support, which helps people living with behavioral health conditions work at regular jobs of their choosing; and connected with Workforce
and Development, Alliance for Business and Training, Youth Build, and Job Corps for 18-24-year olds. (3) ARCH Outreach Director is responsible for strategies to increase job and income growth.

3A-6. **System Performance Measures Data Submission in HDX.** Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy) 05/31/2018
3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Instructions
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:
(1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and
(2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.

| Total number of beds dedicated as DedicatedPLUS | 16 |
| Total number of beds dedicated to individuals and families experiencing chronic homelessness | 202 |
| Total | 218 |

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required.

Yes

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

| History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse) | X |
| Number of previous homeless episodes | X |
| Unsheltered homelessness | X |
| Criminal History | |
| Bad credit or rental history | |
| Head of Household with Mental/Physical Disability | X |
3B-2.2. Applicants must:
(1) describe the CoC’s current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;
(2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and
(3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.
(limit 2,000 characters)

(1) ARCH strategy to rapidly rehouse every household with children within 30 days of becoming homeless includes successful utilization of Coordinated Entry, which provides for referral to programs such as PSH, SSVF, CABHI, ESG, HOPWA, RR, and SHP. Families meeting requirements for qualifying programs are provided utility, rent and deposit assistance through the community’s safety net providers. Participants in SSVF and ESG Programs are rapidly rehoused within 30 days per ARCH CoC ESG written Standards. Veteran households with children are referred from the VA and are rapidly rehoused with accompanying VASH vouchers or SSVF within 30 days. Non-veteran families are assisted with ESG RR funding with 30 day requirement as outlined in attached ARCH CoC ESG Written Standards. (2) Eastern Eight Community Development Corporation provides home ownership classes; Appalachian Community Federal Credit Union, a Community Development Financial Institution (CDFI), provides budgeting and healthy credit classes; ARCH provides peer support; individual and group therapy; nutrition; child/parent relationship classes; VITA tax assistance; food pantry; clothes closet; and ongoing case management to ensure housing sustainability. (3) ARCH CoC Director is responsible for overseeing the CoC’s strategy to rapidly rehouse families within 30 days of becoming homeless by communicating with school McKinney-Vento Homeless Liaisons; performing local gap analyses and educational training to service providers to include trauma-informed care; Critical Time Intervention; Adverse Childhood Experience assessments, and other family-centered evidence-based practices.

3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.

- CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.
- CoC conducts optional training for all CoC and ESG funded service providers on these topics.
- CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.
- CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.
- CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.

3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth
Experiencing Homelessness. Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied homeless youth includes the following:

| Human trafficking and other forms of exploitation | Yes |
| LGBT 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 |

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.

| History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse) | X |
| Number of Previous Homeless Episodes                                                                  | X |
| Unsheltered Homelessness                                                                               | X |
| Criminal History                                                                                      | X |
| Bad Credit or Rental History                                                                          |   |

3B-2.6. Applicants must describe the CoC’s strategy to increase:
(1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and
(2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.
(limit 3,000 characters)

(1) Strategies to increase housing and services for all youth experiencing homelessness implemented include using HMIS data to identify youth and local needs, establishing measurable performance goals, developing and improving prioritization and placement strategies; and outreach to known homeless youth locations (JC Day Center, Shades of Grace). Johnson City Housing Authority was awarded additional funding for phase II of Baker Street PSH Project, targeting 10 units to homeless youth, and Frontier Health RHY program provides two beds targeted to RHY. ARCH has expanded access to 6 PSH beds for LGBTQ youth in its 2018 PSH Bonus. Link House (runaway youth facility) provides 3 group homes. (2) ARCH Coordinated Entry System is creating a by-name list in HMIS of all homeless youth within the CoC with input from the Homes For Youth Committee. H4Y Committee case conferences youth aging out of Foster Care with Youth Villages and Department of Children Services, Johnson City Housing Authority, Frontier Health, McKinney-Vento Education Liaison, and ARCH CoC Director.
3B-2.6a. Applicants must:
(1) provide evidence the CoC uses to measure both strategies in question
3B-2.6. to increase the availability of housing and services for youth
experiencing homelessness;
(2) describe the measure(s) the CoC uses to calculate the effectiveness of
the strategies; and
(3) describe why the CoC believes the measure it uses is an appropriate
way to determine the effectiveness of the CoC’s strategies.
(limit 3,000 characters)

(1) ARCH CE will begin using the Transition Aged Youth - Service Prioritization
Decision Assistance Tool (TAY) as an evidence-based strategy. This strategy is
measurable and outcome data will be used to provide training to Coordinated
Entry and youth providers throughout the CoC. (2) After full implementation of
the TAY across CE Access Points, a Youth By-Name housing prioritization list
will be developed and the number of youth housed will be reported quarterly by
ARCH at the bi-monthly CoC meetings. Through the Homes for Youth
Committee, youth providers will create a list of the best housing interventions for
youth. (3) ARCH understands that including youth in discussion of needs and
developing homeless interventions through a youth point of view will result in
the ability to serve more. ARCH also knows that the TAY, diversion, and a youth
By Name Lists are effective tools. ARCH trains youth providers, shares best
practices on the ARCH website and ARCH case managers attend local and
national conferences on youth and family homelessness to connect with youth
providers regarding best practices emerging on a national level.

3B-2.7. Collaboration—Education Services. Applicants must describe how
the CoC collaborates with:
(1) youth education providers;
(2) McKinney-Vento State Education Agency (SEA) and Local Education
Agency (LEA);
(3) school districts; and
(4) the formal partnerships with (1) through (3) above.
(limit 2,000 characters)

(1) ARCH CoC collaborates with 8 counties and 9 city youth education
providers to perform PIT surveys and provide referrals through the CE process.
(2) The McKinney-Vento Homeless Liaisons identify all homeless children and
unaccompanied youth, coordinating services provided by CoC agencies to
locate housing and other service resources. Homeless Liaisons play a critical
role in stabilizing students and promoting academic achievement at the
individual, school, and district level. The CoC member agencies partner with the
LEAs to ensure children maintain school attendance, while addressing barriers,
such as transportation, school fees, etc. The member agencies partner with
LEA staff to identify homeless children meeting the criteria for program
placement in early childhood development programs. School Homeless
Liaisons identify and refer homeless families to CE Access Sites. (3) ARCH
effectively collaborates with school districts and service providers to ensure that
homeless children in that district receive needed services. List of Homeless
Liaison Contacts is posted on ARCH website for easy access of intake
coordinators. (4) Homeless Liaisons attend bi-monthly CoC meetings and
participate in PIT.
3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services. (limit 2,000 characters)

ARCH Written Standards require all CoC funded agencies to inform homeless individuals and families of their eligibility for education services. The regional McKinney-Vento Homeless Liaisons provide posters and brochures regarding educational rights of children and youth experiencing homelessness to schools, shelters, community agencies, runaway youth providers, businesses, churches, and service clubs/organizations. ARCH CoC and the McKinney-Vento school system Homeless Liaisons collaborate to share best practices and ensure policies and procedures are followed. A contact list for McKinney-Vento Homeless Liaisons is shared via the ARCH website, as well as a Tennessee Department of Education website link with a cache of additional information. The HMIS Lead Agency, ARCH, has incorporated educational status of children and youth into HMIS Screening Intake Tool. With parent, guardian, or unaccompanied youth authorization and signature, this information can be shared confidentially with McKinney-Vento Homeless Liaisons, which allows children or youth to be enrolled, effectively expediting identification and access to McKinney-Vento services within the school systems.

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select “Yes” or “No”. Applicants must select “Yes” or “No”, from the list below, if the CoC has written formal agreements, MOU/MOA’s or partnerships with providers of early childhood services and support.

<table>
<thead>
<tr>
<th>Provider</th>
<th>MOU/MA</th>
<th>Other Formal Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Childhood Providers</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Head Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Early Head Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Child Care and Development Fund</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Federal Home Visiting Program</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Healthy Start</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Public Pre-K</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Birth to 3 years</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Tribal Home Visiting Program</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Other: (limit 50 characters)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
ARCH refers every homeless Veteran to VASH as they enroll through CE and Outreach. ARCH collaborates with Mountain Home VAMC, the Department of Veterans Affairs, and SSVF provider, Volunteers of America, to ensure that all Veteran services are streamlined and that all Veterans are permanently housed within 30 days of program admission. Veterans are referred to GPD, SOAR, eligible VA services, Dept. of Labor Homeless Veteran Reintegration Program (HVRP) and Supportive Services for Veterans Families (SSVF) for financial assistance and case management to achieve rapid employment and housing. ARCH is a VA GPD grantee and houses 15 homeless Veterans in its Bridge Transitional Housing Program, Blakley House. Salvation Army of Johnson City is a VA GPD provider and provides 18 Service-Intensive Transitional Housing (SITH) beds to homeless Veterans. ARCH maintains the By-Name list in conjunction with the VAMC Healthcare for Homeless Veterans (HCHV) Programs and Volunteers of America SSVF Provider. The VAMC HCHV Program has dedicated Coordinated Entry Liaison staff in place to enhance ARCH CE System/Veteran referrals.

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC? Yes

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness? Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach? Yes

3B-5. Racial Disparity. Applicants must:
(1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;
(2) if the CoC conducted an assessment, attach a copy of the summary. No
4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:
For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:
(1) assists persons experiencing homelessness with enrolling in health insurance; and
(2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.

<table>
<thead>
<tr>
<th>Type of Health Care</th>
<th>Assist with Enrollment</th>
<th>Assist with Utilization of Benefits?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Private Insurers:</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Non-Profit, Philanthropic:</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Other: (limit 50 characters)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4A-1a. Mainstream Benefits. Applicants must:
(1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;
(2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and
(3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy for mainstream benefits. (limit 2,000 characters)

(1) ARCH CoC collaborates with Johnson City Community Health Clinic, Dispensary of Hope, DHS, Frontier Health (TennCare), ETSU Downtown Day Center, and Project Access to assist individuals and families with applications and enrollment in affordable health insurance plans through the Health Insurance Marketplace, PATH, CABHI, and TennCare. These agencies coordinate health insurance and care within our service area and act as referral partners within the local CARE Coordinated Entry system. (2) ARCH CoC keeps program staff up-to-date regarding mainstream resources by inviting mainstream providers to present program resources at bi-monthly CoC meetings. ARCH updates area resource guide every three months, which is available in HMIS CE module and is posted to ARCH website. (3) ARCH CoC
Director is responsible for overseeing the CoC’s strategy for mainstream benefits.

4A-2. Housing First: Applicants must report:
(1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and
(2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.

| Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition. | 13 |
| Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements. | 13 |

Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First. 100%

4A-3. Street Outreach. Applicants must:
(1) describe the CoC’s outreach;
(2) state whether the CoC’s Street Outreach covers 100 percent of the CoC’s geographic area;
(3) describe how often the CoC conducts street outreach; and
(4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)

(1) Outreach is performed on 2 levels, community and client, and covers 100% of the geographic area. Community outreach requires planning to create a network of contacts and resources. By building these community partnerships clients are given a comprehensive offering of services that they may lack prior to engagement. On the client level, outreach is the “front door” to the CE. Street client engagement involves networking to identify clients and meeting them where they are and on their terms; finding people, assessing their needs, and connecting them with services through the CE. (2) ARCH Street Outreach Team covers 100% of the CoC 8-county geographic area. (3) The Outreach Director conducts outreach on a daily basis while the Outreach Team conducts outreach every Friday to encampments, trails, and the streets to identify and engage homeless clients. (4) ARCH Outreach Team provides client incentives such as clothes, meals, snacks, and hygiene products to engage those least likely to request assistance. ARCH hosts seasonal monthly cookouts for the homeless to entice hard-to-reach populations to present to ARCH office. ETSU Day Center has developed a Pocket Resource Manual with map of location of homeless services, i.e. soup kitchens, mental health provider, showers/laundry, ARCH, Day Center etc., to assist transient homeless in finding services.
4A-4. Affirmative Outreach. Applicants must describe:
(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status or disability; and
(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above.
(limit 2,000 characters)

(1) CoC Written Standards state minimum standards shall comply with requirements for nondiscrimination equal opportunity and affirmative outreach identified in 24 CFR 576.407 (a-b)& 24 CFR 578.93. In addition, providers receiving ESG and CoC funding shall follow HUD’s “Equal Access to Housing in HUD Programs, Regardless of Sexual Orientation or Gender Identity” final rule, published September 21, 2016. CA shall train program staff and contractors to ensure that employees and contractors who interact directly with potential clients and current clients are aware of this rule and take prompt, corrective action to address any noncompliance. CoC members were trained regarding this rule on August 8, 2017 at the bi-monthly CoC meeting. (2) Translators are provided to CoC by ETSU and DHS. English and Spanish program applications are available. Interpreters for the hearing impaired are provided to CoC by DHS.

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.

<table>
<thead>
<tr>
<th>RRH beds available to serve all populations in the HIC</th>
<th>2017</th>
<th>2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>54</td>
<td>107</td>
<td>53</td>
</tr>
</tbody>
</table>

4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting $200,000 or more in funding for housing rehabilitation or new construction? No

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

**Instructions:**

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

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Required?</th>
<th>Document Description</th>
<th>Date Attached</th>
</tr>
</thead>
<tbody>
<tr>
<td>1C-5. PHA Administration Plan–Homeless Preference</td>
<td>No</td>
<td>2018 PHA Plans</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1C-8. Centralized or Coordinated Assessment Tool</td>
<td>Yes</td>
<td>Coordinated Asses...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)</td>
<td>Yes</td>
<td>ARCH 2018 Ranking...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1E-3. Public Posting CoC-Approved Consolidated Application</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)</td>
<td>Yes</td>
<td>2018 Rank, Review...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1E-4. CoC’s Reallocation Process</td>
<td>Yes</td>
<td>2018 Reallocation...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1E-5. Notifications Outside e-snaps–Projects Accepted</td>
<td>Yes</td>
<td>2018 Acceptance o...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced</td>
<td>Yes</td>
<td>2018 CoC Rejectio...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1E-5. Public Posting–Local Competition Deadline</td>
<td>Yes</td>
<td>2018 Public Posti...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)</td>
<td>Yes</td>
<td>Appalachian Regio...</td>
<td>09/14/2018</td>
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<tr>
<td>2A-2. HMIS–Policies and Procedures Manual</td>
<td>Yes</td>
<td>HMIS Policy and P...</td>
<td>09/14/2018</td>
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<tr>
<td>3A-6. HDX–2018 Competition Report</td>
<td>Yes</td>
<td>2018 HDX Competiti...</td>
<td>09/14/2018</td>
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<tr>
<td>3B-2. Order of Priority–Written Standards</td>
<td>No</td>
<td>TN-509 Written St...</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>3B-5. Racial Disparities Summary</td>
<td>No</td>
<td></td>
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<tr>
<td>4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)</td>
<td>No</td>
<td></td>
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<tr>
<td>Other</td>
<td>No 2018 Final Rankin... 09/14/2018</td>
<td></td>
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<tr>
<td>Other</td>
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Attachment Details

Document Description: 2018 PHA Plans

Attachment Details

Document Description: Coordinated Assessment Tools

Attachment Details

Document Description: ARCH 2018 Ranking Criteria Tool

Attachment Details

Document Description: 2018 Rank, Review, Selection, RFP
Attachment Details

Document Description: 2018 Reallocation Process

Attachment Details

Document Description: 2018 Acceptance of CoC Application and Ranking Letters

Attachment Details

Document Description: 2018 CoC Rejection Notice Letter

Attachment Details

Document Description: 2018 Public Posting Competition Deadline

Attachment Details

Document Description: Appalachian Regional Coalition on Homelessness By-Laws
Document Description: HMIS Policy and Procedures Manual

Attachment Details

Document Description: 2018 HDX Competition Report

Attachment Details

Document Description: TN-509 Written Standards

Attachment Details

Document Description: 2018 Final Ranking Results

Attachment Details
Attachment Details

Document Description:

Attachment Details

Document Description:
Submission Summary

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

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<tr>
<td>1A. Identification</td>
<td>09/11/2018</td>
</tr>
<tr>
<td>1B. Engagement</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1C. Coordination</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>1D. Discharge Planning</td>
<td>09/11/2018</td>
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<tr>
<td>1E. Project Review</td>
<td>09/14/2018</td>
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<tr>
<td>2A. HMIS Implementation</td>
<td>09/14/2018</td>
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<tr>
<td>2B. PIT Count</td>
<td>09/14/2018</td>
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<tr>
<td>2C. Sheltered Data - Methods</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>3A. System Performance</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>3B. Performance and Strategic Planning</td>
<td>09/14/2018</td>
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<tr>
<td>4A. Mainstream Benefits and Additional Policies</td>
<td>09/14/2018</td>
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<tr>
<td>4B. Attachments</td>
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<td>Submission Summary</td>
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</tbody>
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Applicant: Appalachian Regional Coalition on Homelessness

Project: TN-509 CoC Registration FY2018
From: Regina Edwards
To: Anne Cooper
Subject: RE: PHA Administrative Plan
Date: Monday, September 12, 2016 4:46:28 PM

I apologize Anne.
I've been waiting on a call back from our software vendor today to determine if they can extract that information from our software. We have that question in the software but currently do not have a report that can summarize that data. We haven't had a need to capture it until now.

Our vendor is looking into whether they can do a system query to get the data. My worry is that even if they can, some employees may not be capturing that information when meeting with new families and therefore the report I may get may not be accurate or helpful to you.

Here’s the section of our Administrative Plan regarding preferences:

5.0 SELECTING FAMILIES FROM THE WAITING LIST

5.1 WAITING LIST ADMISSIONS AND SPECIAL ADMISSIONS

Bristol Housing may admit an applicant for participation in the program either as a special admission or as a waiting list admission.

If HUD awards funding that is targeted for families with specific characteristics or families living in specific units, Bristol Housing will use the assistance for those families. Some funding awards may require eligible applicants to be given a preference for meeting the criteria of the award. In such instances, those individuals will be moved ahead of other applicants on the waiting list in order to meet the requirements of the awarded funding. If this occurs, Bristol Housing will maintain records demonstrating that these targeted housing choice vouchers were used appropriately. When one of these targeted vouchers turns over, the voucher shall be issued to applicants with the same specific characteristic as the targeted program describes.

5.2 PREFERENCES

Consistent with Bristol Housing’s Agency Plan, Bristol Housing will select families based on the following preferences. They are consistent with Bristol Housing’s Agency Plan and the Consolidated Plan that covers our jurisdiction.

A. Victims of domestic violence: Individuals who have resided at a state certified abuse shelter for a minimum of 14 days; who are participating in a counseling program of a certified abuse shelter or who meet the requirements specified under the Violence Against Women Act as outlined in Section 17.2 of the Administrative Plan.

B. Displaced person(s): Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws.

5.2.1 HOUSING FOR VICTIMS OF FEDERALLY DECLARED DISASTERS
In the case of a federally declared disaster, Bristol Housing reserves the right for its Executive Director to suspend its preference system for whatever duration the Executive Director feels is appropriate and to admit victims of the disaster to the program instead of those who would be normally admitted. Any other provisions of this policy can also be suspended during the emergency at the discretion of the Executive Director so long as the provision suspended does not violate a law. If regulatory waivers are necessary, they shall be promptly requested of the HUD Assistant Secretary for Public and Indian Housing.

5.3 SELECTION FROM THE WAITING LIST

Notwithstanding the above, if necessary to meet the statutory requirement that 75% of newly admitted families in any fiscal year be families who are extremely low-income (unless a different target is agreed to by HUD), Bristol Housing retains the right to skip higher income families on the waiting to reach extremely low-income families. This measure will only be taken if it appears the goal will not otherwise be met. To ensure this goal is met, Bristol Housing will monitor incomes of newly admitted families and the income of the families on the waiting list.

If there are not enough extremely low-income families on the waiting list, we will conduct outreach on a non-discriminatory basis to attract extremely low-income families to reach the statutory requirement.

Regina Edwards
Finance Manager
Bristol Housing
204 Bluff City Hwy.
Bristol, TN 37620-4215
Phone: 423-274-8150, ext. 111
FAX: 423-274-8155
rgedwards@bthra.com

********** Confidentiality Notice **********
This e-mail and any file(s) transmitted with it, is intended for the exclusive use by the person(s) mentioned above as recipient(s). This e-mail may contain confidential information and/or information protected by intellectual property rights or other rights. If you are not the intended recipient of this e-mail, you are hereby notified that any dissemination, distribution, copying, or action taken in relation to the contents of and attachments to this e-mail is strictly prohibited and may be unlawful. If you have received this e-mail in error, please notify the sender and delete the original and any copies of this e-mail and any printouts immediately from your system and destroy all copies of it.

From: Anne Cooper [mailto:anne@appalachianhomeless.org]
Sent: Monday, September 12, 2016 4:30 PM
To: Regina Edwards
Subject: PHA Administrative Plan
Importance: High

Regina:

As part of the Exhibit 1 CoC Application (huge application ARCH submits on behalf of the entire CoC...
for the homeless programs funding), we need to attach each Housing Authority’s Administrative Plan section that states the preference – in BHRA’s case, domestic violence. I need this by tomorrow. Can you please send? ALSO, I need to know how many clients were homeless upon entering PH, and the total number of PH units, so I can state the percentage. Thanks for your help!!!!!!!!!

Anne Cooper
Executive Director
321 W. Walnut St.
Johnson City, TN 37604
Office: 423.218.4090
Fax: 423.900.8102
10.0 RESIDENT SELECTION AND ASSIGNMENT PLAN

10.1 PREFERENCES

The Johnson City Housing Authority will select families based on the following preferences within each bedroom size category:

A. Displaced—individuals or families displaced by government action, or whose dwelling has been destroyed by disaster (i.e., fire). Homeless-Chronically homeless families and unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes who—

(a) have experienced a long term period without living in permanent housing,
(b) have experienced persistent instability as measured by frequent moves over such period, and
(c) can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.
(d) families transitioning from permanent supportive housing.

B. Elderly and people with disabilities and working families

Elderly family is defined as a family whose head or spouse or whose sole member is at least 62 years of age, or disabled, or handicapped and may include two or more elderly, disabled, or handicapped persons living together, or one or more such persons living with another person who is determined to be essential to his or her care and well being.

Working families- Any eligible head or spouse that is employed and working no less than 20 hours per week (regardless of the amount of income) and the income is countable under HUD’s definition of “annual income,” qualifies for the working preference. Also, applicants whose head, spouse, or sole member is age 62 or older or is receiving social security disability, supplemental security income disability benefits, or any other payments based on the individual’s inability to work. This preference is also extended to those who are in or have recently completed educational or training programs designed to prepare people for the job market.
applicant with written notice of the determination. The notice must contain a brief statement of the reason(s) for the decision, and state that the applicant may request an informal review of the decision within 10 business days of the denial. The Johnson City Housing Authority will describe how to obtain the informal review. The informal review process, adopted in accordance with Resolution FFY’00-09, is attached hereto and becomes a part hereof (see Appendix A).

5.0 SELECTING FAMILIES FROM THE WAITING LIST

5.1 WAITING LIST ADMISSIONS AND SPECIAL ADMISSIONS

The Housing Authority may admit an applicant for participation in the program either as a special admission or as a waiting list admission.

If HUD awards funding that is targeted for families with specific characteristics or families living in specific units, the Johnson City Housing Authority will use the assistance for those families.

5.2 PREFERENCES

The Johnson City Housing Authority will select families based on the following preferences.

A. Displaced—individuals or families displaced by government action, or whose dwelling has been destroyed by disaster (i.e., fire). Homeless—Chronically homeless families and unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes who—

(a) have experienced a long term period without living in permanent housing,
(b) have experienced persistent instability as measured by frequent moves over such period, and
(c) can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.
(d) Transitioning from Permanent Supportive Housing

B. Elderly and people with disabilities, working families and students

Elderly family is defined as a family whose head or spouse or whose sole member is at least 62 years of age, or disabled, or handicapped and may include two or more elderly, disabled, or handicapped persons living together, or one or more such persons living with another person who is determined to be essential to his or her care and well being.

Working families—Any eligible head or spouse that is employed and working no less than 20 hours per week (regardless of the amount of income) and the income is countable under HUD’s definition of “annual income,” qualifies for the
WHAT YOU NEED TO DO:

1. Complete the application and return it along with copies of DRIVER’S LICENSE/PICTURE ID FOR ALL ADULTS AND SOCIAL SECURITY CARDS FOR ALL HOUSEHOLD MEMBERS to the address given below. It is extremely important that you complete every question. Incomplete applications will be returned to you and delay your admission to the program. Applications without proper documents will also be returned to you.

2. EVERY adult member of the household MUST SIGN THE APPLICATION.

3. When your name comes to the top of the waiting list, you will be sent a letter regarding the completion of your application.

You may submit your application the following ways: FAXED APPLICATIONS CANNOT BE ACCEPTED

MAIL TO: or
Kingsport Housing & Redevelopment Authority
P. O. Box 44
Kingsport, TN. 37662

BRING TO:
Kingsport Housing & Redevelopment Authority
906 East Sevier Avenue
Kingsport, TN. 37660

TENANT SELECTION

Applicants will be placed and selected from the waiting list by date and time of receipt of a completed application. KHRA will select qualified families from the waiting list based on the cumulative total weight from the weighted preference criteria listed below.

1. Preference for involuntarily displaced families (ref. 4-II.G): Families who have been involuntarily displaced because of an act(s) of God/natural disaster, i.e. fire, flood, tornado etc., which occurred no more than six (6) months from the date of certification and have not secured permanent replacement housing. (20 points)

2. Preference for victims of domestic violence: The KHRA will offer a local preference to families that have been subjected to or victimized by an affiliated individual within 90 days of application and/or preference request. Applicants requesting protections of VAWA will be required to provide appropriate documentation. (20 points)

3. Preference for Elderly/Disabled/Veterans: (5 points)
   a. 62 years old or older; or
   b. Meeting the HUD definition of disabled as defined in Section 223 of the Social Security Act; or
   c. Veterans of any branch of the United States military or merchant marine currently serving or separated with DD214 release from activity duty under honorable conditions.

4. Preference for Substandard Housing/Homelessness: Currently residing in sub-standard housing such as housing that lacks functioning plumbing, heating or electrical systems, and/or which is structurally unsound to the extent that the housing envelope does not adequately prevent incursion by precipitation, or is in imminent danger of collapse. (5 points)

5. Preference for Homeownership (Housing Choice Vouchers Only): Current families in another KHRA housing program that completes the Affordable Housing Homeownership program and is in need of voucher assistance to complete the home purchase. (5 points)

Kingsport Housing & Redevelopment Authority is committed to principles of equal opportunity, equal access, and affirmative action. If you have and questions please contact the Main Office at: (423) 245-0135.

EQUAL HOUSING OPPORTUNITY
the approved list in line with all other applicants by date/time of completion to await another offer. Approved applicants may be offered a total of three offers as units become available and are allowed to turn down a maximum number of 2 offers. If an applicant turns down the 3rd and final offer, the applicant must then submit another pre-application.

Units are offered in order by date of vacancy to the next eligible applicant.

Applicants who have turned down an offer for a particular housing community should not be offered that community again unless there are no approved/eligible applicants within the waiting list for that bedroom size. This means that it is possible for an applicant to be offered multiple times in the same community.

When selecting a family for a unit that has been designated for elderly families, has been supplied with accessibility features, or has been designed as an incentive for Family Self Sufficiency (FSS) or Homeownership programs, the PHA will give a preference to families who meet these qualifications or have specific needs by date and time of eligibility.

5.1 PREFERENCES

Applicants will be placed and selected from the waiting list by date and time of receipt of a completed application. KHRA will select qualified families from the waiting list based on the cumulative total weight from the weighted preference criteria listed below.

1. **Preference for involuntarily displaced families (ref. 4-III.G):** Families who have been involuntarily displaced because of an act(s) of God/natural disaster, i.e. fire, flood, tornado etc., which occurred no more than six (6) months from the date of certification and have not secured permanent replacement housing. *(20 points)*

2. **Preference for victims of domestic violence:** The KHRA will offer a local preference to families that have been subjected to or victimized by an affiliated individual within 90 days of application and/or preference request. Applicants requesting protections of VAWA will be required to provide appropriate documentation. *(20 points)*

3. **Preference for Elderly/Disabled/Veterans:** *(5 points)*
   a. 62 years old or older; or
   b. Meeting the HUD definition of disabled as defined in Section 223 of the Social Security Act;
   c. Veterans of any branch of the United States military or merchant marine currently serving or separated with DD214 release from activity duty under honorable conditions.

4. **Preference for Substandard Housing/Homelessness:** Currently residing in sub-standard housing such as housing that lacks functioning plumbing, heating or electrical systems, and/or which is structurally unsound to the extent that the housing envelope does not adequately prevent incursion by precipitation, or is in imminent danger of collapse. *(5 points)*

5. **Preference for Homeownership (Housing Choice Vouchers Only):** Current families in another KHRA housing program that completes the Affordable Housing Homeownership program and is in need of voucher assistance to complete the home purchase. (Closing on the home needs to occur within 180 days of voucher approval. This may only be extended with approval of the Executive Director.) *(5 points)*
Entity ID: ____________________

In Intake Log: Yes / No

Walk In / Call In

"CARE" Initial Screening Form

Screener Name: __________________________________________ Date: ____________________________

Name: __________________________________________________

Date of Birth: ___________ SSN: ___________________ Gender: _____________________________

Citizenship Status: _______ Primary Language: _________ Race: _________ Ethnicity _____________

Street Address: __________________________________________

City: _______________ Apt #: _______ County: ______________________________

State: ____________ Zip Code: ________________

Have you been in the GPD and if so how long? __________________________

Phone # (_____) ________-__________ Alternate phone # (_____ ) ___________.

Email: __________________________________________________

Have you been continuously homeless for at least one year? Yes / No

Prior to program entry, total number of months continuously homeless: ________________________

During the past 3 years, total number of times you have been homeless: ____________________

Current Housing Status: ______________________________________________________________

Prior Residence Type: ____________________________ Length of Stay: ______________________

Health Insurance Yes / No How would you consider your health? Excellent/Very Good/Good/Fair/Poor

Do you have a documented disability? Yes / No If yes, what type? ________________________________

Is this documented disability expected to last for at least 12 months or until death? Yes / No

Have you applied for disability in the last 12 months with the Social Security Administration? Yes / No

(If No, fill out ARCH SOAR program Referral) Do you expect to apply for disability? Yes / No

HIV/AIDS: Yes / No HUD/VASH / Section 8 / GPD

Do you receive any non-cash benefits? Yes / No What are they? _______________________________

Do you have an eviction notice, a court ordered eviction notice or a disconnect notice? Yes / No

Branch of Military: __________________________ Date entered: ______________ Date exited: __________

Discharge Status: __________________________

Is everyone in the household able to walk up and down stairs? Yes / No

Is anyone in the household restricted from having contact with Minors? Yes / No
Have you been convicted of a crime against another person? Yes / No

INCOME:
Amount? ___________________________ Source? ___________________________
Amount? ___________________________ Source? ___________________________
Total Income: ________________________ Total Yearly Income: __________________
50% AMI: __________________________ 30% AMI: __________________________

FAMILY: (do not list head of household)
Family member #1 Name: ___________________________ Gender: Male / Female
SSN: ___________________________ Date of Birth: ___________________________ Race: ______
Relationship: ___________________________ Veteran? Yes / No
Family member #2 Name: ___________________________ Gender: Male / Female
SSN: ___________________________ Date of Birth: ___________________________ Race: ______
Relationship: ___________________________ Veteran? Yes / No
Family member #3 Name: ___________________________ Gender: Male / Female
SSN: ___________________________ Date of Birth: ___________________________ Race: ______
Relationship: ___________________________ Veteran? Yes / No
Family member #4 Name: ___________________________ Gender: Male / Female
SSN: ___________________________ Date of Birth: ___________________________ Race: ______
Relationship: ___________________________ Veteran? Yes / No
Family member #5 Name: ___________________________ Gender: Male / Female
SSN: ___________________________ Date of Birth: ___________________________ Race: ______
Relationship: ___________________________ Veteran? Yes / No
Family member #6 Name: ___________________________ Gender: Male / Female
SSN: ___________________________ Date of Birth: ___________________________ Race: ______
Relationship: ___________________________ Veteran? Yes / No
Family member #7 Name: ___________________________ Gender: Male / Female
SSN: ___________________________ Date of Birth: ___________________________ Race: ______
Relationship: ___________________________ Veteran? Yes / No

Do you (and household) feel safe in your current living situation? Yes / No
If you are fleeing Domestic Violence, refer to the National Domestic Violence Crisis Line 1-800-799-SAFE (7233)
Is anyone in the household pregnant? Yes / No If yes, estimated due date: ___________________________
If you have children, are they in school? Yes / No Name of School: ___________________________
School District: ___________________________
I certify I have read or the Intake Coordinator has read to me the information I provided above and it is true and complete to the best of my knowledge. Any discrepancies and the reason for this discrepancy are described in an attached piece of paper or in notes that I added to this document. I understand that the information provided in the Intake process and case management process will be verified to the fullest extent possible and that I may be prosecuted for providing false and fraudulent information. I certify that I will be homeless without this assistance.

Client Signature: ____________________________________________

Intake Coordinator Signature: ________________________________
Information Release

I, __________________________________________ hereby authorize Appalachian Regional Coalition on Homelessness (ARCH) to disclose in good faith any information to any CoC provider regarding assisting me in obtaining services.

I will hold Appalachian Regional Coalition on Homelessness (ARCH) and any other person speaking on my behalf free of liability for the exchange of this information.

Sign Name: __________________________________________

Print Name: __________________________________________

Date: __________________________________________
Administration

<table>
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<th>Interviewer's Name</th>
<th>Agency</th>
<th>☐ Team</th>
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<td></td>
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<td>☐ Staff</td>
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<tr>
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<td></td>
<td>☐ Volunteer</td>
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Survey Date

DM/MM/YYYY ___/____/____

Survey Time

___:___ AM/PM

Survey Location

Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only “Yes,” “No,” or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question or the assessor does not understand the question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

Basic Information

<table>
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<tr>
<th>First Name</th>
<th>Nickname</th>
<th>Last Name</th>
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In what language do you feel best able to express yourself?

Date of Birth

DM/MM/YYYY ___/____/____

Age

Social Security Number

Consent to participate

☐ Yes  ☐ No

SCORE:

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.
A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)
   - □ Shelters
   - □ Transitional Housing
   - □ Safe Haven
   - □ Outdoors
   - □ Other (specify):

   SCORE: [ ]

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

2. How long has it been since you lived in permanent stable housing?

   □ Refused

3. In the last three years, how many times have you been homeless?

   □ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE: [ ]

B. Risks

4. In the past six months, how many times have you...
   a) Received health care at an emergency department/room?
   - □ Refused
   b) Taken an ambulance to the hospital?
   - □ Refused
   c) Been hospitalized as an inpatient?
   - □ Refused
   d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?
   - □ Refused
   e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along?
   - □ Refused
   f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between?
   - □ Refused

IF THE TOTAL NUMBER OF INTERACTIONS Equals 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE: [ ]

5. Have you been attacked or beaten up since you’ve become homeless?
   - □ Y □ N □ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?
   - □ Y □ N □ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.
7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? □ Y □ N □ Refused

SCORE:

8. Does anybody force or trick you to do things that you do not want to do? □ Y □ N □ Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don’t know, share a needle, or anything like that? □ Y □ N □ Refused

SCORE:

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money? □ Y □ N □ Refused

SCORE:

11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? □ Y □ N □ Refused

SCORE:

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled? □ Y □ N □ Refused

SCORE:

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? □ Y □ N □ Refused

SCORE:

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted? □ Y □ N □ Refused

SCORE:

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because family or friends caused you to become evicted?
D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? □ Y □ N □ Refused

16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? □ Y □ N □ Refused

17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? □ Y □ N □ Refused

18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you’d need help? □ Y □ N □ Refused

19. When you are sick or not feeling well, do you avoid getting help? □ Y □ N □ Refused

20. For female respondents only: Are you currently pregnant? □ Y □ N □ N/A or Refused

If "Yes" to any of the above, then score 1 for Physical Health.

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? □ Y □ N □ Refused

22. Will drinking or drug use make it difficult for you to stay housed or afford your housing? □ Y □ N □ Refused

If "Yes" to any of the above, then score 1 for Substance Use.

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
   a) A mental health issue or concern? □ Y □ N □ Refused
   b) A past head injury? □ Y □ N □ Refused
   c) A learning disability, developmental disability, or other impairment? □ Y □ N □ Refused

24. Do you have any mental health or brain issues that would make it hard for you to live independently because you’d need help? □ Y □ N □ Refused

If "Yes" to any of the above, then score 1 for Mental Health.

If the respondent scored 1 for Physical Health and 1 for Substance Use and 1 for Mental Health, score 1 for Tri-Morbidity.
25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? □ Y □ N □ Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? □ Y □ N □ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

Score: __________

27. YES OR NO: Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced? □ Y □ N □ Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

Score: __________

Scoring Summary

<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>SUBTOTAL</th>
<th>RESULTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRE-SURVEY</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>A. HISTORY OF HOUSING &amp; HOMELESSNESS</td>
<td>2</td>
<td>Score: Recommendation:</td>
</tr>
<tr>
<td>B. RISKS</td>
<td>1</td>
<td>0-3: no housing intervention</td>
</tr>
<tr>
<td>C. SOCIALIZATION &amp; DAILY FUNCTIONS</td>
<td>4</td>
<td>4-7: an assessment for Rapid Re-Housing</td>
</tr>
<tr>
<td>D. WELLNESS</td>
<td>5</td>
<td>8+: an assessment for Permanent Supportive Housing/Housing First</td>
</tr>
<tr>
<td>GRAND TOTAL:</td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so? place: __________________________
time: _____ or Morning/Afternoon/Evening/Night

Is there a phone number and/or email where someone can safely get in touch with you or leave you a message? phone: (____) ______ - ______ email: ________________________

Oh, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so? □ Yes □ No □ Refused
2018 ARCH CoC
New Project CoC Project Requirements

Evaluation of new projects based on threshold requirements:

1. Past performance: ability to use and account for funds with timely submissions, meeting of program requirements and performance targets; organization ability.
2. Program must have Non-profit documentation
3. Program must demonstrate financial and management capacity to carry out project
4. Program must be cost-effective
5. Program must participate in HMIS

New project applications may be created through the reallocation process or as BONUS projects:

a) Permanent housing-permanent supportive housing-rapid rehousing (PH-RRH) projects that meet the requirements of Dedicated PLUS as defined in Section III.C.3.f of the NOFA or where 100 percent of the beds are dedicated to individuals and families experiencing chronic homelessness as defined in 24 CFR 578.3.

b) CoCs may create new permanent housing-rapid rehousing (PH-RRH) projects that will serve homeless individuals and families, including unaccompanied youth

c) Joint TH and PH-RRH component projects as defined in Section III.C.3.m of the 2018 NOFA to better serve homeless individuals and families, including individuals or families fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking who meet the following criteria:
   i) residing in a place not meant for human habitation
   ii) residing in an emergency shelter
   iii) person meeting the criteria of paragraph (4) of the definition of homeless, including persons fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking;
   iv) residing in a transitional housing project that is being eliminated;
   v) residing in transitional housing funded by a Joint TH and PH-RRH component project as defined in Section III.C.3.m. of the 2018 CoC NOFA.

New project applicants applying for funds through reallocation, the bonus or DV Bonus must provide a description of the proposed project including the population/subpopulation they will serve, the type of housing and services that will be provided, and the budget activities that are being requested.

New Projects for DV Bonus:
New projects that want to be considered for the DV Bonus may be:

a) Permanent Housing-Rapid rehousing projects dedicated to serving survivors of domestic violence, dating violence, sexual assault, or stalking that are defined as homeless at 24 CFR 578.3;
b) Joint TH and PH-RRH component projects as defined in Section III.C.3.m of the 2018 NOFA dedicated to serving survivors of domestic violence, dating violence, sexual assault, or stalking that are defined as homeless at 24 CFR 578.3.
c) Supportive service only-coordinated entry project to implement policies, procedures and practices that equip the CoC’s coordinated entry to better meet the needs of survivors of domestic violence, dating violence, sexual assault, or stalking.
PRIORITY ORDER:
1. Domestic Violence grant
2. Joint TH-RRH-PSH or RRH-PH
3. Dedicated Plus grant

NEW PROJECT RATING CRITERIA

<table>
<thead>
<tr>
<th>Rating Factor for New Project Types</th>
<th>Points Available</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanent Housing: Permanent Supportive Housing or Rapid Rehousing</td>
<td>1</td>
<td>The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants (e.g., two or more bedrooms for families).</td>
</tr>
<tr>
<td>Joint TH and PH-RRH</td>
<td>1</td>
<td>The type of supportive services that will be offered to program participants will ensure successful retention in or help to obtain permanent housing, including all supportive services regardless of funding source.</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply meets the needs of program participants (e.g., Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education)</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of permanent housing).</td>
</tr>
</tbody>
</table>

Joint TH and PH-RRH

New Joint TH and PH-RRH component project applications must receive at least 4 out of 6 points available for this project type. Projects that do not receive at least 4 points will be rejected.

<table>
<thead>
<tr>
<th>Points Available</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The type of housing proposed, including the number and configuration of units, will fit the needs of the program participants (e.g., two or more bedrooms for families.)</td>
</tr>
<tr>
<td>1</td>
<td>The proposed project will provide enough rapid rehousing assistance to ensure that at any given time a program participant may move from transitional housing</td>
</tr>
</tbody>
</table>
to permanent housing. This may be demonstrated by identifying a budget that has twice as many resources for the rapid re-housing portion of the project than the TH portion, by having twice as many PH-RRH units at a point in time as TH units, or by demonstrating that the budget and units are appropriate for the population being served by the project.

| 1 | The type of supportive services that will be offered to program participants will ensure successful retention or help to obtain permanent housing, including all supportive services regardless of funding source. |
| 1 | The proposed project has a specific plan for ensuring program participants will be individually assisted to obtain the benefits of mainstream health, social, and employment programs for which they are eligible to apply meets the needs of program participants (e.g. Medicare, Medicaid, SSI, Food Stamps, local Workforce office, early childhood education). |
| 1 | Program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (e.g., provides the participant with some type of transportation to access needed services, safety planning, case management, additional assistance to ensure retention of permanent housing). |
| 1 | The project adheres to a housing first model as defined in Section III.C.3.1 of this NOFA. |

**SSO-Coordinated Entry**

New SSO-Coordinated Entry project applications (also known as centralized or coordinated assessment) must receive at least 2 out of the 4 points available for this project type. Projects that do not receive at least 2 of the 4 points available will be rejected.  

| 1 | The centralized or coordinated assessment system is easily available/reachable for all persons within the CoC’s geographic area who are seeking information regarding homelessness assistance. The system must also be accessible for persons with disabilities within the CoC’s geographic area. |
| 1 | There is a strategy for advertising that is designed specifically to reach homeless persons with the highest barriers within the CoC’s geographic. |
| 1 | There is a standardized assessment process |
| 1 | Ensures program participants are directed to appropriate housing and services that fit their needs. |
**HMIS**

<table>
<thead>
<tr>
<th>New HMIS project applications must receive at least 3 out of the 4 points available for this project type. Projects that do not receive at least 3 of the 4 points available will be rejected.</th>
<th>1</th>
<th>How the HMIS funds will be expended in a way that is consistent with the CoC’s funding strategy for the HMIS and furthers the CoC’s HMIS implementation.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The HMIS collects all Universal Data Elements as set forth in the HMIS Data Standards.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>The ability of the HMIS to unduplicate client records.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>The HMIS produces all HUD required reports and provides data as needed for HUD reporting (e.g., APR, quarterly reports, data for CAPER/ESG reporting) and other reports required by other federal partners.</td>
<td></td>
</tr>
</tbody>
</table>
ARCH

2018 CONTINUUM OF CARE

DOMESTIC VIOLENCE EVALUATION RUBRIC

TYPES OF PROPOSALS:

1. Permanent Housing-Rapid re-housing projects dedicated to serving survivors of DV, dating violence, sexual assault, or stalking that are defined as homeless
2. Joint TH and PH-RRH projects
3. CE project dedicated to DV

EVALUATION CRITERIA:

I. Past performance: (BASELINE QUALIFYING DATA IF FUNDED BEFORE)
   A. Funds accountability
   B. Timely use of funds
   C. Timely submission of report
   D. Meets performance targets
   E. Organization capacity
   F. Number of targeted individuals met
   G. Matching funds
   H. Participation in CoC meetings/planning/Coordinated Entry

II. QUALITY OF PROGRAM (must receive 5/7 points)
   A. Program supplies data for need that must include how the DV project will address the unmet needs of survivors of DV, dating violence, sexual assault and stalking AND how they will expand units, beds, or if the CoC is applying for SSO-Coordinated Entry (CE) project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors

   B. Applicant describes the Rate of Housing placement of DV survivors

   C. Applicant describes how it will improve the safety of DV survivors

   D. Program applicant addresses how it will deal with multiple barriers faced by DV survivors

   E. Program applicant addresses best practices on safety and planning protocols (Coordinated Entry project) OR must use Housing First approach (RRH and Joint TH and PH-RRH)

   F. Applicant must address at least one factor related to achievement of housing outcomes
G. Applicant must include a specific method that describes how the project will be evaluated
ARCH
2018 CONTINUUM OF CARE
RENEWAL PROJECT EVALUATION FORM

Project Name:
Total Amount Requested: __________________________

*** The S&R committee will rely on statistics provided in the HMIS system to find the numbers that will be used in these formulas. Therefore, all providers should consult their data entry into HMIS (and other systems) to insure accuracy BEFORE the S&R committee meets and uses those numbers. Failure to bring an error in the data base, in writing, to the S&R committee's attention BEFORE the S&R committee meets will constitute acceptance of the data in the HMIS system and waiver of any grievance based on that data.

Scoring Factors and Points Available:
The following scoring system shall be used by the COC Steering & Ranking Committee to complete the attached Program Performance Evaluation Report and will be used to determine a grantee’s meeting of goals and outcomes as reflected.

<table>
<thead>
<tr>
<th>GOALS</th>
<th>Point</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Program serves Chronically Homeless and “hard to serve” homeless sub-populations</td>
<td>30</td>
</tr>
<tr>
<td>2. Program reduces length of homeless episodes and new or returned entries into homelessness</td>
<td>20</td>
</tr>
<tr>
<td>3. Program increases jobs, income and self-sufficiency</td>
<td>25</td>
</tr>
<tr>
<td>4. Program has low barriers to entry by use of Housing First</td>
<td>10</td>
</tr>
<tr>
<td>5. Program maintains a high percentage of unit utilization/census</td>
<td>10</td>
</tr>
<tr>
<td>6. Program has quality HMIS data entry</td>
<td>10</td>
</tr>
<tr>
<td>7. Program has timely disbursement of grant funds</td>
<td>10</td>
</tr>
<tr>
<td>8. Program managers attend CoC meeting and participate in PIT</td>
<td>15</td>
</tr>
<tr>
<td>9. Clients are connected to mainstream resources; timely submission of APR;</td>
<td>15</td>
</tr>
<tr>
<td>TOTAL = 145</td>
<td></td>
</tr>
</tbody>
</table>
## 2018 ARCH Renewal Scoring Rubric

<table>
<thead>
<tr>
<th>Weight</th>
<th>Criteria/Goal</th>
<th>Performance Measure</th>
<th>Source of Data</th>
<th>Points</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1) Program houses high priority sub-populations &amp; chronically homeless</td>
<td>A. Percentage of beds dedicated to chronically homeless clients</td>
<td>Number CH beds/total number beds Question 4b in project application</td>
<td>20 pts = 90% or more 15 pts = 60-89% 10 pts = 40-59% 5 pts = 20-39% 0 pts = &lt;79%</td>
<td></td>
</tr>
<tr>
<td>QUALITY OF PROGRAM PERFORMANCE</td>
<td></td>
<td>B. Participants from at-risk populations: vets, youth, domestic violence, chronic illness, HIV, alcohol &amp; drug abuse, families with children</td>
<td>APR Questions 18a and 6a</td>
<td>10 pts = 3 or &gt; categories 5 pts = 2 categories 0 pts = &lt; 1 category</td>
<td></td>
</tr>
<tr>
<td>2). Program reduces length of homeless episodes/increases successful retention in PH</td>
<td></td>
<td>A. Percentage of program participants in PH who stay more than 6 months</td>
<td>Question 22a APR</td>
<td>10 pts = 80-100% 5 pts. = 70-79% 0 pts. = less than 79%</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>B. Leavers who exit to streets or unknown</td>
<td>Questions 23 and 24 APR</td>
<td>10 pts = &lt; 70% 5 pts = 70-79% 0 pts = 80% or &gt;</td>
<td></td>
</tr>
<tr>
<td>3) Program increases jobs, income, self-sufficiency</td>
<td></td>
<td>A. Percentage of participants who have increased or sustained employment income; OR</td>
<td>APR Question 19a1 for stayers and 19a2 for exiters</td>
<td>10 pts = 20% 5 pts = 15-19% 0 pts = &lt; 15%</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>B. Percentage of participants who have increased or sustained OTHER cash income; OR</td>
<td>APR Questions 19a1 and 19a2</td>
<td>10 pts. = 55% + 5 pts. = 48-54%; 0 Pts. = &lt; 48%</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>C. Percentage of participants who have increased or sustained mainstream non-cash benefits; OR</td>
<td>APR Questions 20a and 20b 26b2</td>
<td>10 pts. = 55% + 5 pts. = 48-54%; 0 Pts. = &lt;48%</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>D. Percentage of program participants who exit to HCV or other permanent housing.</td>
<td>APR question 23</td>
<td>10 pts. = more than 1%; 0 pts. = 0%</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>E. Percentage of leavers who had increased income from all cash sources earned and entitlement in come</td>
<td>APR 25a1: Average number clients with income at entry/number clients with income at exit</td>
<td>5 pts = 30% or more; 3 pts = 25-29%; 0 pts = 24% and below; 5 pts = if NO leavers</td>
<td></td>
</tr>
<tr>
<td>Criteria/Goal</td>
<td>Performance measures</td>
<td>Source of data</td>
<td>Points</td>
<td>Score</td>
<td></td>
</tr>
<tr>
<td>--------------</td>
<td>----------------------</td>
<td>----------------</td>
<td>--------</td>
<td>-------</td>
<td></td>
</tr>
<tr>
<td>4). Program has low barriers to entry by use of Housing First</td>
<td>Number of program requirements for entry to receive services; CIRCLE all that apply: MUST submit to entry drug testing; submit to random drug testing; does not serve same-sex married couples; no recognition of HUD definition of family composition ; required religious views for entry</td>
<td>SITE VISIT: No criminal record other than sex or Meth offender list; submit to criminal background check; income adequate to meet client portion rent; must be employed; no current or past substance abuse</td>
<td>10 pts = no items 5 pts = 1 item 0 pts = &gt; 1 item</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5). Increase utilization of available beds</td>
<td>Percentage of unit utilization at or above 90%</td>
<td>APR Question 6c; average of 4 months PIT/total number of beds available</td>
<td>10 pts = 90% or &gt; 5 pts. = 80-89% 0 pts. = &lt; 80%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6). Quality of data entry in HMIS</td>
<td>A. Percentage of DATA ELEMENTS that reflect &quot;don’t know&quot;, &quot;refused&quot;, or &quot;missing&quot; as entries</td>
<td>HMIS provided by Stephen</td>
<td>5 pts. = &lt;10% 3pts. = 11-14% 0 pts. = 15% or &gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>B. Persons in PH who exit programs will have &quot;known destinations&quot; fields completed</td>
<td>HMIS provided by Stephen</td>
<td>5 pts. = &gt;15% 3pts. = 11-14% 0 pts. = &lt;11%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7) Timely disbursement of grant funds</td>
<td>A. Grantee submits quarterly draw reimbursement requests and are on target to spend funds by end of grant period</td>
<td>Drawn-downs requested at site visit</td>
<td>5 pts. = YES 0 pts. = NO</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>B. Grantee has had HUD de-obligate/recapture funds</td>
<td>Close-out letter requested at site visit</td>
<td>5 pts - 0-1% 4 pts = 1.1-2% 3 pts = 2.1-3% 2 pts = 3.1-4% 0 pts = over 4.1%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## 2018 ARCH Renewal Scoring Rubric

### 8) Attendance at CoC meetings

<table>
<thead>
<tr>
<th>Participation in the Point in Time</th>
<th>Agency has at least one individual participating</th>
<th>10 pts = 6/6 8 pts = 4-5/6 5 pts = 2-3/6 0 pts = one or fewer meetings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 9) Clients are connected to mainstream resources

<table>
<thead>
<tr>
<th>Participates in Coordinated entry data base</th>
<th>Narrative from agency</th>
<th>10 pts = &gt; 10% 5 pts = 9%-6% 0 pts = &lt;5%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>10 pts = 4 or &gt; resources 5 pts = 1-3 resources 0 pts = 0 resources</td>
</tr>
</tbody>
</table>

### Timely submission of APR

<table>
<thead>
<tr>
<th>Timely submission of APR</th>
<th>Grantee submits within 90 days</th>
<th>HUD report</th>
<th>5 pts = YES 0 pts = NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MAXIMUM Total Points: 145**

**TOTAL SCORE:**

**D**

**Date:**

**Signature:**
CONTINUUM OF CARE

The CoC is a process sponsored by The U.S. Department of Housing and Urban Development (HUD). The CoC was created to address the needs of homeless individuals and families in a comprehensive manner across the nation. According to HUD, there are four necessary parts of a continuum:

• Outreach, intake, & assessment in order to identify service & housing needs as well as provide a link to the appropriate level of both.

• Emergency shelter to provide an immediate & safe alternative to sleeping on the streets, especially for homeless families with children.

• Transitional housing with supportive services to allow for the development of skills that will be needed once permanently housed.

• Permanent supportive housing to provide individuals & families with an affordable plan to live with services if needed.

New applicants are encouraged to apply for either the New Project Bonus or Domestic Violence Bonus, or both.

Step 1: Register in E-SNAPS. Click on this link: https://esnaps.hud.gov/gateway/index.do and select “Create a Project”.

Step 2: Register in System for Award Management (SAM): https://sam.gov/portal/SAM/#1 to create a User Account.

Step 3: Register for Dun and Bradstreet Number (DUN) at https://fedgov.dnb.com/webform.

If you have any questions, please email Anne Cooper.
Documentation

CLICK THE LINKS BELOW TO VIEW DOCUMENTS.

2018 Reallocation Policy
- Posted 8/6/2018

2018 DV Scoring Rubric
- Posted 8/6/2018

2018 CoC Pre Screening for ALL NOFA Ranking Form
- Posted 7/17/2018

2018 CoC Renewal Project Ranking Priority and Rating Criteria
- Posted 7/17/2018 (Updated 8/6/2018)

2018 New Project Ranking Priority and Rating Criteria
- Posted 7/17/2018 (Updated 8/6/2018)

ARCH 2018 CoC RENEWAL PROJECT EVALUATION FORM
- Posted 7/17/2018

NOFA FY2018 CoC Program Competition
- Posted 7/16/2018

2018 CoC NOFA Workshop PDF
- Posted 7/16/2018

ARCH PIT Summary 2018
- Posted 5/22/2018

Archives

Click below to view documents from the previous years.

+ 2017 Documents (Click Here)
+ 2016 Documents (Click Here)
+ 2015 Documents (Click Here)
Homeless or Need Help? Call toll free:
1-844-989-CARE (2273)

Appalachian Regional Coalition on Homelessness
321 W. Walnut St
Johnson City, TN 37604
You are receiving this email blind copy to protect your privacy and the privacy of others.

Good Morning:

See attached ARCH 2018 CoC New (DV and Bonus) and Renewal application ranking priorities and scoring criteria. Also attached are Renewal Project Evaluation Forms and adherence to NOFA Ranking Form, to be completed when Evaluator performs site visit. Remember - all applications are due in E-Snaps by close of business (5:00 pm Eastern Daylight Time) on August 8, 2018. The NOFA and these forms are also posted on ARCH's website at www.appalachianhomeless.org.

New applicants are encouraged to apply for either the New Project Bonus or Domestic Violence Bonus, or both. Remember, step 1 is to register in E-Snaps. Click on this link: https://esnaps.hud.gov/grantaus/frontOffice.pdf and select "Create a Project". Step 2: Register in System for Award Management (SAM): https://sam.gov/portal/SAM/#/ to create a User Account. Step 3: Register for Dun and Bradstreet Number (DUN) at https://fedgov.dsb.com/webform.

If you have any questions, please email me.

Anne Cooper
Executive Director
321 W. Walnut St.
Johnson City, TN 37604
Office: 423.218.8090
Fax: 423.200.8102
Anne Cooper

Domestic Violence Scoring Criteria and Extension of CoC Application Deadline

To: Anne Cooper

Dear Anne Cooper,

The Appalachian Regional Coalition on Homelessness (ARCH) has extended the project application deadline for all project applications to close of business (5:00 EDT) Thursday, August 9, 2018. The draft Renewal Application Scoring Rubric, draft New Project Scoring Rubric, draft 2015 Reallocation Policy, and draft CoC Project Priorities are also attached for reference. All documents are posted on the ARCH website at www.appalachianhomeless.org. Again, the deadline extension applies to all project applications – DV Bonus, Bonus, and Renewals – and must be submitted in E-Snaps by Thursday, August 9th by 5:00 EDT.

Thank you for your continued support of the Appalachian Regional Coalition on Homelessness.

Anne Cooper
Executive Director
321 W. Walnut St.
Johnson City, TN 37604
Office: 423.218.4990
Fax: 423.969.8102
Good Afternoon:

There will be a CoC Planning Meeting on Tuesday, July 10th at 1:30 pm at Boones Creek Christian Church at 305 Christian Church Rd., Gray, TN, to review the attached 2018 CoC Program Notice of Funding Availability (NOFA), and application process, funding priorities, scoring criteria, due dates, etc. Please print, review and bring with you for optimal participation in the meeting. Note, in addition to the regular CoC funding opportunity, there is a new Domestic Violence Bonus funding opportunity this year up to 10% of ARCS CoC Annual Renewal Demand amount ($149,635) for up to three DV applicants. I will meet with all interested DV providers following the NOFA meeting at approximately 2:30 pm to explain in detail the eligible components for this opportunity and registration process. All interested parties are encouraged to attend this informational meeting.

Anne Cooper
Executive Director
321 W. Walnut St.
Johnson City, TN 37604
Office: 423.216.4090
Fax: 423.900.8120
Good afternoon:

There will be a CoC Planning Meeting on Tuesday, July 10th at 1:30 pm at Boones Creek Christian Church at 305 Christian Church Rd., Gray, TN, to review the attached 2018 CoC Program Notice of Funding Availability (NOFA), and application process, funding priorities, scoring criteria, due dates, etc. Please print, review and bring with you for optimal participation in the meeting.

Note, in addition to the regular CoC funding opportunity, there is a new Domestic Violence Bonus funding opportunity this year up to 10% of ARCS CoC Annual Renewal Demand amount ($149,635) for up to three DV applicants. I will meet with all interested DV providers following the NOFA meeting at approximately 2:30 pm to explain in detail the eligible components for this opportunity and registration process. All interested parties are encouraged to attend this informational meeting.
2018 Reallocation Policy & Priorities
Appalachian Regional Coalition on Homelessness (TN-509)

Background
The U.S. Department of Housing and Urban Development (HUD) requires that CoCs carefully evaluate and review all renewal projects and to develop a reallocation process for projects funded with CoC funds.

Reallocation is an important tool used by CoCs to make strategic improvements to their homelessness system. Through reallocation, the CoC can create new projects that are aligned with HUD’s goals, by eliminating projects that are underperforming or are more appropriately funded from other sources.

Reallocation is particularly important when new resources are not available.

Reallocation Policy
All renewal projects are reviewed by the Project Planning, Steering & Ranking Committee to determine how the project performed and determine if a project should be considered for reallocation. The CoC monitors all programs through review of quarterly reports and comprehensive assessment of agency capacity and ability to implement performance measure goals and objectives.

The recommendation for reallocation may be based on any one of the following HUD criteria and the overall score of the project evaluation:

• Outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon;
• Audit finding(s) for which a response is overdue or unsatisfactory;
• History of inadequate financial management accounting practices;
• Evidence of untimely expenditures on prior award;
• History of other major capacity issues that have significantly impacted the operation of the project and its performance;
• Timeliness in reimbursing sub recipients for eligible costs. HUD will consider a project applicant as meeting this standard if it has drawn down grant funds at least once per month;
• History of serving ineligible persons, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes; or
• Programs did not consistently meet the CoC performance measures.
• Failure to follow the Housing First model with preconditions/barriers to entry

Involuntary and Voluntary Reallocations
Involuntary Reallocation
Involuntary Reallocations are primarily based on three criteria:
• Projects that have the lowest score in the evaluation process.

ARCH BOD Adopted 08/08/2017
• Projects that have unspent funds in the most recent FY ending. Percentage of funds unspent and history of recaptured funds may be considered.
• Projects that fail to follow Housing First model.

The Project Planning, Steering & Rating Committee will evaluate and determine if programs will have a full or partial reallocation of funding. Well-performing programs that have unspent funding will be subject to review of possible partial reallocation of unspent funds. All funds freed through involuntary reallocations may be made available for one or more new projects. If no new project applications are submitted, funds will remain available for the original renewal projects. Project applicants that are subject to partial involuntary reallocation must develop a plan to continue with their renewal project, with the reduced level of funding. This includes HUD contract compliance for numbers of persons served and the types of services provided. It may be possible to seek a contract amendment from HUD for some changes; applicants should contact their HUD representative to discuss any options for amendment. If the reduction in funding will result in loss of assistance for persons currently served by the program, the applicant must develop a transition plan for these persons.

Voluntary reallocation
For projects not subject to involuntary reallocation, an applicant may choose to reallocate funds from an existing renewal project, in order to free additional funds for one or more new projects. If the same applicant wishes to apply for a new project using those same funds, the following parameters apply:
• The applicant may choose to reallocate all or a portion of their renewal funds to create the new project.
• The applicant will have “first rights” to 80% of funds that are freed as a result.

The applicant may also choose to compete for a portion or all of the funds available to the CoC through involuntary reallocation of other projects or bonus funds.
Through the reallocation process, the CoC ensures that projects submitted with the CoC Collaborative Application best align with the HUD CoC funding priorities and contribute to a competitive application that secures HUD CoC dollars to address and end homelessness in Appalachian Regional Coalition on Homelessness CoC. The CoC will make decisions based on alignment with HUD guidelines, performance measures, and unspent project funds.

2017 Priorities for Reallocation
Reallocation should be used to increase or maintain Appalachian Regional Coalition on Homelessness CoC performance by advancing quality projects that meet documented needs and/or strategically allocating resources from HUD CoC and other sources.

Four types of projects may be created via reallocation in FY2017. These are listed below, in order of priority to Appalachian Regional Coalition on Homelessness CoC, with rationale:

1. New dedicated HMIS project. Rationale: The CoC anticipates the purchase of new HMIS software ETO, by Social Solutions, with estimated price of $77,900 for user license, HMIS template, professional services and training and upwards of $80,000 for exportation of data from existing HMIS. Combined with ARCH’s vision for improved CoC-wide systems performance, a small HMIS project targeted to expanding functionality and training for Coordinated Entry would rapidly advance CoC goals for region-wide Coordinated Entry implementation.
2. New SSO project for centralized or coordinated assessment. Rationale: A Coordinated Entry grant would provide funding necessary to make the CE system accessible for all persons within the CoC’s geographic area; advertise the CE System to reach homeless persons with highest barriers; maintain a priority list to ensure those with the longest length of homelessness and severest need are served first; ensure program participants are directed to appropriate housing and services that fit their needs; and ensure Housing First principles are followed.

3. New permanent supportive housing project(s) for chronically homeless individuals and families as defined in 24 CFR 578.3. Rationale: As evidenced in the Point in Time Count, Appalachian Regional Coalition on Homelessness CoC has additional chronically homeless households in our communities. Housing and supporting households with the highest needs and most extensive histories of homelessness is critical to ending homelessness in the CoC region. As such, it would also help to improve CoC system performance by reducing average length of time homeless.

4. New rapid re-housing project(s) for homeless individuals, families and unaccompanied youth coming directly from the streets or emergency shelters, and include persons fleeing domestic violence or other persons that meet the criteria of paragraph (4) of the definition of homeless; Rationale: As evidenced in Coordinated Entry priority lists as well as the Point in Time Count, Appalachian Regional Coalition on Homelessness CoC experiences continued need for effective projects serving chronically homeless persons homeless and victims of domestic violence.

Project applicants are encouraged to consider geographic distribution and subpopulation considerations as well for new projects funded through reallocation.
Fairview Housing: This is to notify you that your projects submitted to ARCH were accepted into the 2018 CoC Competition. You can find your project proposals’ rankings by visiting the ARCH website: www.appalachianhomeless.org, click on Continuum of Care, and then Final 2018 CoC Ranking Results, Revised 8-27-18. Thank you for your participation and best regards,

Scott H. Beck, Ph.D.
Center for Community Outreach and Applied Research
Campus Box 70254
East Tennessee State University
Johnson City, TN  37614
(423) 439-6067
R30scott@etsu.edu
KHRA: This is to notify you that your projects submitted to ARCH were accepted into the 2018 CoC Competition. You can find your project proposals’ rankings by visiting the ARCH website: www.appalachianhomeless.org, click on Continuum of Care, and then Final 2018 CoC Ranking Results, Revised 8-27-18. Thank you for your participation and best regards,

Scott H. Beck, Ph.D.
Center for Community Outreach and Applied Research
Campus Box 70254
East Tennessee State University
Johnson City, TN 37614
(423) 439-6067
R30scott@etsu.edu
Abuse Alternatives: This is to notify you that your project, “Domestic Violence Bonus: Joint TH and PH-RRH”, was accepted into the 2018 CoC Competition. You can find your project proposal ranking by visiting the ARCH website: [www.appalachianhomeless.org](http://www.appalachianhomeless.org), click on Continuum of Care, and then Final 2018 CoC Ranking Results, Revised 8-27-18. Thank you for your participation and best regards,

Scott H. Beck, Ph.D.
Center for Community Outreach and Applied Research
Campus Box 70254
East Tennessee State University
Johnson City, TN  37614
(423) 439-6067
R30scott@etsu.edu
ARCH: This is to notify you that your seven proposals submitted to the CoC were accepted for the competition and ranked. You can find your project proposals’ rankings by visiting the ARCH website: www.appalachianhomeless.org, click on Continuum of Care, and then Final 2018 CoC Ranking Results, Revised 8-27-18. Thank you for your participation and best regards,

Scott H. Beck, Ph.D.
Center for Community Outreach and Applied Research
Campus Box 70254
East Tennessee State University
Johnson City, TN 37614
(423) 439-6067
R30scott@etsu.edu
A Safe Harbor Home: This is to notify you that your project, “Safe Harbor Bonus: RRH”, was accepted into the 2018 CoC Competition. You can find your project proposal ranking by visiting the ARCH website: www.appalachianhomeless.org, click on Continuum of Care, and then Final 2018 CoC Ranking Results, Revised 8-27-18. Thank you for your participation and best regards,

Scott H. Beck, Ph.D.
Center for Community Outreach and Applied Research
Campus Box 70254
East Tennessee State University
Johnson City, TN 37614
(423) 439-6067
R30scott@etsu.edu
Manna House: This is to notify you that your project, “Manna House: PSH Renewal”, was accepted into the 2018 CoC Competition. You can find your project proposal ranking by visiting the ARCH website: [www.appalachianhomeless.org](http://www.appalachianhomeless.org), click on Continuum of Care, and then Final 2018 CoC Ranking Results, Revised 8-27-18. Thank you for your participation and best regards,

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No applications were rejected in the 2018 CoC application process.
CONTINUUM OF CARE

The CoC is a process sponsored by The U.S. Department of Housing and Urban Development (HUD). The CoC was created to address the needs of homeless individuals and families in a comprehensive manner across the nation. According to HUD, there are four necessary parts of a continuum:

- Outreach, intake, & assessment in order to identify service & housing needs as well as provide a link to the appropriate level of both.
- Emergency shelter to provide an immediate & safe alternative to sleeping on the streets, especially for homeless families with children.
- Transitional housing with supportive services to allow for the development of skills that will be needed once permanently housed.
- Permanent supportive housing to provide individuals & families with an affordable plan to live with services if needed.

New applicants are encouraged to apply for either the New Project Bonus or Domestic Violence Bonus, or both.

Step 1: Register in E-SNAPs. Click on this link: https://esnaps.hud.gov/gp/home?pm=2305 to select “Create a Project.”

Step 2: Register in System for Award Management (SAM): https://sam.gov/portal/SAM/#1 to create a User Account.

Step 3: Register for Dun and Bradstreet Number (DUN) at https://fedgov.dnb.com/webform.

If you have any questions, please email Anne Cooper.
Documentation

CLICK THE LINKS BELOW TO VIEW DOCUMENTS.

2018 Reallocation Policy  
- Posted 8/6/2018

2018 DV Scoring Rubric  
- Posted 8/6/2018

2018 CoC Pre Screening for ALL NOFA Ranking Form  
- Posted 7/17/2018

2018 CoC Renewal Project Ranking Priority and Rating Criteria  
- Posted 7/17/2018 (Updated 8/6/2018)

2018 New Project Ranking Priority and Rating Criteria  
- Posted 7/17/2018 (Updated 8/6/2018)

ARCH 2018 CoC RENEWAL PROJECT EVALUATION FORM  
- Posted 7/17/2018

NOFA FY2018 CoC Program Competition  
- Posted 7/16/2018

2018 CoC NOFA Workshop PDF  
- Posted 7/16/2018

ARCH PIT Summary 2018  
- Posted 5/22/2018

Archives

Click below to view documents from the previous years.

+ 2017 Documents (click here)

+ 2016 Documents (Click Here)

+ 2015 Documents (Click Here)
You are receiving this email blind copy to protect your privacy and the privacy of others.

Good Morning:

See attached ARCH 2018 CoC New (DV and Bonus) and Renewal application ranking priorities and scoring criteria. Also attached are Renewal Project Evaluation Forms and adherence to NOFA Ranking Form, to be completed when Evaluator performs site visit. Remember—applications are due in E-SNAPS by close of business (5:00 pm Eastern Daylight Time) on August 8, 2018. The NOFA and these forms are also posted on ARCH's website at www.appalachianhomeless.org.

New applicants are encouraged to apply for either the New Project Bonus or Domestic Violence Bonus, or both. Remember, step 1 is to register in E-SNAPS. Click on this link: https://esnaps.usd.gov/grantsum/frontOffice.pdf and select “Create a Project”. Step 2: Register in System for Award Management (SAM): https://sam.gov/portal/SAM/#1 to create a User Account. Step 3: Register for Dun and Bradstreet Number (DUN) at https://fedge.dnb.com/webform.

If you have any questions, please email me.

Anne Cooper
Executive Director
321 W. Walnut St.
Johnson City, TN 37604
Office: 423.218.4900
Fax: 423.390.8102
Domestic Violence Scoring Criteria and Extension of CoC Application Deadline

To: Anne Cooper


This message was sent with High importance.

You are receiving this blind copy to protect your privacy and the privacy of others

Good Afternoon CoC Participants:

For the 2018 CoC Notice of Funding Availability (NOFA) and Exhibit 1 requirements, DV project applications must have its own scoring criteria. Please see attached draft Domestic Violence (DV) Scoring Rubric. When crafting your DV application, please address Project Quality criteria in order to score maximum points. Due to the lateness of provision of the DV Scoring Rubric, the Steering and Ranking Committee has extended the project application deadline for all project applications to close of business (5:00 EDT) Thursday, August 9, 2018. The draft Renewal Application Scoring Rubric, draft New Project Scoring Rubric, draft 2015 Relocation Policy, and draft CoC Project Priorities are also attached for reference. All documents are posted on ARCH website at www.appalachianhomelessness.org. Again, the deadline extension applies to all project applications - DV Bonus, Bonus, and Renewals - and must be submitted in E-Snap by Thursday, August 9th by 5:00 EDT. Thank you for your continued support of the Appalachian Regional Coalition on Homelessness.

Anne Cooper
Executive Director
321 W. Walnut St.
Johnson City, TN 37604
Office: 423.218.4890
Fax: 423.900.8102
ARTICLE I: NAME

The name of the Corporation is APPALACHIAN REGIONAL COALITION ON HOMELESSNESS, INC.

ARTICLE II: OFFICES

The Principal Office of the Corporation shall be located at 321 W. Walnut Street, Johnson City, Washington County, Tennessee 37604 or at such other places as shall be lawfully designated by the Board of Directors. The Corporation may have such other offices, either within or without the State of Tennessee, as the Board of Directors may designate or as the affairs of the Corporation may require from time to time.

ARTICLE III: OBJECTIVES AND PURPOSES

The purposes of the Corporation shall be as provided in its Charter. The aims of the Corporation are to be carried out through any and all lawful activities, including others not specifically stated in the Charter but incidental to the stated aims and purposes, both directly and through contributions to any other corporation, trust, fund or foundation whose purposes are religious, charitable, scientific, literary, educational, artistic, or cultural, provided that any such activity or contribution shall conform to any applicable restrictions or limitations set out in the Corporation's Charter or which are imposed on corporations described in §501(c)(3) of the
Internal Revenue Code or the regulations thereunder or on any corporation contributions which are deductible under §170(c)(2) of the Internal Revenue Code as presently enacted as they may hereafter be amended or supplemented, or, if they are replaced by new sections of similar import, and to the final regulations thereunder.

ARTICLE IV: MEMBERSHIP

The Corporation shall have no members. The Board may take any action which is permitted or required to be taken by members of a not for profit corporation under Tennessee law by the affirmative vote of a majority of the entire Board, without the necessity of any prior action by the Board which would otherwise have been required by law for such an action if there were members entitled to vote on such action.

ARTICLE V: BOARD OF DIRECTORS

5.1: Qualifications of Directors: Each Director shall be a natural person of legal age and every effort shall be made by the Board of Directors to include Directors from all counties within the geographical areas served by ARCH.

5.2: Number of Directors: There shall be at least ten (10) Directors and no more than thirty (30) Directors. All Directors shall have equal and full voting rights and responsibilities as members of the Board of Directors. Pursuant to Federal Regulation, one board member shall be homeless or a formerly homeless individual.

5.3: Election and Term of Office: The initial members of the Board of Directors shall serve until their successors have been selected and seated at the Corporation's first annual meeting in April.
The term of the office of each Director of the Corporation shall be for three (3) years or until his or her successor has been selected by the Board of Directors and seated. A Director may succeed himself or herself in office and there shall be no limit to the number of consecutive terms the Director may serve. Each Director shall be entitled to one (1) vote and the result shall be determined by the majority of votes cast.

5.4: Removal and Resignation: Any Director may be removed with or without cause at any time by a vote of the majority of the then serving Directors. A Director who has missed consecutive meetings of the Board of Directors or a total of three (3) meetings of the Board of Directors during any one (1) calendar year constitutes cause for removal from office. Directors may resign at any time on written notice to the President or Secretary. Vacancies occurring on the Board by death, removal, resignation, refusal to serve, or otherwise shall be filled for the unexpired term by a majority vote of a quorum of Board members present at a regular or special meeting held for that purpose after appropriate notice to the other Board members.

5.5: Powers and Duties: Subject to the provisions of the General Non-Profit Corporation Law of the State of Tennessee, the activities and affairs of the Corporation shall be managed and all corporate powers shall be exercised by or under the direction of the Board of Directors. The Board of Directors may delegate the management of the day to day operation of the business of the corporation through a management company, committee (however composed), or other person, provided that the activities and affairs of the corporation shall be managed and all corporate powers shall be exercised under the ultimate direction of the Board of Directors.
ARTICLE VI: COMMITTEES

6.1: Executive Committee: The Board of Directors may, by resolution adopted by a majority of the entire Board, designate an Executive Committee to consist of five (5) or more of the Directors, one of whom shall be the Chairperson of the Board. The Executive Committee, unless limited by the Resolutions of the Board, shall have and may exercise all the authority of the Board in the management of the business and affairs of the Corporation between meetings of the Board except removal of officers and Board members which shall require a vote by all Board members. The Board shall have the power at any time to change the membership of the Executive Committee, to fill vacancies in it, or to dissolve it. The Executive Committee may make rules for conduct of its business and may appoint such committees as it shall, from time to time, deem necessary. A majority of the members of the Executive Committee shall constitute a quorum.

6.2: Committees: The Board of Directors may, by resolution, adopted by a majority of the Directors then in office, designate one or more committees, each consisting of three (3) or more persons, to serve at the pleasure of the Board. The Board may delegate to such committee or committees all such authority of the Board that it deems desirable, except that no committee or committees shall have and exercise the authority of the Board to:

a. Approve any action that under the General Non-Profit Corporation Law of the State of Tennessee also requires the affirmative vote of the members. Any action that is improper under the General Non-Profit Corporation Laws of the State of Tennessee;

b. Fill vacancies on the Board of Directors or on any committee that is under the
authority of the Board.

c. Fix compensation of the Directors for serving on the Board or on any committee.

d. Amend or appeal the Articles of Incorporation or By-Laws, or draw up new By-Laws.

e. Amend or repeal any resolution of the Board of Directors that by its expressed terms is not so amendable or appealable.

f. Appoint any other committees of the Board of Directors or the members of the Board of Directors.

g. Approve a plan or merger; consolidation; voluntary dissolution; bankruptcy or reorganization; or for the sale, lease, or exchange of all or substantially all the property and assets of the corporation otherwise than in the usual and regular course of its business; or revoke any such plan.

h. Approve any transaction between the corporation and one or more of its Directors in which the Director or Directors have a material financial interest.

i. Bind the corporation in a contract or agreement exceeding the amount of $1,000.00.

ARTICLE VII: DIRECTOR MEETINGS

7.1: Meetings of Board and Committees: The Board shall hold an annual meeting each year. By resolution, the Board may establish a date or dates on which regular meetings of the Board or any committee shall be held between annual meetings. A committee of the Board may meet on the date so established, or if none, on the date set at its previous meetings or when
earlier called by its chairperson or by a majority of its members. Special meetings of the Board may be called at any time by the President, the Secretary, or any five (5) Directors.

7.2: **Place of meetings:** Meetings of the Board, either regular or special, shall be held at any place either within or without the State of Tennessee that the Board may, from time to time, appoint by resolution or, if no resolution is in force, at the principal executive office of the Corporation or at such other places as shall have been designated in the notice of the meeting.

7.3: **Annual Meeting:** The Board of Directors shall hold an annual meeting in April of each year for the purpose of electing officers of the Corporation and for the transaction of other business.

7.4: **Notice Requirements:** No notice of annual or other regular meetings is required. Notice of any special meetings, setting forth the place, day, hour, and nature of business of the meeting shall be given to each Director, by any usual means of communication not less than seven (7) days before the meeting.

7.5: **Waiver of Notice:** Attendance of a Director at a special meeting shall constitute a waiver of notice of the meeting except where the Director attends a meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened. Whenever the Board or any committee of the Board is authorized to take any action after notice to any person or persons, or the lapse of a prescribed period of time, the action may be taken without such requirements if at any time before or after the action is completed, the person or persons entitled to such notice or entitled to participate in the action to be taken submit a signed waiver of notice or of such requirement.

7.6: **Quorum:** At all meetings of the Board, 40% of the number of Directors then in office shall constitute a quorum for the transaction of business. The presence of a majority of the
membership of a committee of the Board shall be required for the transaction of business. Except with respect to indemnification proceedings, common or interested Directors may always be counted in determining the presence of a quorum at a meeting of the Board or of a committee which authorizes, approves or ratifies a transaction of the Corporation. When a quorum is once present to organize a meeting, it cannot be broken by the subsequent withdrawal of any of those present. A meeting may be adjourned despite the absence of a quorum.

7.7: Voting: The vote of a majority of the Directors present at a meeting at which a quorum is present shall be the act of the Board or of any committee.

7.8: Presumption of Assent: A Director who is present at a meeting of the Board, or any Committee thereof, shall be presumed to have concurred in any action taken at the meeting, unless he/she objects at the beginning of a meeting (or promptly upon his arrival) to the holding of the meeting, or unless his/her dissent to such action shall be entered in the Minutes of the meeting or unless he/she shall submit his/her written dissent to the person acting as the secretary of the meeting before the adjournment of the meeting or shall deliver or send such dissent by registered or certified mail to the Secretary of the Corporation promptly after the adjournment of the meeting. Such right to dissent shall not apply to a Director who voted in favor of such action. A Director who is absent from a meeting of the Board, or any Committee thereof, at which such action is taken shall be presumed to have concurred in the action unless he/she shall deliver or send by registered or certified mail his/her dissent to such action to the Secretary of the Corporation or shall cause such dissent to be filed with the Minutes of the proceedings of the Board or Committee within a reasonable time after learning of such action.

7.9: Action by Consent: Directors may take any action which they are required or permitted to take without a meeting on written consent, setting forth the action so taken, signed
by all of the Directors.

7.10: **Telephone Meetings**: Participation by members of the Board or any Committee designated by the Board in any meeting of the Board or Committee shall be permitted by means of conference telephone or similar communications equipment by means of which all persons participating in the meeting can hear each other. Participation in such a meeting pursuant to this Paragraph 7.10 shall constitute presence in person at such meeting. The Directors shall be promptly furnished a copy of the Minutes of the meeting held under this paragraph.

7.11: **Adjourned Meeting and Notice**: A majority of the Directors present, whether or not a quorum is present, may adjourn any meeting to another time and place. If the meeting is adjourned for more than twenty four (24) hours, notice of any adjournment to another time or place shall be given prior to the time of adjourned meeting to the Directors who are not present at the time of the adjournment. Such notice may be waived in the manner provided for in Section 7.5.

7.12: **Policies Incorporated into Bylaws**: All policies and procedures, properly adopted by the Board of Directors, regarding standards for the Continuum of Care, the Homeless Management Information System (including Administrative standards), the Emergency Solutions Grants, Conflict of Interest, and Codes of Conduct are incorporated into these bylaws as though set out herein.

**ARTICLE VIII: OFFICERS**

8.1: **Officers**: The corporation shall have a President, President Elect, Vice President, Secretary, and Treasurer, each of whom shall be elected by the Board of Directors. Any two or more offices may be held by the same person except that the President may not be the Secretary. The Board of Directors may appoint and empower the President or another officer to appoint
such other officers as the activities of the corporation may require, each of whom shall have such
authority and perform such duties as provided in these By-Laws or the Board of Directors may
from time to time determine.

8.2: **Election:** All officers shall be elected or appointed at the Annual meeting of the
Board or at any special meeting of the Board.

8.3: **Term of Office:** The officers of the Corporation shall be elected for terms of one (1)
year. Each officer shall hold office until the expiration of the term which he/she is elected and
thereafter until his/her successor has been elected or appointed and qualified except for the initial
officers which shall serve a term of two (2) years.

8.4: **Removal:** Any officer may be removed by the vote of a majority of the entire Board,
with or without cause, whenever in its judgment the best interests of the Corporation will be
served thereby.

8.5: **Resignation:** Any officer may resign at any time by giving notice to the Board of
Directors, the President, or the Secretary of the Corporation. Any resignation shall take effect on
the day of the receipt of such notice or at a later time specified in the resignation; and, unless
otherwise specified in the resignation, acceptance of the resignation shall not be necessary to
make it effective.

8.6: **Duties:** All officers as between themselves and the Corporation shall have the
authority and perform such duties in the management of the Corporation, in addition to those
described in these By-Laws, as usually appertain to such officers of Not For Profit Corporations,
except as may be otherwise prescribed by the Board.

8.7: **Compensation:** The salary and other compensation of the Officers and Directors shall
be fixed from time to time by resolution of the Board of Directors.

ARTICLE IX: EXECUTIVE DIRECTOR

The Corporation shall have an Executive Director who shall be appointed by the Board of Directors at any regular or specially called meeting. The Executive Director shall not serve on the Board of Directors but may be invited to attend all Director and committee meetings.

The Executive Director shall be the Chief Administrative Officer of the Corporation and shall perform all duties and exercise all powers as may be prescribed or required for the general and active operation of business of the Corporation within the limitations prescribed by the Board of Directors. The Executive Director shall have the authority to execute contracts on behalf of the Corporation, except where required by law to be otherwise executed, and except where the execution thereof shall be expressly reserved or otherwise delegated by the Board of Directors of the Corporation.

ARTICLE X: DUTIES AS TO THE FUNDS OF THE CORPORATION

10.1: Disbursements: Disbursements from the income or from the assets of the Corporation for uses and purposes consistent with the objectives and purposes of the Corporation as outlined in the Charter of Incorporation and these By-Laws shall be made on the order of the Board of Directors.

10.2: Contributions: Any contribution to the Corporation through any means whatsoever shall not be complete until accepted by the Corporation through action of the Board of Directors, and the Board shall have full authority to reject or refuse to accept any contribution for any reason deemed adequate or sufficient to the Board, including but not limited to the specification
of a use of, or a restriction on the use of, any contribution which conflicts with the purposes of the Corporation, its tax-exempt status, or its status as a public charity.

10.3: **Restricted Gifts:** Notwithstanding any provision in these By-Laws to the contrary, the Board of Directors shall at all times be governed in the expenditure of any fund or funds or other property by any terms of restriction or direction which may be contained in any instrument under which the said property may be received and accepted by the Corporation so long as said directions or restrictions are consistent with the donor's purpose in specifying them and are compatible with the Corporation's purposes, its tax-exempt status, and its status as a public charity. If at any time it shall appear to the Board that circumstances have so changed as to make unnecessary, undesirable, impractical or impossible a literal compliance with the expressed desire of a donor or testator, it may take such steps as it deems necessary to direct the application of any such funds to such other educational, charitable, literary or religious purposes of a public nature, or others of a similar nature recognized by the federal government as entitled to tax exemption, as in its judgment will to the extent possible carry out the purposes of such donor or testator.

10.4: **Management of Assets:** Any fund or funds or assets of any kind or nature whatsoever which may be acquired by the Corporation from any source whatsoever may be transferred by the Board of Directors for the purpose of management and investment to any bank or banks in the State of Tennessee, having trust powers and active in the acceptance and management of trusts.

10.5: **Agency Relationship:** Any transfer of any asset of this Corporation made to any of such banks shall vest legal title to any such asset in the said transferee bank, as agent of and custodian for the Corporation, nevertheless, for the sole purpose of management and investment
subject to the approval of the Board and any income thereon shall be income of this Corporation. The Board may enter into an agency agreement with each such bank, giving each of them such powers and duties pertaining to the assets so held by it as may be deemed proper and consistent with the purposes of the Corporation by the Board of Directors, and agreed to by said bank.

10.6: Authority: The Board may authorize any officer or agent of the Corporation by resolution to enter into any contract or execute and deliver any instrument in the name of the Corporation, and no officer, agent or employee shall have any power or authority to bind the Corporation by any contract or engagement, or to pledge its credit or to render it liable pecuniarily for any amount, without such authorization.

10.7: Depositories: All funds of the Corporation shall be deposited to its credit in such depository or depositories as the Board may designate, and for the purpose of such deposits, any person or persons to whom such power is delegated by resolution of the Board may endorse, assign, and deposit checks, drafts and other orders for the payment of funds payable to the order of the Corporation. All checks, drafts or other orders for the payment of money issued by the Corporation shall be signed by such person or persons as may from time to time be designated by the Board.

ARTICLE XI: STANDARD OF CARE

11.1: General: A Director or officer shall perform his or her duties, including the duties as a member of any committee of the Board on which the Director or officer may serve in accordance with the Standards of Conduct set out at T.C.A. §§48-58-301 and §48-58-403.
11.2: Loans. This corporation shall not make any loan of money or property to, or guarantee the obligation of, any Director or officer; provided, however, that this corporation may advance money to a Director or officer of this corporation for expenses reasonably anticipated to be incurred in performance of the duty of such officer or Director, so long as such individual would be entitled to reimbursement for such expenses absent that advance.

11.3: Self-Dealing or Conflict of Interest Transactions: The Board, in accordance with T.C.A. §48-58-302, shall not approve a self-dealing or conflict of interest transaction unless the determinations required by that section have been made by the Board, and the Board shall establish a Conflict of Interest policy that conforms to all state and federal standards as laid out by law and regulations of the various funding sources.

11.4: Indemnification: Any Officer or Director, his executor or administrator, shall be entitled to indemnification in accordance with §§48-58-501 through §48-58-509 of the Tennessee Non-Profit Corporation Act.

ARTICLE XII: EXECUTION OF CORPORATE INSTRUMENTS

The Board of Directors may, in its discretion, determine the method and designate the signatory officer or officers or other person or persons, to execute any corporate instrument or document, or to sign the corporate name without limitation, except when otherwise provided by law, and such execution or signature shall be binding upon the Corporation.

Unless otherwise specifically determined by the Board of Directors or otherwise required by law, formal contracts of the Corporation, promissory notes, deeds of trust, mortgages, and other evidences of indebtedness of the Corporation, and other corporate instruments or documents, shall be executed, signed, or endorsed by the President and by the Secretary or Treasurer.
checks and drafts drawn on the banks or other depositories on funds to the credit of the Corporation, or in special accounts of the corporation shall be signed by such person or persons as the Board of Directors shall authorize to do so.

ARTICLE XIII: MAINTENANCE AND INSPECTION OF CORPORATE RECORDS

13.1: Maintenance and Inspection of Articles and By-Laws: The Corporation shall keep at its principal executive office in this state, the original or copy of the Charter and By-Laws as amended to date, which shall be open to inspection by the Directors at all reasonable times during office hours.

13.2: Maintenance and Inspection of Other Corporate Records: The accounting books, records, and minutes of the proceedings of the Board of Directors and any committees of the Corporation shall be kept at such place or places designated by the Board of Directors, or, in the absence of such designation, at the principal executive office of the Corporation. The minutes shall be kept in written or typed form, and the accounting books and records shall be kept either in written or typed form or in any other form capable of being converted into written, typed, or printed form. Upon leaving office, each officer, employee, or agent of the Corporation shall turn over to his or her successor or the President, in good order, such corporate monies, books, records, minutes, lists, documents, contracts or other property of the Corporation as have been in the custody of such officer, employee, or agent during his or her term of office.

Every Director shall have the absolute right at any reasonable time to inspect all books, records, documents of every kind and the physical properties of the Corporation and each of its subsidiary corporations. Inspection may be made in person or by an agent or attorney, and shall include the right to copy and make extracts of documents.
ARTICLE XIV: FISCAL YEAR

The fiscal year of the Corporation shall run from July 1 through June 30 of each year.

ARTICLE XV: AMENDMENT

The By-Laws may be amended or repealed and new By-Laws may be adopted by the vote of a majority of the entire Board with appropriate notice given to all Board members of at least seven (7) days. The resulting By-Laws may contain any provision for the regulation and management of the Corporation not inconsistent with law and the Charter. Any amendment of the Charter inconsistent with these By-Laws or parts of By-Laws which merely summarize or restate the provisions of the Charter or the provisions of the Tennessee Non-Profit Corporation Act or other law applicable to the Corporation shall be operative with respect to the Corporation only so far as they are descriptive of existing law and of the Charter as amended.

I, Anne [Signature], Secretary of the APPALACHIAN REGIONAL COALITION ON HOMLESSNESS, INC., formed and existing under the laws of the State of Tennessee do hereby certify that the foregoing is a true and complete copy of the By-Laws of this Corporation as submitted to and adopted as the By-Laws of the Corporation by its Board of Directors on the 8th day of January, 2014.

IN WITNESS WHEREOF, I have hereunder subscribed my name this 8th day of January, 2014.

[Signature]
Secretary

REV. 1/14
Homeless Management Information System (HMIS)

Policies and Procedures

HMIS Administered by:
Appalachian Regional Coalition on Homelessness (ARCH)
321 W. Walnut St.
Johnson City, TN
1-877-754-8387
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Purpose

This document provides the policies, procedures, guidelines, and standards that govern the Homeless Management Information System. HMIS staff will provide each HMIS Participating Agency providers with a copy of this document. As a condition of participation, each HMIS Participating Agency is asked to adhere to all policies within the document as signed in the HMIS Memorandum of Agreement (MOA).

Exceptions

In order to mitigate risk from participation in the HMIS system, HMIS leadership has the right to grant exemptions to any HMIS policy only in the following instances:

• unique circumstances/programs not encountered before by HMIS staff,
• public policy decisions needing some considerations,
• or in need of quick time lines for implementation.

No other instances will be considered.

Acknowledgments

HMIS would like to thank its many statewide and national colleagues who have shared their policies with us as we were in development of this document. We would also like to thank the HMIS Participating Agencies and local community planners for their thoughts, ideas, and work to help draft and revise this document.
Glossary

This glossary includes a list of terms that will be used throughout this document and by the HMIS staff.

Agency Administrator (AA) – A person designated by a HMIS Participating Agency Executive Director/Chief Executive Officer who acts as a liaison and contact person to the HMIS staff.

End User (EU) – Any user who has an active license to HMIS. This can include Agency Administrators.

HUD - Acronym used to refer to the Department of Housing and Urban Development.

HPRP - Acronym used to refer to Homeless Prevention and Rapid Re-housing Program.

Participating Agency – An agency who has signed all HMIS agreements and who is actively entering data into the system.

Prospective Participating Agency – An agency who has inquired about joining HMIS.

ROI - Acronym used to refer to a Release of Information.

HMIS - Acronym used to refer to the Homeless Management Information System
Section 1: Historical Perspective

Introduction

The concept of HMIS was a brainchild of the United Stated Congress and the Department of Housing and Urban Development (HUD). In 1999, Congress mandated the Department of Housing and Urban Development (HUD) find a way to adequately track the scope of homelessness in the United States in the HUD Appropriations Act. The following year, the Department of Housing and Urban Development (HUD) mandated that each community implement or be in the process of implementation of a Homeless Management Information System (HMIS) by October 2004.

HMIS is a secure web-based centralized database where non-profit organizations across our community enter, manage, share and report information about the clients that they serve. It is similar to an electronic health record system in a hospital. The HMIS staff provides training and technical assistance to HMIS Participating Agencies and their users.

Senate and House Appropriations Committee reports have reiterated Congress’ directive to HUD to: 1) assist communities in implementing local Homeless Management Information Systems (HMIS), and 2) develop an Annual Homeless Assessment Report (AHAR) that is based on HMIS data from a representative sample of communities. Most recently, Congress renewed its support for the HMIS initiative and the AHAR in conjunction with the passage of the Transportation, Treasury, Housing and Urban Development, the Judiciary, the District of Columbia, and Independent Agencies Appropriations Act of 2006 (PL 109-115).

In addition to Congressional direction HUD, other federal agencies and the U.S. Inter-agency Council on Homelessness requires HMIS under various statutory authorities and Congressional direction to collect information about the nature and extent of homelessness. Individual programs authorized under the McKinney-Vento Act require the assessment of homeless needs, the provision of services to address those needs, and reporting on the outcomes of federal assistance in helping homeless people to become more independent. The major congressional imperatives in HUD’s McKinney-Vento Act programs are:

• Assessing the service needs of homeless persons;
• Ensuring that services are directed to meeting those needs;
• Assessing the outcomes of these services in enabling homeless persons to become more self-sufficient; and
• Reporting to Congress on the characteristics of homeless persons and effectiveness of federal efforts to address homelessness.
**HMIS Program Goals**

**Measure the Extent and Nature of Homelessness**
The first goal is to inform public policy makers about the extent and nature of the homeless population in our community. This is accomplished through analysis of homeless client and service provider data. HMIS gathers an unduplicated count of those accessing services, service trends, bed utilization rates, re-entry rates, and HMIS system usage. All data is provided in an aggregated (void of any identifying client level information) format and made available to public policy makers, service providers, advocates, and consumer representatives.

**Streamline the Intake and Referral Process for Human Service Agencies**
The second goal is to streamline the intake and referral process for human service agencies in the community. HMIS provides a standardized mechanism for collecting client information across all providers. Human service providers collect the same client information and then the client can share that information at each program with additional service providers for greater ease of service. As part of the system, a service provider can send an electronic referral to another agency. This streamlined process allows for the development of centralized intake centers where agencies can store assessments, refer to other programs, and follow clients longitudinally with a shared information system.

**Provision for In-depth Case Management by Sharing Client Information**
The third goal is to allow for in-depth case management through the sharing of client information in a centralized system. HMIS provides a standardized mechanism in which human service providers collect information and then share it among every participating human service agency to assist clients more efficiently and effectively.

**Inventory Homeless Housing**
Finally, the fourth goal is to inventory homeless housing options in the community. HMIS captures this inventory and allows for real-time collection and tracking of emergency shelter, transitional housing, and permanent supportive housing.
Section 2: HMIS Roles & Responsibilities

Role
ARCH is to act as the Homeless Management Information System (HMIS) Lead Agency for the community.

In addition to acting as the HMIS Lead Agency, the role of ARCH is to provide training and technical support to HMIS Participating Agencies. Lastly, ARCH HMIS staff coordinates and participates in numerous projects annually regarding data collection and performance measurement.

Responsibilities
ARCH is responsible for coordinating the following items on behalf of HMIS Participating Agencies.

- **All software related issues to the software vendor** - This includes all communication with the vendor including phone, email and conferences as well as submitting feature enhancement requests from HMIS Participating Agencies.

- **User training** – ARCH HMIS staff is responsible for all End User training. This is to ensure continuity and consistency with training as well as to ensure the proper workflow for HMIS Participating Agencies.

- **Technical support as it relates to the software or project** – ARCH HMIS staff is responsible for providing technical support to Agency Administrators and End Users. Technical support services attempt to help the user solve specific problems with a product and do not include in-depth training, customization, reporting, or other support services.

- **Data quality initiatives** – Together, Participating Agencies and ARCH HMIS staff work diligently on adhering to data quality standards in order to ensure that reports both at the provider level and the system level are complete, consistent, accurate, and timely.

- **System-wide reporting on performance measures for local, state and national initiatives** - ARCH HMIS staff train HMIS Participating Agencies on how to access and run reports on the data they contribute to the HMIS. Additionally, reports are provided to local community planners monthly and to statewide and national partners quarterly and annually. These data are in an aggregate format and details the trends on how clients are being served in the community.
Annual Projects
HMIS coordinates and/or participates in numerous projects annually that include data collection and reporting. Below is a list of current HMIS projects:

• **Annual Homeless Assessment Report (AHAR)** - The Annual Homeless Assessment Report (AHAR) is a report submitted to the Department of Housing and Urban Development (HUD). Data are then submitted to the U.S. Congress detailing the extent and nature of homelessness in the United States. It provides counts of the homeless population and describes their demographic characteristics and service use patterns. The AHAR is based primarily on data from Homeless Management Information Systems (HMIS) in the United States.

• **Emergency Food and Shelter Program (EFSP)** - These funds originate from the Federal Emergency Management Agency (FEMA), but are overseen by a National EFSP Board. The Emergency Food and Shelter Program (EFSP) is a national program that provides additional funds to existing shelters, food pantries, soup kitchens and financial assistance providers.

• **Housing Inventory Chart (HIC)** - The Housing Inventory Chart (HIC) is an annual report submitted to the Department of Urban Development (HUD) that lists all homeless emergency, transitional, safe haven, shelter plus care, and permanent supportive housing bed in our Continuum of Care (CoC).

• **Homelessness Pulse** - Generated on a quarterly basis, this report, similar to the AHAR, provides real-time information on service usage and trends to the Department of Housing and Urban Development.

• **Homeless Point in Time (PIT)** - Bi-annually our Continuum of Care (CoC) is responsible for counting and surveying the homeless population on a given day and submitting those data to local, state and federal government entities. These data are used to estimate the number of individuals in our community experiencing homelessness.
Section 3: HMIS Participating Agency Role & Responsibilities

"HMIS Participating Agency" is the term given by ARCH HMIS staff to reference participating health care and/or human service providers who actively enter data into the HMIS.

Participation Requirements

Policy 3.1: A qualified HMIS Participating Agency is required to sign and abide by the terms of the HMIS MOA, the HMIS User Privacy and Confidentiality Agreement, and the HMIS Policies and Procedures.

Procedure: Any organization that provides a health and human service may qualify to participate in HMIS. To participate in HMIS, Participating Agencies must sign and agree to abide by the terms of the HMIS MOA and the HMIS User Privacy and Confidentiality Agreement. They must also abide by the policies and procedures outlined in this document as well as the End User Agreement.

All Participating Agencies which receive funding from the United States Housing and Urban Development Department (HUD) are mandated to participate in HMIS by contract. For other agencies, participation is voluntary and strongly encouraged by HUD and the local CoC.

HMIS Participating Agency Agreement

Policy 3.2: The HMIS Memorandum of Agreement must be signed by the Executive Director of each HMIS Participating Agency.

Document: The HMIS Memorandum of Agreement is a legal contract between the HMIS Participating Agency and ARCH regarding specific HMIS guidelines and use. The agreement outlines specific details about the HMIS Participating Agency providers’ HMIS involvement including, but not limited to, the areas of confidentiality, data entry, security, data quality and reporting.

Procedure for Execution:

1. The Agency’s Executive Director (or authorized officer) will sign two copies of the HMIS Memorandum of Agreement and mail them to ARCH.
2. Upon receipt of the signed agreement, it will be signed by ARCH Executive Director.
3. One copy of the HMIS Memorandum of Agreement will be scanned and filed both hard copy and electronically with ARCH. The original copy will be mailed back to the HMIS Participating Agency.
HIPAA Agreement

**Policy 3.3:** The HMIS User Privacy and Confidentiality Agreement must be signed by the Executive Director (or authorized representative) of each HMIS Participating Agency.

**Procedure:** The HMIS User Privacy and Confidentiality Agreement is a HMIS document required by all HMIS Participating Agency providers who partner with HMIS. This document details the basic business practices of the HIPAA rules to be followed by each HMIS Participating Agency. The document further explains that each HMIS Participating Agency will be working with other HMIS Participating Agency providers who are HIPAA covered entities. All HMIS End Users will adhere to the basic business practices under HIPAA as it relates to client confidentiality, privacy, and security.

1. The Agency’s Executive Director (or authorized officer) will sign two copies of the HMIS User Privacy and Confidentiality Agreement and mail them to ARCH.

2. Upon receipt of the signed agreement, it will be signed by ARCH Executive Director.

3. One copy of the HMIS User Privacy and Confidentiality Agreement will be scanned and filed both hard copy and electronically with ARCH. The original copy will be mailed back to the HMIS Participating Agency.

Agency Staff Roles and Requirements

**Policy 3.4:** For a Member Agency with more than 4 employees and licensed end users, the Participating Agency will assign both an Agency Administrator and a back-up Agency Administrator to coordinate HMIS activities for their organization.

**Procedure:** The Executive Director (or authorized officer) of the Agency will complete the Agency Administrator Designation Form to assign the position to a specific staff person. This role is vital to the success of HMIS at the HMIS Participating Agency locations. This practice will ensure that the data is entered in a timely manner, the quality of the data is continuously monitored, and communication and support between HMIS and the HMIS Participating Agency is streamlined.

An Agency Administrator is the staff member at a HMIS Participating Agency provider who acts as the centralized contact for ARCH HMIS staff.
Agency Administrator Role and Responsibility. The Agency Administrator role is to act as the operating manager and liaison for the HMIS system at the HMIS Participating Agency. This position is required for all Participating Agencies with 4 or more active licenses. They are responsible for the following items:

- Adhere to and enforce the HMIS Policies and Procedures.
- Attend at least one Agency Administrator Training.
- Maintain current user license in the system by completing the training assignments within 5 days of training and login to the system at least once every 30 days.
- Communicate and authorize personnel and security changes for HMIS End Users to ARCH HMIS Staff within 24 hours of a change.
- Act as the first tier of support for HMIS End Users.
- Ensure client privacy, security, and confidentiality for clients.
- Enforce HMIS End User Agreements.
- Ensure the HMIS Privacy Notice is posted in a visible area of the Agency and communicated in a language understandable by clients.
- Enforce data collection, entry, and quality standards.
- Ensure a basic competency with running HMIS system reports and have an understanding of system-wide data quality reports.
- Ensure Agency and all users are using the correct HMIS related forms and following the most current HMIS procedures and work flow.
- Attend all HMIS required meetings and conference calls.
- Assist with HMIS projects as needed (AHAR, PIT, EHIC, and Pulse).
- Schedule/Authorize HMIS End User Training
- Inform ARCH HMIS Staff of all program changes with at least 5 business days prior to the change.

Policy 3.4.1: For Participating Agency with less than 4 employees and licensed end users, an Agency Administrator is not required, but at least one HMIS Point of Contact is required to communicate with ARCH HMIS staff.

Point of Contact Role and Responsibility. The Point of Contact role is very similar to the Agency Administrator role, but without the technical support aspect. ARCH HMIS staff will fulfill the role of help desk support and triage. A Participating Agency should designate a primary and a back-up Point of Contact. The HMIS Point of Contact and is responsible for the following items:

- Adhere to and enforce the HMIS Policies and Procedures.
• Enforce HMIS End User Agreements.

• Ensure client privacy, security, and confidentiality.

• Communicate and authorize personnel/security changes for HMIS End Users to ARCH HMIS Staff within 24 hours of a change.

• Authorize HMIS End Users by completing the HMIS End User Request Form prior to trainings.

• Ensure Agency and all users are using the correct HMIS related forms and following the most current HMIS work flow.

• Inform ARCH HMIS Staff of all programmatic changes with at least 5 business days prior to the change.

• Ensure the HMIS Privacy Notice is posted in a visible area of the Agency and communicated in a language understandable by clients.

• Attend all HMIS required meetings and conference calls.

• Assist with HMIS reports (AHAR, PIT, HIC, and Pulse).

Policy 3.5: A HMIS Participating Agency will ensure that at least one person will complete training in order to receive a license to access live client data in HMIS.

Procedure: Once the Agency Administrator/Point of Contact position has been assigned, she or he will be able to work with ARCH HMIS Staff to assign End Users and authorize additional licenses for the HMIS Participating Agency. The End User will complete training and then be responsible for the timeliness of the data being entered and the quality of the data they enter.

An End User is a term used to refer to all HMIS users at a HMIS Participating Agency.

HMIS End Users Roles and Responsibility. Every HMIS End User must attend at least one training and sign a HMIS End User Agreement. This should be completed within 5 business days of training.

Every HMIS End User is responsible for the following items:

• Adhering to all of the policy and procedures outlined in this document

• Attending all trainings required by ARCH HMIS staff and the HMIS Participating Agency Administrator.

• Entering quality data in a timely and accurate manner.

• Adhere to the data requirements set by ARCH HMIS staff and the HMIS Participating Agency.
Initial HMIS Staff Site Visit

Policy 3.6: Prior to signing the HMIS agreements, a prospective HMIS Participating Agency will first schedule and complete an on-site Initial HMIS Site Visit at the prospective Participating Agency.

Procedure: Prior to signing the Agreements for participation, a prospective HMIS Participating Agency provider will first schedule and complete an on-site Initial HMIS site visit at the prospective Participating Agency. This site visit is between ARCH HMIS staff, the prospective HMIS Participating Agency Executive Director and other HMIS Participating Agency critical staff at the prospective HMIS Participating Agency location. Other staff may include data entry staff, supervisors, managers, intake workers, or case managers. The prospective HMIS Participating Agency should include any staff they feel is necessary to HMIS data entry, data quality or the reporting process.

At this site visit, HMIS staff will document the goals of the prospective HMIS Participating Agency in regards to HMIS (what do they want to achieve by using the system), go over the required data elements, review the policy and procedures, define entry requirements and set expectations. The site visit also allows ARCH HMIS staff to properly assess the prospective HMIS Participating Agency providers work flow and user needs, specific implementation issues, and any constraints or risks that will need to be mitigated by the prospective HMIS Participating Agency prior to going live. A site demo using a training version of the HMIS system may also be used (at ARCH HMIS staff discretion) during the visit to visually explain HMIS and its capabilities.

Minimal Technical Requirements

Policy 3.7: All HMIS End User workstations must meet minimum technical requirements in order for HMIS to be functional and to meet the required security specifications.

Procedure: The following details are the minimal set of technical requirements for hardware and Internet connectivity to the HMIS system. HMIS works with all operating systems.

Hardware:
- Memory: 4 Gig recommended, (2 Gig minimum), If XP – 2 Gig recommended, (1 Gig minimum)
- Monitor: Screen Display - 1024 by 768 (XGA)
- Processor: A Dual-Core processor is recommended.

Internet Connectivity:
- Broadband Internet Connectivity recommended (High Speed Internet).
Authorized Browsers:
• Firefox 3.5 or greater
• Internet Explorer 8.0 or greater
• Safari 4.0 or greater
• Google Chrome 5.0 or greater

Workstation Maintenance:
• Workstations should have their caches refreshed on a regular basis to allow for proper speed and functionality.
• Workstations should continue to be updated to the most current version of Java, as suggested by their software.
• Workstations may need their virtual memory increased.

HMIS Data Use
Policy 3.8: HMIS Participating Agency providers will not violate the terms of use of data within HMIS system.

Procedure: HMIS Participating Agency providers will not breech system confidentiality by misusing HMIS data. HMIS data is not to be used for any purpose outside the use of case management, program evaluation, education, statistical and research purposes.

Policy 3.8.1: HMIS Participating Agency providers shall not use any data within HMIS to solicit clients, organizations, or vendors for any reason.

Procedure: At no time shall confidentiality of clients, organizations and vendors be violated by disclosing client information to non-members. Data in HMIS will not be used to solicit for volunteers, employees, or clients of any type. This information must not be sold, donated, given, or removed from HMIS for any purpose that would violate client, organization, or vendor confidentiality or put participants at harm or risk. Those found in violation of this rule will have their access to HMIS immediately terminated and the violation disclosed to all local government and funding entities.

Policy 3.8.2: HMIS Participating Agency providers shall not sell any HMIS client, organization, or vendor data for any reason.

Procedure: At no time shall confidentiality of clients, organizations, and vendors be violated by selling any information. HMIS Participating Agency providers shall not profit from disclosure of client, organization, or vendor information. Disclosure of information puts everyone at legal risk. Violation or breaches in HIPAA and 42 CFR regulations can result in fines and jail time. Those found in violation of this rule will have their access to HMIS immediately terminated and the violation disclosed to all local government and funding entities.
HMIS Corrective Action

**Policy 3.9:** If an HMIS Participating Agency or any of its End Users have violated any HMIS policy, ARCH HMIS Staff will implement an action plan upon discovery of the violation.

**Procedure:** Violations in HMIS policy may occur. HMIS Participating Agencies will work to ensure violations in policy are prohibited. If a violation is discovered, it is the role of ARCH HMIS staff to swiftly respond in order to prevent further violations from occurring or the current violation from harming clients or other HMIS Participating Agencies. ARCH HMIS staff will determine a course of action depending on the type and the severity of the policy violation.

**Critical Risk (For example: Security Breach, Imminent risk to clients, Unresolved Data Quality Errors)**
- HMIS System Administrator will suspend all HMIS Participating Agency Active End User Licenses. Affected End Users will be suspended until retraining.
- HMIS System Administrator will contact the HMIS Participating Agency in question to discuss the violation and course of action.
- HMIS Participating Agency will be suspended until violation resolved and placed on probation for at least 90 days.
- ARCH will contact the HMIS Participating Agency Program Manager to discuss violation and action plan.

**Medium Risks (For example: Grievance has been filed against HMIS Participating Agency or general complaints that threaten or endanger clients.)**
- HMIS System Administrator will contact the HMIS Participating Agency in question to discuss the violation and course of action.
- ARCH will contact the HMIS Participating Agency Program Manager to discuss violation and action plan.
- HMIS Participating Agency will be placed on Probation for at least 90 days and possible suspension until violation resolved.
- If appropriate, HMIS System Administrator will suspend all HMIS Participating Agency Active End User Licenses.

**Low Risk (For example: Unresponsive HMIS Participating Agency to HMIS Requests, Ceased Data Entry, Incorrect Bed List, End User Inactivity, and Timeliness Issues.)**
- HMIS System Administrator will contact the HMIS Participating Agency in question to discuss the violation and course of action.
- If appropriate, HMIS Participating Agency will be placed on probation for at least 90 days or until violation resolved.
- If appropriate, HMIS System Administrator will suspend all or some of the HMIS Participating Agency End User Licenses in question.
Potential Courses of Action

Probation. The ARCH HMIS Staff will notify the Agency’s Executive Director and HMIS System Administrator in writing to set up a one-on-one meeting to discuss the violation in question. During the meeting, an action plan will be developed and documented with relevant time frames outlined set to correct actions. If a training issue is identified, ARCH HMIS Staff will coordinate further follow up with the End Users in question. The Participating Agency will be on placed on probation, for a minimum of 90 days, where monitoring and auditing may be required and performed regularly during this period. Notification of probation will be communicated to all local contract managers.

Suspension. If a violation is of critical risk or the corrective measure(s) are not achieved in the probationary period, or more HMIS violations occur during the probationary period, the HMIS System Administrator will suspend access to HMIS until the issues are resolved. The HMIS Participating Agency will receive a written notice to the Participating Agency’s Executive Director of the suspension, reasons, and effective date. During suspension, a mandatory meeting will be held between the Participating Agency Executive Director, the CoC Board, and the HMIS Staff, if appropriate, to discuss suspension and requirements for resolution. All meeting deliverables will be documented in writing and must be achieved within the set probationary period.

Termination. If the Participating Agency violates any policies deemed of critical risk and fails to achieve resolution within the probation period, ARCH HMIS Staff will permanently terminate the Participating Agency from HMIS. The HMIS Participating Agency will receive a written notice to the Participating Agency Executive Director outlining the termination, reasons, and effective date. Notification of the termination will be sent to all local contract managers. In the case of incurred data quality costs and/or transfer costs, the Participating Agency will assume responsibility for payment.
Section 4: User Administration

HMIS End User Prerequisites

Policy 4.1: All End Users are required to have minimum set of basic computer competency skills to adequately perform their data entry roles in HMIS.

Procedure: Each HMIS Participating Agency Administrator should meet the skill requirements set forth in the Agency Administrator Minimum Qualifications White Paper. All other End Users should be prepared with basic computer competency/skills to adequately be able to use and navigate HMIS. Users will be evaluated for competency at the beginning of training. Users who do not have a minimum competency will be asked to leave training and seek a basic competency class. Basic computer competency classes can be found at a local library, community center, college, or business learning center. Once the user has completed the basic competency class, they can register and attend HMIS training. Upon return, they will be required to produce proof of attendance at the basic computing class.

Policy 4.2: All End Users should have had a background check prior to being assigned access to HMIS by a HMIS Participating Agency.

Procedure: HMIS Participating Agency providers are encouraged to have background checks on all staff and volunteers prior to assigning them access to HMIS. HMIS Participating Agency shall review the received criminal history report before the end user signs-up for HMIS training. Background checks that come back with a criminal history should be carefully considered prior to giving them access to client information. See policy 4.3.

HMIS End User Agreement

Policy 4.3: No prospective end user will be given a license for HMIS if she or he has entered a plea of nolo contendere (no contest) or been found guilty of any fraud (including identity theft) or stalking related felony crimes punishable by imprisonment of one year or more in any state.

Procedure: A HMIS Participating Agency should not risk the privacy and confidentiality of client information by allowing any individual convicted of a fraud or stalking related crime (fraud, identity theft, stalking) in any state. In the broadest sense, a fraud is an intentional deception made for personal gain or to damage another individual. An End User needs to be mindful of potential identity theft and improper usage and disclosure of client information. This policy will be taken under consideration and possibly waived if the prospective user has passed a State of Tennessee Level II Background Check.
An End User will be denied HMIS access if they meet any of the following, whether a judgment of guilt was withheld or not:

- has entered a plea of nolo contendere (no contest) to a fraud related felony crime (fraud, identity theft, stalking) punishable by imprisonment of one year or more.
- has entered a plea of guilty to a fraud related felony crime (fraud, identity theft, stalking) punishable by imprisonment of one year or more for crimes concerning.
- has been convicted or found guilty of a fraud related felony crime (fraud, identity theft, stalking) punishable by imprisonment of one year or more for crimes.

Policy 4.4: Any prospective end user who was a previous client of the same program he or she now intends to work or volunteer must not have resided at the facility or been a program participant in the last 6 months prior to gaining access to HMIS.

Procedure: The end user for most residential/homeless service programs must not have been a previous client of the same program he/she now intends in which work or volunteer for last 6 months prior to gaining access to HMIS. An end user should never have access to detailed information on program/service participants that may have received services at the same time as the end user. Any HMIS Participating Agency who violates this rule is putting client information at risk of a privacy and confidentiality breach. Upon discovery of the practice, ARCH HMIS staff will immediately inactivate the end user in question and notify the agency administrator and end user of the inactivation in writing.

Policy 4.5: All End Users must be provided with a software license by and provided training through ARCH HMIS staff prior to entering or accessing client data in HMIS.

Procedure: Due to the amount of personally identifying information and the confidential nature of the HMIS, every end user must be assigned a software license to access the system and their initial training must come from ARCH HMIS staff. In order to receive a license, a potential end user must not violate HMIS policies 4.0 through 4.4. Furthermore, a condition of being granted a license is that all users must sign and adhere to an End User Agreement. This document outlines the role and responsibility of having and maintaining their access in HMIS. An End User who violates the End User Agreement will be immediately inactivated from HMIS and required to attend re-training to re-gain access.
License Administration

Policy 4.6: Notification of issuance and revocation of access within the HMIS is the responsibility of Agency Administrator.

Procedure: Agency Administrators are responsible for notifying ARCH HMIS staff of a new user, change in user access, or deletion of user access within 24 business hours of their organization's needed change to HMIS access. Agency Administrators should work with ARCH HMIS staff to ensure proper license access is given to qualified HMIS End Users. However, issuance, maintenance, and revocation of software license within the HMIS Lead Agency are the sole responsibility of ARCH HMIS staff.

Assignment of End User security settings. ARCH HMIS staff will assign the security level of every end user based on the agreed upon security settings established by the Participating Agency at the Initial HMIS site visit. The Agency Administrator or Executive Director will assign access to individuals based on their role in the organization and needed access to HMIS. Assignments are best organized by the lowest level of security the staff or volunteer member would need to perform their normal work duties as defined by their official job/position description. If the user is to remain on the system, but has had a change in responsibilities, an Agency Administrator or Executive Director may request a change in any end users security setting.

Additional licenses/changes. All requests for new licenses must be submitted to the HMIS Lead Agency (ARCH). Request forms must be received and approved no later than 72 hours before the scheduled training date. All new licenses are issued only after a MOA and HIPAA Agreement have been signed by the HMIS Participating Agency and the HMIS End User Agreement has been signed by the appropriate End User. Licenses are allocated on a first come-first served basis based upon agency size, use, and adherence to all policies and procedures set forth in this document. If there are no more licenses available, the user will have to wait until a license is available or the HMIS Participating Agency may purchase a license for the End User.

Inactivity. An End User must allow no more than 30 days between log-in sessions on the live site to keep their license active. Any End User who is in violation of these rules will have their access inactivated by HMIS staff immediately and the user will be required to attend re-training prior to regaining access. They may be charged a license fee. If a license is no longer needed by the Participating Agency, it will be distributed to the pool of available licenses open to all Participating Agency providers. An inactivity report is generated and shared with the Executive Director.
ARCH HMIS Staff removing a user license for cause. ARCH reserves the right to inactivate or delete the license for any end user for cause. In all cases where a licensee is removed for cause, the assigned HMIS Participating Agency Administrator and Executive Director will be notified immediately via email with the stated cause of license removal. Reasons that a licensee would lose their license or otherwise have their license temporarily inactivated or revoked would include, but not be limited to:

- Multiple failed log on attempts in the same day.
- A consistent lack of good data quality.
- Three consecutive no call, no shows to scheduled training.
- Failure to log on to system at least once in a consecutive 30 day period.
- Sharing system credentials (log in and password) with any other party.
- Allowing non-authorized users to view any data from, have access to, see the screens of, or be provided any print outs of client data from HMIS.
- Other violations of these HMIS Policies.
- Other serious infractions that result in a compromise of the HMIS Participating Agency and/or any client level data in the system.

Agency removing a user license. An End User license can only be deactivated by ARCH HMIS staff. Requests for removal of a license by a HMIS Participating Agency can only come from the Agency Administrator or Executive Director and the request must be submitted in writing through the HMIS User License Request Form. All license requests should be communicated to ARCH within 24 business hours after the end user has left the employment of the HMIS Participating Agency; the end user has changed positions and is no longer in need of HMIS access; or, has knowingly breached or is suspected of a system breach where client data has been compromised. Terminations should be submitted using the HMIS License Request Form.

Law Enforcement

Policy 4.8: No active member of law enforcement or detention and corrections staff will be an authorized End User of HMIS.

Procedure: To protect current clients who may be accessing health and human service programs from harassment or harm, active members of law enforcement will not be granted access to HMIS. Limited exceptions may be negotiated and an agreement executed with HMIS, the local COC, when there is a program with direct involvement in an active homeless jail diversion and/or prison release program. Any agreement with exceptions must include a statement that: HMIS use is (1) limited to the purpose for which it was intended; and (2) is only for work with program involved clients.
Former members of law enforcement who may volunteer or are employed at a homeless service provider post-law enforcement career may have access to HMIS if it is imperative to their new responsibilities. ARCH will consider and respond to requests by law enforcement with next of kin searches, searches for clients and in the interest of public safety a person(s) who law enforcement has probable cause or an active warrant for his/her arrest related, to a violent crime and other felony crimes. ARCH will provide law enforcement information related to evidence and information gathering concerning a criminal matter via Court Order, such as a search warrant or subpoena.
Section 5: Clients’ Rights

Client Consent

Policy 5.1: A HMIS Participating Agency must obtain consent from all clients for whom they are entering or accessing client data into HMIS.

Procedure: No client shall be entered into HMIS without written consent for their information to be entered or accessed in HMIS. The HMIS Participating Agency agrees to get written permission on one or both of the following forms signed by the client: Informed Consent and or a Release of Information. All consent forms are not system-wide, but specific to the program/service they are receiving.

Informed Consent. The HMIS Client Informed Consent form is used to record a client’s authorization for their data to be entered into HMIS. The original signed Client Informed Consent form should be kept by the HMIS Participating Agency and protected from theft or loss. Participating Agencies are required to use the HMIS Client Informed Consent form provided. Informed Consent explains to clients their rights and gets consent for data to be retained. HMIS End Users should strive to communicate informed consent in a language the client understands. The form must be completed by each member of the household receiving services who is over the age of 18. The head of the household may sign for any children or members of the household under the age of 18 on the same form.

Once the written informed consent is obtained, it must be recorded in HMIS. After it expires, all clients still receiving services will need to sign another HMIS Informed Consent Form and the data will need to be updated in HMIS. It is important to understand agencies cannot deny services to individuals solely on the basis of the individual deciding not to share information in HMIS.

Release of Information (ROI). The HMIS Release of Information (ROI) form is used to control how client data is shared in HMIS. It should be kept by HMIS Participating Agency and protected from loss of theft. Participating Agencies are required to use the HMIS Release of Information form provided. Release of information is specific to sharing data among providers in the Continuum of Care, as well as HMIS Participating Agencies. Clients have the right to have their records open, partially open or closed. HMIS End Users should strive to communicate a release of information in a language the client understands. The form must be completed by each member of the household receiving services who is over the age of 18 who does not sign the Informed Consent. The head of the household may sign for any children or members of the household under the age of 18 on the same form.

Once a written release of information is obtained, it must be recorded in HMIS. If the client is still receiving services when the ROI expires and the client chooses not to sign the Informed Consent, but still wants to control how their data is shared, they will need to sign another HMIS Release of Information form and the data will need to be updated in HMIS.

Agencies must make reasonable accommodations for persons with disabilities.
throughout the data collection process. This may include, but is not limited to, providing qualified sign language interpreters, readers or materials in accessible formats such as Braille, audio, or large type, as needed by the individual with a disability.

Agencies that are recipients of federal assistance shall provide required information in languages other than English that are common in the community, if speakers of these languages are found in significant numbers and come into frequent contact with the program.

**Client Access to Information**

**Policy 5.2:** All clients entered into HMIS have a right to view information within their electronic HMIS file.

**Procedure:** If a HMIS Participating Agency has a written policy for providing copies of their paperwork or data collection to clients, the HMIS Participating Agency may follow its procedures to allow for providing copies of the HMIS data they collected. Clients can request a copy of their information in writing to the HMIS staff through email or regular mail. Once received, the HMIS staff will fulfill the client’s request in an expedited manner.

**Filing a Grievance**

**Policy 5.3:** Clients have the right to file a grievance with the HMIS staff about any HMIS Participating Agency related to violations of access in HMIS, violations of HMIS policies and procedures, or violations of any law.

**Procedure:** ARCH HMIS staff will entertain any client who wishes to file grievance against any HMIS Participating Agency. ARCH HMIS staff will request that a client fill out a HMIS Client Grievance Form, which can be obtained by contacting ARCH HMIS staff by phone, email or regular mail. Once completed and submitted by the client, ARCH HMIS Staff will investigate the complaint and provide its findings to the client who lodged the grievance. ARCH will notify the parties involved about the alleged incident reported. If the client is not satisfied with the findings of the grievance, the client must submit a grievance request in writing to the U.S. Dept. of Housing and Urban Development.

**Policy 5.4:** Other HMIS Participating Agencies have a right to file a grievance with ARCH HMIS staff about any HMIS Participating Agency related to violations of access in HMIS, violations of HMIS policies and procedures, or violations of any law.

**Procedure:** ARCH HMIS staff will entertain any HMIS Participating Agency who wishes to file grievance against any other HMIS Participating Agency. In cases where a client leaves one HMIS Participating Agency to receive services from another HMIS Participating Agency and the client reports a suspected violation, the new HMIS Participating Agency does have a right to file a grievance or duty to warn ARCH HMIS staff on behalf of the client as long as the client grants their
permission to file a grievance on their behalf. ARCH HMIS staff will request a HMIS Client Grievance Form be completed by either the client or the HMIS Participating Agency. The form can be obtained by contacting ARCH HMIS staff by phone, email or regular mail. Once completed and submitted by the client, ARCH HMIS Staff will investigate the complaint and provide its findings to the client who lodged the grievance. ARCH will notify the parties involved and the appropriate community planners about the alleged incident reported. If the client is not satisfied with the findings of the grievance, the client must submit a grievance request in writing to the U.S. Department of Housing and Urban Development.

Revoking Authorization for HMIS Data Collection

Policy 5.5: All clients who initially agree to participate in HMIS have the right to rescind their permission for data sharing in HMIS.

Procedure: Clients who choose to revoke their information sharing authorization must complete a new Release of Information. The new Release of Information should be sent by the Agency Administrator who will notify ARCH HMIS Staff that the client record is to be “closed” in the system. ARCH HMIS staff will be responsible for closing the client record from view. Once "closed", the HMIS Participating Agency will no longer be sharing the currently collected set of client data being entered into HMIS with other Participating Agency providers. The previously viewable data will still be seen and shared with other Participating Agency providers. The new Release of Information should be kept on file by the Participating Agency. In the case that after a Release of Information is signed and a client is accepted into a HMIS participating financial assistance program, the client must sign a client consent form ARCH HMIS staff must be notified to re-open the client record for sharing.
Section 6: Privacy, Safety & Security

National Privacy Requirements

Policy 6.1: HMIS complies with all federal, state, local laws, standards, and regulations.

Procedure: It is imperative that partner agencies have policies and procedures in place that ensure compliance with applicable laws and regulations that govern their programs.

HIPAA Covered Entities. Any Agency that is considered a “covered entity” under the Health Insurance Portability and Accountability act of 1996, 45 C.F.R., Parts 160 & 164, and corresponding regulations established by the U.S. Department of Health and Human services is required to operate in accordance with HIPAA regulations. More information about 45 C.F.R. may be found at: http://www.hhs.gov/ocr/privacy/

42 CFR Part 2 Entities. Any Agency that is considered a “covered entity” under 42 C.F.R. Part 2, and corresponding regulations establishing by the U.S. Department of Health and Human Services is required to operate in accordance with the corresponding regulations. More information about 42 C.F.R. may be found at: http://www.access.gpo.gov/nara/cfr/waisidx_02/42cfr2_02.html

Domestic Violence (DV) Shelters. Any agency that is a victim service provider is barred from disclosing identifying information to HMIS as of 2007. More information about DV Shelters and HMIS may be found at: http://epic.org/privacy/dv/hmis.html

Other Entities. Any Agency that is NOT considered a “covered entity” under any of the above mentioned programs is required to operate in accordance with ARCH/HMIS privacy and security rules, as well as any applicable federal, state, local laws and regulations. More information about HMIS Privacy and Security Rules may be found at: http://www.hmis.info/Default.aspx?classicAsp=resources.aspQStringcvid=234^ccid=1

Privacy Notice

Policy 6.2: HMIS Participating Agency providers must post a HMIS Privacy Notice prominently on their websites and in areas of plain view of the public such as waiting rooms, intake areas, lobbies, or screening or assessment areas. HMIS Participating Agency providers are required to provide a copy of the HMIS Privacy Notice to all clients upon request by the client.

Procedure: By law, HMIS Participating Agency providers are required to post a Privacy Notice that discloses collection and use of Client Information.
System Security and Privacy Statement

Policy 6.3: ARCH has implemented extensive technical and procedural measures to protect the confidentiality of personal information while allowing for reasonable, responsible, and limited uses and disclosures of data as recommended in the HMIS Data and Technical Standards.

Procedure: The security and confidentiality of homeless and at-risk client information within HMIS is a major issue. For certain providers and sub-populations, such as Domestic Violence Shelters, Substance Abuse Facilities and HIPAA Covered Entities, security and confidentiality of client information becomes even a much larger concern for all involved. The HMIS Data and Technical Standards published June 30, 2004 and updated through March, 2010 by the U.S. Department of Housing and Urban Development (HUD), include extensive HMIS Privacy and Security Standards to be followed by Continuum of Services, Homeless Assistance Providers, and HMIS Software companies. These standards were developed after careful review of the Health Insurance Portability and Accountability Act (HIPAA) standards for securing and protecting patient information. ARCH has and will continue to be in compliance with this Privacy and Security Standards even while not being considered a HIPAA covered entity as an HMIS Lead Agency.

Policy 6.4: HMIS secures the location of the server in a controlled hosting environment providing security from data loss and theft.

Procedure: ARCH contracts with a HUD approved software vendor to provide HMIS to the Continuum of Services. As a web based HMIS solution, the HMIS software and databases are hosted on secure servers in a highly secure computer room accessible only by very few employees who are responsible for maintaining and supporting the system. The vendor computers are also protected by firewalls to prevent unauthorized external access.

Policy 6.5: ARCH ensures that only appropriate staff and volunteers at HMIS Participating Agency providers gain and retain system access through a user authentication process.

Procedure: As an internet based software system, each HMIS user accesses the system via their internet web browser. To access HMIS, each user must know the web address (URL) for HMIS, which is not available or published outside the community. Once on the website, each user must use a valid user sign on and dynamic password. All user names and initial temporary passwords are issued by HMIS staff only. Passwords are considered expired every 45 days and users are prompted for new dynamic passwords. Additionally, after three failed log in attempts, user ID’s and passwords automatically become inactive and users must contact an Agency Administrator or HMIS staff for re-activation. Passwords are always encrypted and can never be seen in clear text.
Policy 6.6: HMIS secures data as it is traveling over the internet and stored on the centralized server by proving encryption for all data.

Procedure: As a cloud or web based software system, it is imperative that all data travel through the internet encrypted or unreadable to an outside user. All HMIS transactions are fully encrypted using Secure Socket Layer (SSL) with 128 bit encryption. This is the highest commercially available encryption level and is the same as used by financial institutions. Users can be assured that the data they are interacting with is secure by noticing the URL, or Web Address while using HMIS begins with the letters HTTPS.

Policy 6.7: ARCH HMIS staff, in conjunction with the HMIS Participating Agency Administrator, ensures that all End Users have access to the components of the system appropriate for their level of data usage.

Procedure: The HMIS software has a built-in security system that ensures each user only has the minimum access needed to perform their normal duties. Each HMIS End User is assigned a security level in their user profile that grants them access to only the areas they need to accurately do their work. A change to the level of system security for an end user may only be requested by an Agency Administrator or Executive Director for which the end user works.

Policy 6.8: ARCH HMIS staff use audit trail tools to ensure system oversight, investigate privacy, or security breaches or filed client grievances.

Procedure: The HMIS software has built-in audit trail applications that allow administrators to audit use and access of data. Audit reporting is an integral part of maintaining system security protocols and is performed on a scheduled basis by HMIS staff.

Policy 6.9: The HMIS is a shared information system with its default visibility and deny security exceptions preset by ARCH HMIS staff based on the work flow of the Participating Agency.

Procedure: Pursuant 42 and 45 CFR notwithstanding, HMIS is an open or shared HMIS system. The default visibility settings for clients will be set to OPEN for all HMIS clients that are not registered or receiving services from any 42 or 45 CFR facility or program. If client is enrolled in a 42 or 45 CFR covered entity program, program visibility settings will be set in accordance to applicable laws.

The HMIS system utilizes a set of Visibility Settings that allow sharing of only agreed upon data elements among the participating HMIS Participating Agencies.
The HMIS system utilizes a set of Deny Exceptions that disallow sharing of certain information by provider programs based upon federal, state, or local laws and guidelines, and by agreement with each HMIS Participating Agency provider.

System Visibility settings may only be changed by the HMIS staff. Requests to change visibility settings must be made via written request to HMIS staff. The HMIS System is constructed to offer a dynamic range of levels of security based on the needs of the agency and End User. As a default, End Users will only have enough security access to perform their normal job duties. Requests to change a user status must come from an HMIS Participating Agency Administrator or Executive Director.

A client has the right to refuse to have his or her data entered into the HMIS database. The client’s individual choice regarding participation will not affect his or her rights to services.

Data Ownership

Policy 6.10: All data is governed by the owner(s) of the data with regard to data use and disclosure.

Procedure: The client ultimately retains ownership of any identifiable client-level information that is stored within HMIS. If the client consents to share data, the client, or agency on behalf of the client, has the right to later revoke permission to share her or his data without affecting rights to service provision.
Section 7: User Training

HMIS Training Process

Policy 7.1: All End Users are required to have a basic computer competency prior to attending any HMIS training.

Procedure: Prior to being sent to HMIS training, all End Users should have a basic computer competency. End Users should be able to turn on/off a computer, use a mouse and keyboard, launch a browser, enter a URL, and navigate the World Wide Web. End Users who cannot complete these tasks should be sent to a basic computer competency class prior to be scheduled for HMIS training. ARCH HMIS staff will verify the competency of all users prior to training.

Policy 7.2: ARCH has established beginning, advanced, and ongoing training requirements for system users and agency administration.

Procedure:

Beginning Training

- System users *must* attend Beginning Training before accessing the system. Beginning Training is designed to give users an introduction to the system.
- A staff person may attend a specific training, depending on their role within the agency. Training modules are developed on skill level and type of access to the system.
- Under no circumstances should anyone in the agency who has not received official training by HMIS Administration have access to or use the HMIS.

Privacy Training

- Privacy Training, which has now been integrated into the Beginning Training curriculum, is mandatory for all system users.
- This training is designed to ensure that the user safeguards the privacy/confidentiality of the client when accessing the system. The user is instructed on obtaining Client Consent/ Release of Information and the appropriate use and disclosure of client data. The user also receives instruction on maintaining the privacy of his/her username and password.

Reporting Training

- Training for canned and customized reports is available to advanced users. This training must be requested by the HMIS Participating Agency.
Section 8: HMIS Technical Support

**Policy 8.1:** ARCH Homeless Management Information System staff will provide a system that will allow End Users to request technical assistance, general HMIS related inquires, training and work flow questions, and data quality assistance.

**Procedure:** All requests for technical assistance must be submitted through the HMIS help desk tracking system or email. All tickets or emails will be answered during normal ARCH business hours, Monday through Friday, 8:00am to 5:00pm.

**Policy 8.2:** ARCH HMIS staff will respond to all inquiries from Participating Agencies and clients in a timely manner.

**Procedure:** Response times for technical assistance varies based on the item that is submitted and the priority associated. ARCH HMIS Staff reserve the right to adjust priority levels based on the issue type of the request.

**Procedure:** Response times for technical assistance varies based on the item that is submitted and the priority associated. ARCH HMIS Staff reserves the right to adjust priority levels based on the issue type of the request.

**Normal Business Hours.** Requests for routine system technical support will be honored on a first come-first served basis categorized in the following manner:

<table>
<thead>
<tr>
<th>Issue Type</th>
<th>Type Definition</th>
<th>Tool to Report</th>
<th>HMIS Staff Response Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rapid Response</strong></td>
<td>Users are unable to use system. For example: the system is down or the site is unreachable.</td>
<td>Submit a service request or contact staff by phone.</td>
<td>Immediate. No less than 12 hours.</td>
</tr>
<tr>
<td><strong>Priority Response</strong></td>
<td>Users can use the system, but one or more functions important to day-to-day operational use is severely affected. For example: password issues, permission issues, security issues, not accepting data, or</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Submit a service request via email or helpdesk.</td>
<td>Less than 24 hours.</td>
</tr>
<tr>
<td>Regular Response</td>
<td>Screens have changed.</td>
<td>A problem is noted, but users are able to use all functions in the systems without major difficulty. For example: reporting issues, general questions, work flow issues, data entry problems, change to a report, or change to screens.</td>
<td>Submit a service request via email or helpdesk.</td>
</tr>
<tr>
<td>Feature Enhancement</td>
<td>Users are able to use all functions in the system as normal, but are requesting an enhancement to the system that is currently not available.</td>
<td>Submit a service request via email or helpdesk.</td>
<td>Less than 48 hours.</td>
</tr>
</tbody>
</table>

**After Hours.** After hours and weekend requests will be treated as if the request was received at opening of the next business day. ARCH HMIS staff normal working hours for Technical Assistance are Monday through Friday, 8:00 am through 5:00 pm.

**Policy 8.4:** ARCH HMIS staff will submit to the vendor all feature enhancement requests submitted through the proper channels from Agency Administrator(s) or End Users.

**Procedure:** It is a stated goal of HMIS to be as efficient and user-friendly as possible within the technical restraints of the system. Feature enhancement requests are welcomed and encouraged. Please submit all possible feature enhancements in the following manner:

- Begin by submitting a service request to a technician.
- Code the request type as a feature enhancement.
• Be as specific as possible in the request.
• If appropriate, describe the current workflow first and the suggested feature enhancement right after.
• If enhancement is for new system functionality, please describe a workflow and diagram as much as possible.
• If appropriate, please denote how much time savings would be achieved if the feature enhancement were to be enacted.
• If appropriate, please denote all of the possible benefits for your agency or End Users and other Participating Agency providers if feature enhancement were to be enacted.

**Policy 8.5:** ARCH Homeless Management Information System staff will hold mandatory periodic in person meetings or conference calls to discuss system changes and provide technical support.

**Procedure:** Agendas will be driven by submitted requests for agenda or discussion. All information, including agenda and instructions, will be sent to agency administrators via e-mail at least 48 hours before the meeting. All attendance records are open to review by local government entities and other community planners.
Section 9: Data Collection Process

Clients Served vs. Clients Benefiting from Service

Policy 9.1: All client data entered into HMIS by the Participating Agency should be that of clients receiving services and/or its family in attendance.

Procedure: Clients entered into HMIS should consist of the clients in attendance at the day of enrollment into the program or services, and can consist of minors under the age of 18 if the legal guardian consents to their entry into HMIS. HMIS is not meant for adult clients who are not in attendance or may benefit from services at a later date. HMIS Participating Agency providers should refrain from entering adult clients into HMIS that are not physically seen to be enrolled in the program or provided the service because they cannot give consent in absentia. For those providing financial assistance services per address, it is expected each member of the household receiving the service by the same address must provide consent and be entered as a household unit in HMIS and linked together using a service transaction, otherwise there is a risk of duplication of services. Data on all members of the family should be entered individually, but tied together as a household. The head of household can give consent for all minor children (under 18 years of age) in a family but cannot give consent for any adult members (over the age of 18). All adults must give their consent individually.

Data Entry Requirements

Policy 9.2: ARCH Homeless Management Information System Staff requires each HMIS Participating Agency to enter client level data based on a set of predefined data standards.

Procedure: HMIS data standards are based on the most current revision of the HUD Homeless Management Information System (HMIS) Data Standards. Every program entering into HMIS must adhere to the requirements set by HUD and the local Continuum of Care. Every program entering data into HMIS is evaluated based on the following elements: completeness, consistency, accuracy, and timeliness. Refer to Section 10 on Data Quality for details.

Procedure for All Programs. Every HMIS Participating Agency is required to enter the following Universal Data Elements in order to meet minimum standards. The elements required for every person who is entered in the system are: Full Name (First, Last), Social Security Number (full or partial), Social Security Data Quality, Date of Birth, Date of Birth Data Quality, Primary Race, Secondary Race, Ethnicity, Gender, Current Housing Status, Veterans Status, Disabling Condition, Prior Living Situation, Zip Code of Last Permanent Address (90 days or longer at a permanent residence), Zip Code Data Quality, Housing Status, Income Received in the past 30 days, if Yes, Amount and Source, Total Monthly Income, Non-Cash Benefits Received in the past 30 days, if Yes, Source.
Procedure for McKinney---Vento Funded Programs. HMIS Participating Agencies who are funded through any of the programs below must meet the basic requirements set by HMIS and also meet additional Program Specific Data Elements (PSDE). Found at HUDHRE.com.

- Emergency Solutions Grant (ESG);
- Housing Prevention and Rapid Re-Housing Program (HPRP);
- Projects in Assistance of Transition from Homelessness (PATH);
- Supportive Housing Program (SHP);
- Shelter Plus Care (S+C);
- Section 8 Moderate Rehabilitation for Single Room Occupancy (SRO);
- Housing Opportunities for Persons with AIDS (HOPWA).

The additional elements to be collected include: Physical Disability, Developmental Disability, Chronic Health Condition, HIV/AIDS, Mental Health, Substance Abuse, Domestic Violence, Destination, Date of Contact (Street Outreach Only), Date of Engagement (Street Outreach Only), Financial Services Provided (HPRP only) and Housing Relocation and Stabilization Services Provided (HPRP only).

All providers receiving HUD funding must have at least one service transaction per client (for HPRP must have at least one service transaction under Financial Assistance and at least one under Housing Relocation and Stabilization). Every client must have a program entry and program exit and the UDE of income and sources and housing status must be recorded at program entry and program exit and at least one time during a year if in the program over a year.

Managing Bed Inventory (Housing Providers Only)

Policy 9.3: All Housing Providers are required to maintain the most current bed inventory in HMIS. ARCH must be notified at least 5 days in advance of a change to any beds at the facility and client inventory in HMIS in real-time must reflect the most current program utilization.

Procedure: All Housing Providers must work to build accurate bed lists in HMIS. Each HMIS bed list should be assigned to the appropriate program (Emergency, Transitional, Permanent Supportive, etc.). If there are any changes to the bed lists, the Agency Administrator is required to notify the HMIS System Administrator at least 5 business days prior to the beds becoming available. Clients being assigned to beds or exited from beds in the system should be done in real time as the client is entering the program. In cases where clients are unable to be entered or exited in real time due to technical difficulties, all data must be current within 24 hours. Clients entering as families must be built as families in HMIS prior to bed entry and must be assigned together as part of the Usages module.
Optional Requirements

Policy 9.4: All Participating Agency providers are encouraged to record all Program-Specific Data Elements (PSDE) for all clients entered into HMIS even if not required for funding.

Procedure: Optional PSDE is a valuable area of the client record and part case management. Therefore, though not required, users are encouraged to complete these elements for each client, especially if the client is in a housing or financial assistance program. The optional PSDE include: Employment, Adult Education, General Health Status, Pregnancy Status, Veteran’s Information, and Children’s Education.

Client Self-Sufficiency Outcomes Matrix

Policy 9.5: Case Managers are encouraged to use the HMIS Client Self-Sufficiency Outcomes Matrix as an assessment tool for all clients that are entering and exiting a program.

Procedure: The Client Self-Sufficiency Outcomes Matrix is a newly offered optional assessment tool for each client in the HMIS system. The matrix is built with a series of assessment domains that a case manager may use to evaluate the strengths and weaknesses of a client as they begin and continue their case plans and assistance strategies. The domains to choose from include the following: Income Domain, Employment Domain, Shelter Domain, Food Domain, Childcare Domain, Children’s Education Domain, Adult Education Domain, Legal Domain, Health Care Domain, Life Skills Domain, Mental Health Domain, Substance Abuse Domain, Family Relations Domain, Mobility Domain, Community Involvement Domain, Safety Domain, and Parenting Skills Domain. Case Managers utilizing this tool usually pick a series to focus on and then complete at entry, at several points during interim and finally at exit. Client Self-Sufficiency Outcomes Matrix training is part of Level 2 = Case Management training.

HMIS Client Photo ID Cards

Policy 9.6: Participating Agency providers are encouraged to create and disseminate HMIS Client Photo ID Card for all clients being entered into HMIS.

Procedure: Some Continuums of Care have established the HMIS Client Photo ID Cards as the identification for all homeless clients in the system. Homeless and at-risk of homeless clients will be issued a HMIS Client Photo ID Card at their first point of entry in to the Continuum of Care. The cards may be issued at major continuum points of access such as day centers and one-stop centers or by other Member Agency providers when a service is rendered.

Policy 9.6.1: HMIS Participating Agency providers are encouraged to accept the HMIS Client Photo ID Cards for all clients for which they are providing services as proof of I.D.
**Procedure:** In order for the Continuum of Services and clients to see the benefit of ID cards, HMIS Participating Agency providers should be willing to generate, accept and ask for HMIS Client Photo ID Cards from clients. This will require some education to the clients about the use of the ID cards and how it will help them access services better.

**Policy 9.6.2:** HMIS Participating Agency providers are encouraged to use the HMIS Client Photo ID Cards for all clients for which they are providing services as proof of ID to rapidly check them into services and programs.

**Procedure:** Using the bar code on the HMIS Client Photo ID Cards, scan technology can help HMIS Participating Agency providers do business better. For low volume providers, scan technology can be used to access client records more quickly. For high volume providers, scan technology can be used to check people into like services rapidly.
Section 10: Data Quality

Data quality is vitally important to the success of the Homeless Management Information System. HMIS Participating Agency providers and HMIS staff will work diligently on adhering to data quality standards in order to ensure that reports both at the provider level and the system level are complete, consistent, accurate, and timely. Adherence to set data quality standards will help bring additional funded dollars into our community as well as ensure our data reflects our communities level of service when reported locally, statewide, or nationally. Data quality will be evaluated on accuracy, completeness, consistency, and timeliness. This data will be used by the Continuum of Care to monitor progress towards meeting its indicators.

Policy 10.1: ARCH Homeless Management Information System staff will evaluate the quality of all HMIS Participating Agency data on the accuracy of the data entered monthly.

Procedure: Accuracy is the degree to which data correctly reflects the client situation or episode as self-reported by the client.

Policy 10.1.1: All client data entered into HMIS should reflect what the client self-reported or an accurate assessment of known information by a case manager, where indicated by the 2010 HMIS Data Standards.

Procedure: Data captured for entry into HMIS should be what was client self-reported or data known by case managers. HUD procedures allow case managers to make changes to client data not reported by the client. Client self-reported means any information reported to staff by the client.

Policy 10.1.2: All client data entered into HMIS should be congruent with program details.

Procedure: Client records entered into HMIS should reflect the client population served, match capacity of enrollment, program type, and entry/exit should fall within service parameters. This information is based on consistency of accurate data entered on clients receiving services. For example, if you:

- are a program for men, you should not enter data on women.
- are a state program and state you have 20 beds; there should not be any more than 20 people in shelter unless you are using the overflow beds.
- are a fully HUD funded program; you should only have entry/exit types of HUD-40118.
**Policy 10.1.3:** While HUD has defined HMIS as the ‘record of record’, if agencies use paper-based files, they must match information entered into HMIS.

**Procedure:** All client data entered into HMIS should match the information captured and filed in the HMIS Participating Agencies client record/case file. Observed discrepancies could be subject to audit by HUD, HMIS staff, a local government entity or other community planner.

**Policy 10.2:** ARCH Homeless Management Information System staff will evaluate the quality of all HMIS Participating Agency data on the completeness of the data entered using detailed Data Quality Reports (DQRs), agency reports, and other tools utilized by local HMIS Administrators.

**Procedure:** Completeness is the level at which a field has been answered in whole or in its entirety. Measuring completeness can ensure that client profiles are answered in whole and that an entire picture of the client situations emerges.

**Policy 10.2.1:** For all clients served and entered into HMIS, a HMIS Participating Agency must maintain HUD mandated data quality standards.

**Procedure:** It is expected that HMIS Participating Agencies work to maintain no more than 5% missing data for each HUD Universal Data Element, and PSDE if applicable. The HMIS monthly Data Quality Reports, agency reports, and other tools utilized by local HMIS Administrators will be used to address data quality issues with the HMIS Participating Agencies. ARCH HMIS staff will work collaboratively with Participating Agencies to address and improve overall data quality.

**Policy 10.2.2:** For all clients served and entered into HMIS by a HMIS Participating Agency, no more than 5% of all client level data should be “blank/not reported/null”.

**Procedure:** It is expected that HMIS Participating Agencies will work with clients to capture all necessary data. HMIS Participating Agencies will be expected to have no more than 5% of all client data “blank/not reported/null” value rate for all clients entered into HMIS (or 95% or above completeness). “Blank/not reported/null” values include fields that are left blank or answered with a “don't know, refused, or unknown value”. While these options may accurately reflect what the client has self-reported, they are considered of a low quality value.

**Policy 10.2.3:** For all clients served and entered into HMIS by a HMIS Participating Agency, all system data quality fields must be completed.

**Procedure:** In HMIS, there are several data quality fields that are essential to understanding patterns of data entry and client self-reporting. These fields are part of the Universal Data Element (UDE) requirements measured for each HMIS
Participating Agency. These fields measure the quality of their associated fields. For example, if the Date of Birth field has been left blank, the Date of Birth Data Quality field is used to explain why the field is blank. There are three quality fields in the system.

- Social Security Data Quality
- Date of Birth Data Quality
- Zip Code of Last Permanent Address Data Quality

These fields allow for reporting only partial answers or full answers in order to receive completeness credit. These fields in conjunction with the associated data element field will be used to assess data quality issues.

Policy 10.3: ARCH Homeless Management Information System staff will evaluate the quality of all HMIS Participating Agency data on the consistency of the data entered.

Policy 10.3.1: All HMIS Participating Agency client data should work consistently to reduce duplication in HMIS by following workflow practices outlined in training.

Procedure: HMIS Participating Agencies are trained to search for existing clients in the system before adding a new client into the system. Client data can be searched by Name, Social Security Number, and Client Alias. HMIS Member Agencies are encouraged to follow this protocol.

ARCH HMIS staff review duplicate data entries in the system and have to merge client records. When duplicate client records created by HMIS Participating Agency providers are discovered, ARCH HMIS staff will contact the designated Agency Administrator to notify and address the user creating the duplication.

Policy 10.3.2: All HMIS Participating Agency client data should adhere to HMIS capitalization guidelines.

Procedure: HMIS Participating Agencies are trained on the current method and style to enter client level data. No HMIS Participating Agency should enter a client in any of the following ways:

- ALL CAPS
- all lower case
- Mix OF loWEr and UPPER cAselEtters
- Enter nicknames in the name space (please use the Alias box).
Policy 10.4: ARCH Homeless Management Information System staff will evaluate the quality of all HMIS Participating Agency data on the timeliness of the data entered.

Procedure: Timeliness is an important measure to evaluate daily bed utilization rates and current client system trends. To ensure reports are accurate, Member Agencies should ensure that their internal processes facilitate real-time data entry.

Policy 10.4.1: All HMIS Participating Agency client data should be entered in real-time or no later than 48 hours after intake, assessment, or program or service entry or exit.

Procedure: Real-time is defined as “the actual time during which a process takes place or an event occurs." Client data can be entered into HMIS in real-time - as the client is being interviewed at intake or assessment. The more real-time the data, the more collaborative and beneficial client data sharing will be for all HMIS Participating Agencies and clients. The goal is to get all program intake and assessment data into HMIS in real-time.

Policy 10.4.2: All HMIS Participating Agency providers should back date any client data not entered in real-time to ensure that the data entered reflects client service provision dates.

Procedure: All required data elements including program entry/exit, service transactions, universal data elements, and bed management must be entered for each client within 24 hours of program entry/exit or service provision dates. If the date was entered more than 24 hours later than the program entry/exit or service provision, the actual data of service or entry/exit must be used.

Policy 10.4.3: All HMIS Participating Agency providers shall accurately enter program entry and exit dates into HMIS consistent with 2010 HMIS Data Standards.

Procedure: Upon program entry whether or not it is an initial program entry, HMIS Participating Agency shall record the month, day and year of the first day of service or program entry. There shall be a new program entry date and corresponding exit date for each continuous period of residence or service; any return to residential or service program must be recorded as a new entry date. Upon program exit, HMIS Participating Agency shall record the month, day and year of last day of continuous residential program or service.

Policy 10.5: All Homeless Management Information System staff, HMIS Participating Agency providers, and data partners will work together to ensure the highest quality of data in HMIS.
**Procedure:** Due to the many reports and projects ARCH HMIS Staff is asked to provide, HMIS Participating Agency's' response to ARCH HMIS Staff inquires and correction of data quality issues is critical. Many of our project partners have very rigid time frames in which ARCH HMIS Staff must provide updated information. Therefore, the Participating Agency will provide a designated Agency Administrator whose role is to communicate with ARCH HMIS staff regarding these issues and ensure that the following measures are met.

**10.5.1:** All Agency Administrators should respond to ARCH HMIS Staff inquiries no later than 24 business hours.

**Procedure:** The Agency Administrator or back-up Agency Administrator should respond to inquiries from ARCH HMIS Staff no later than 24 business hours. In instances of vacation or illness, the back-up Agency Administrator will be contacted.

**Policy 10.5.2:** All HMIS Participating Agency providers should correct client data in HMIS within 5 business days of notification of data errors.

**Procedure:** After a report that outlines data corrections has been sent to the HMIS Agency Administrator or back-up Agency Administrator, it is the responsibility of the Participating Agency to correct the issues within 5 business days. Once the corrections have been made, the Agency Administrator or back-up Agency Administrator should update ARCH HMIS staff.

**Policy 10.6:** ARCH Homeless Management Information System staff, HMIS Participating Agency providers, and data partners will work together to ensure accuracy of reporting.

**Procedures:** The HMIS software includes a series of reports to aid in outcome evaluation, data quality monitoring, and analysis of system trends.

**Policy 10.6.3:** ARCH Homeless Management Information System staff may provide specialty reports to all HMIS Participating Agency providers for a fee.

**Procedures:** Assistance from ARCH HMIS staff to customize reports may be a fee-based service. A request must be submitted to ARCH HMIS Staff for evaluation and fee determination.
Section 11: Performance Measurement

HMIS staff will measure the performance of HMIS Participating Agency providers as it relates to the quality of the data entered into the system. Additionally, performance on a system-level will be measured to show the progress towards our Continuum of Care in ending homelessness.

**Policy 11.1:** ARCH HMIS staff will measure the timeliness and completeness of data entered by each HMIS Participating Agency.

**Procedure:** As a quality monitoring tool, ARCH HMIS staff will measure the effectiveness of data entry performed by each HMIS Participating Agency. These reports will be generated out of the system on a monthly basis. Each HMIS Participating Agency will have 5 business days to seek technical assistance regarding and/or correct any data quality issues.

**Policy 11.2:** ARCH HMIS staff will measure the bed utilization rates of homeless housing providers.

**Procedure:** As a quality monitoring tool, ARCH HMIS staff will periodically review the bed utilization rates of HMIS Participating Agencies.
### Total Population PIT Count Data

<table>
<thead>
<tr>
<th></th>
<th>2016 PIT</th>
<th>2017 PIT</th>
<th>2018 PIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count</td>
<td>448</td>
<td>450</td>
<td>360</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>221</td>
<td>231</td>
<td>191</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>78</td>
<td>74</td>
<td>59</td>
</tr>
<tr>
<td>Total Sheltered Count</td>
<td>299</td>
<td>305</td>
<td>250</td>
</tr>
<tr>
<td>Total Unsheltered Count</td>
<td>149</td>
<td>145</td>
<td>110</td>
</tr>
</tbody>
</table>

### Chronically Homeless PIT Counts

<table>
<thead>
<tr>
<th></th>
<th>2016 PIT</th>
<th>2017 PIT</th>
<th>2018 PIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count of Chronically Homeless Persons</td>
<td>117</td>
<td>73</td>
<td>51</td>
</tr>
<tr>
<td>Sheltered Count of Chronically Homeless Persons</td>
<td>56</td>
<td>24</td>
<td>30</td>
</tr>
<tr>
<td>Unsheltered Count of Chronically Homeless Persons</td>
<td>61</td>
<td>49</td>
<td>21</td>
</tr>
</tbody>
</table>
### Homeless Households with Children PIT Counts

<table>
<thead>
<tr>
<th></th>
<th>2016 PIT</th>
<th>2017 PIT</th>
<th>2018 PIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children</td>
<td>28</td>
<td>35</td>
<td>22</td>
</tr>
<tr>
<td>Sheltered Count of Homeless Households with Children</td>
<td>28</td>
<td>27</td>
<td>22</td>
</tr>
<tr>
<td>Unsheltered Count of Homeless Households with Children</td>
<td>0</td>
<td>8</td>
<td>0</td>
</tr>
</tbody>
</table>

### Homeless Veteran PIT Counts

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count of the Number of Homeless Veterans</td>
<td>69</td>
<td>56</td>
<td>43</td>
<td>37</td>
</tr>
<tr>
<td>Sheltered Count of Homeless Veterans</td>
<td>63</td>
<td>40</td>
<td>34</td>
<td>21</td>
</tr>
<tr>
<td>Unsheltered Count of Homeless Veterans</td>
<td>6</td>
<td>16</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>Project Type</td>
<td>Total Beds in 2018 HIC</td>
<td>Total Beds in 2018 HIC Dedicated for DV</td>
<td>Total Beds in HMIS</td>
<td>HMIS Bed Coverage Rate</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>------------------------</td>
<td>----------------------------------------</td>
<td>--------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>Emergency Shelter (ES) Beds</td>
<td>403</td>
<td>72</td>
<td>142</td>
<td>42.90%</td>
</tr>
<tr>
<td>Safe Haven (SH) Beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td>Transitional Housing (TH) Beds</td>
<td>120</td>
<td>0</td>
<td>33</td>
<td>27.50%</td>
</tr>
<tr>
<td>Rapid Re-Housing (RRH) Beds</td>
<td>107</td>
<td>0</td>
<td>107</td>
<td>100.00%</td>
</tr>
<tr>
<td>Permanent Supportive Housing (PSH) Beds</td>
<td>469</td>
<td>25</td>
<td>257</td>
<td>57.88%</td>
</tr>
<tr>
<td>Other Permanent Housing (OPH) Beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td>Total Beds</td>
<td>1,099</td>
<td>97</td>
<td>539</td>
<td>53.79%</td>
</tr>
</tbody>
</table>
## PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

<table>
<thead>
<tr>
<th>Chronically Homeless Bed Counts</th>
<th>2016 HIC</th>
<th>2017 HIC</th>
<th>2018 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC</td>
<td>172</td>
<td>193</td>
<td>202</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Households with Children</th>
<th>2016 HIC</th>
<th>2017 HIC</th>
<th>2018 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH units available to serve families on the HIC</td>
<td>6</td>
<td>4</td>
<td>22</td>
</tr>
</tbody>
</table>

## Rapid Rehousing Beds Dedicated to All Persons

<table>
<thead>
<tr>
<th>All Household Types</th>
<th>2016 HIC</th>
<th>2017 HIC</th>
<th>2018 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH beds available to serve all populations on the HIC</td>
<td>66</td>
<td>54</td>
<td>107</td>
</tr>
</tbody>
</table>
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.

<table>
<thead>
<tr>
<th></th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Submitted FY 2016</td>
<td>FY 2017</td>
<td>Submitted FY 2016</td>
</tr>
<tr>
<td>1.1 Persons in ES and SH</td>
<td>1130</td>
<td>1159</td>
<td>26</td>
</tr>
<tr>
<td>1.2 Persons in ES, SH, and TH</td>
<td>1185</td>
<td>1206</td>
<td>44</td>
</tr>
</tbody>
</table>

b. This measure is based on data element 3.17.

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

The construction of this measure changed, per HUD’s specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.
## FY2017 - Performance Measurement Module (Sys PM)

<table>
<thead>
<tr>
<th></th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Submitted FY 2016</td>
<td>FY 2017</td>
<td>Submitted FY 2016</td>
</tr>
<tr>
<td><strong>1.1 Persons in ES, SH, and PH (prior to &quot;housing move in&quot;)</strong></td>
<td>1130</td>
<td>1326</td>
<td>76</td>
</tr>
<tr>
<td></td>
<td>1326</td>
<td>102</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>21</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>FY 2017</td>
<td>FY 2017</td>
<td>FY 2016</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1.2 Persons in ES, SH, TH, and PH (prior to &quot;housing move in&quot;)</strong></td>
<td>1185</td>
<td>1368</td>
<td>102</td>
</tr>
<tr>
<td></td>
<td>1368</td>
<td>114</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>25</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>FY 2017</td>
<td>FY 2017</td>
<td>FY 2016</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

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

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

<table>
<thead>
<tr>
<th>Exit was from</th>
<th>Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)</th>
<th>Returns to Homelessness in Less than 6 Months</th>
<th>Returns to Homelessness from 6 to 12 Months</th>
<th>Returns to Homelessness from 13 to 24 Months</th>
<th>Number of Returns in 2 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>SO</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>ES</td>
<td>130</td>
<td>7</td>
<td>9</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td>TH</td>
<td>21</td>
<td>5</td>
<td>0</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>SH</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PH</td>
<td>249</td>
<td>11</td>
<td>3</td>
<td>8</td>
<td>22</td>
</tr>
</tbody>
</table>

TOTAL Returns to Homelessness: 400

6% in 6 months, 3% in 12 months, 3% in 24 months, 12% in 2 years

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).

<table>
<thead>
<tr>
<th>Category</th>
<th>January 2016 PIT Count</th>
<th>January 2017 PIT Count</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Total PIT Count of sheltered and unsheltered persons</td>
<td>448</td>
<td>450</td>
<td>2</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>221</td>
<td>231</td>
<td>10</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>78</td>
<td>74</td>
<td>-4</td>
</tr>
<tr>
<td>Total Sheltered Count</td>
<td>299</td>
<td>305</td>
<td>6</td>
</tr>
<tr>
<td>Unsheltered Count</td>
<td>149</td>
<td>145</td>
<td>-4</td>
</tr>
</tbody>
</table>

Metric 3.2 – Change in Annual Counts

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

<table>
<thead>
<tr>
<th>Category</th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Unduplicated Total sheltered homeless persons</td>
<td>1185</td>
<td>1206</td>
<td>21</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>1130</td>
<td>1159</td>
<td>29</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>147</td>
<td>72</td>
<td>-75</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults</td>
<td>111</td>
<td>114</td>
<td>3</td>
</tr>
<tr>
<td>(system stayers)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of adults with increased earned income</td>
<td>7</td>
<td>2</td>
<td>-5</td>
</tr>
<tr>
<td>Percentage of adults who increased earned income</td>
<td>6%</td>
<td>2%</td>
<td>-4%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults</td>
<td>111</td>
<td>114</td>
<td>3</td>
</tr>
<tr>
<td>(system stayers)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of adults with increased non-employment cash income</td>
<td>29</td>
<td>29</td>
<td>0</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>26%</td>
<td>25%</td>
<td>-1%</td>
</tr>
</tbody>
</table>

Metric 4.3 – Change in total income for adult system stayers during the reporting period

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults</td>
<td>111</td>
<td>114</td>
<td>3</td>
</tr>
<tr>
<td>(system stayers)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of adults with increased total income</td>
<td>34</td>
<td>31</td>
<td>-3</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>31%</td>
<td>27%</td>
<td>-4%</td>
</tr>
</tbody>
</table>
Metric 4.4 – Change in earned income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>82</td>
<td>42</td>
<td>-40</td>
</tr>
<tr>
<td>Number of adults who exited with increased earned income</td>
<td>36</td>
<td>7</td>
<td>-29</td>
</tr>
<tr>
<td>Percentage of adults who increased earned income</td>
<td>44%</td>
<td>17%</td>
<td>-27%</td>
</tr>
</tbody>
</table>

Metric 4.5 – Change in non-employment cash income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>82</td>
<td>42</td>
<td>-40</td>
</tr>
<tr>
<td>Number of adults who exited with increased non-employment cash income</td>
<td>11</td>
<td>16</td>
<td>5</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>13%</td>
<td>38%</td>
<td>25%</td>
</tr>
</tbody>
</table>

Metric 4.6 – Change in total income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>82</td>
<td>42</td>
<td>-40</td>
</tr>
<tr>
<td>Number of adults who exited with increased total income</td>
<td>43</td>
<td>23</td>
<td>-20</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>52%</td>
<td>55%</td>
<td>3%</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th>Universe: Person with entries into ES, SH or TH during the reporting period.</th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1104</td>
<td>1132</td>
<td>28</td>
</tr>
<tr>
<td>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.</td>
<td>258</td>
<td>246</td>
<td>-12</td>
</tr>
<tr>
<td>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)</td>
<td>846</td>
<td>886</td>
<td>40</td>
</tr>
</tbody>
</table>

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

<table>
<thead>
<tr>
<th>Universe: Person with entries into ES, SH, TH or PH during the reporting period.</th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1602</td>
<td>1405</td>
<td>-197</td>
</tr>
<tr>
<td>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.</td>
<td>307</td>
<td>299</td>
<td>-8</td>
</tr>
<tr>
<td>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.)</td>
<td>1295</td>
<td>1106</td>
<td>-189</td>
</tr>
</tbody>
</table>
Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD’s Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons who exit Street Outreach</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Of persons above, those who exited to temporary &amp; some institutional destinations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>% Successful exits</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Metric 7b.1 – Change in exits to permanent housing destinations
### Metric 7b.2 – Change in exit to or retention of permanent housing

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing</td>
<td>1341</td>
<td>1178</td>
<td>-163</td>
</tr>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>494</td>
<td>337</td>
<td>-157</td>
</tr>
<tr>
<td>% Successful exits</td>
<td>37%</td>
<td>29%</td>
<td>-8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2016</th>
<th>FY 2017</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons in all PH projects except PH-RRH</td>
<td>293</td>
<td>245</td>
<td>-48</td>
</tr>
<tr>
<td>Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations</td>
<td>285</td>
<td>232</td>
<td>-53</td>
</tr>
<tr>
<td>% Successful exits/retention</td>
<td>97%</td>
<td>95%</td>
<td>-2%</td>
</tr>
</tbody>
</table>
This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.
## 2018 HDX Competition Report

### FY2017 - SysPM Data Quality

<table>
<thead>
<tr>
<th></th>
<th>All ES, SH</th>
<th>All TH</th>
<th>All PSH, OPH</th>
<th>All RRH</th>
<th>All Street Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Number of non-DV Beds on HIC</td>
<td>325 308 291 353</td>
<td>159 143 145 124</td>
<td>437 474 500 487</td>
<td>23 37 66 52</td>
<td>2013-2014</td>
</tr>
<tr>
<td>2. Number of HMIS Beds</td>
<td>127 125 124 141</td>
<td>113 109 90 63</td>
<td>317 317 324 294</td>
<td>23 37 66 52</td>
<td>2013-2014</td>
</tr>
<tr>
<td>3. HMIS Participation Rate from HIC (%)</td>
<td>39.08 40.58 42.61 39.94</td>
<td>71.07 76.22 62.07 50.81</td>
<td>72.54 66.88 64.80 60.37</td>
<td>100.00 100.00 100.00 100.00</td>
<td>2013-2014</td>
</tr>
<tr>
<td>5. Total Leavers (HMIS)</td>
<td>898 1247 1295 1094</td>
<td>146 132 123 63</td>
<td>105 95 86 65</td>
<td>222 544 644 229</td>
<td>2013-2014</td>
</tr>
<tr>
<td>6. Destination of Don't Know, Refused, or Missing (HMIS)</td>
<td>224 117 142 43</td>
<td>18 8 3 0</td>
<td>16 20 5 7</td>
<td>34 52 106 8</td>
<td>2013-2014</td>
</tr>
<tr>
<td>7. Destination Error Rate (%)</td>
<td>24.94 9.38 10.97 3.93</td>
<td>12.33 6.06 2.44 0.00</td>
<td>15.24 21.05 5.81 10.77</td>
<td>15.32 9.56 16.46 3.49</td>
<td>2013-2014</td>
</tr>
</tbody>
</table>
# 2018 HDX Competition Report

Submission and Count Dates for TN-509 - Appalachian Regional CoC

## Date of PIT Count

| Date CoC Conducted 2018 PIT Count | 1/23/2018 |

## Report Submission Date in HDX

<table>
<thead>
<tr>
<th>Submitted On</th>
<th>Met Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018 PIT Count Submittal Date</td>
<td>4/30/2018</td>
</tr>
<tr>
<td>2018 HIC Count Submittal Date</td>
<td>4/30/2018</td>
</tr>
<tr>
<td>2017 System PM Submittal Date</td>
<td>5/31/2018</td>
</tr>
</tbody>
</table>