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 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2019 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:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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1A-1. CoC Name and Number: MO-501 - St. Louis City CoC

1A-2. Collaborative Applicant Name: City of St. Louis

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Institute for Community Alliance (ICA)

1B. Continuum of Care (CoC) Engagement

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1B-1. CoC Meeting Participants.

For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:
1. participated in CoC meetings;
2. voted, including selecting CoC Board members; and
3. participated in the CoC's coordinated entry system.

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	Yes	No	Yes
Local Jail(s)	Yes	Yes	No
Hospital(s)	Yes	Yes	Yes
EMS/Crisis Response Team(s)	Yes	Yes	Yes
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	Yes	Yes
Public Housing Authorities	No	No	No
CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes

Youth Advocates	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Domestic Violence Advocates	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes	Yes
LGBT Service Organizations	Yes	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Mental Illness Advocates	Yes	Yes	Yes
Substance Abuse Advocates	Yes	Yes	Yes
Other:(limit 50 characters)			
N/A	Not Applicable	No	No
N/A	Not Applicable	No	No
N/A	Not Applicable	No	No

1B-1a. CoC's Strategy to Solicit/Consider Opinions on Preventing/Ending Homelessness.

Applicants must describe how the CoC:
1. solicits and considers opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2. communicates information during public meetings or other forums the CoC uses to solicit public information;
3. takes into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness; and
4. ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats, e.g., PDF. (limit 2,000 characters)

1. The CoC's Governance and Membership committee seeks to recruit a broad range of stakeholders to join the CoC's membership, including nonprofit organizations, for-profit businesses, government departments, and individuals, who have knowledge about or an interest in ending homelessness in St. Louis. The committee conducts a gap analysis of membership at its monthly meetings and identifies potential members to fill those gaps. The Committee solicits targeted individuals and organizations and makes an annual general call for membership. Active CoC members are required to attend general CoC meetings and participate on at least 1 committee. Having a robust membership base allows a wide range of opinions to be shared within the CoC, at the committee, general membership, and board level.

2. The CoC's general meetings are a forum for sharing information and opinions regarding the operation and effectiveness of homeless services, access to

resources, common challenges, and more. New CoC members have an opportunity to introduce themselves to the general membership, and each meeting provides an opportunity for members to share information about their agency and resources. CoC meetings are open to the public.

3. This year, as a result of feedback previously received in community CoC meetings, collaboration is happening in the criminal justice & behavioral health fields. These two sectors are meeting to develop programming to address high utilization. Also, CoC leaders are participating in consultations specifically to develop strategies to complement the Coordinated Entry System. For the Consolidated Plan, a focus group was established for CoC member involvement which will be included in the City's Consolidated Plan.

4. Interpretation services or accessible electronic format are provided as needed through the City of St. Louis Office of the Disabled.

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 the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats;
4. how often the CoC solicits new members; and
5. any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.
(limit 2,000 characters)

1. The CoC makes a general call for new members annually.

2. The invitation to new members is published on the City's CoC website, the CoC Facebook page, the CoC's listserv, and the Governance and Membership Committee Chair makes an announcement at a General meeting.

3. Interpretation services or accessible electronic format are provided as needed through the City of St. Louis Office of the Disabled. If a request is made for a short presentation, the Governance & Membership Committee chair will present on the benefits of CoC membership. The benefits include collaboration of other resources, & potential funding options providing an additional homelessness service resource to an active network.

4. In addition to the annual call for members, the Governance and Membership Committee recruits new members throughout the year based on its own gap analysis, referrals from other members, and expressions of interest.

5. The Governance and Membership Committee is charged with ensuring that currently or formerly homeless individuals are represented on the board, and the committee works with the consumer at-large board member to identify and recruit other current or formerly homeless individuals for membership. A 6th at-large position on the CoC board has been added to be filled by a consumer. Advocacy committee has membership of individuals with lived experiences.

Meetings were moved to the Central Library for better access and increased involvement of people with lived experiences. Recruitment has been word-of-mouth by participants of the Advocacy committee.

1B-3. Public Notification for Proposals from Organizations Not Previously Funded.

Applicants must describe:
1. how the CoC notifies the public that it is accepting project application proposals, and that it is open to and will consider applications from organizations that have not previously received CoC Program funding, as well as the method in which proposals should be submitted;
2. the process the CoC uses to determine whether the project application will be included in the FY 2019 CoC Program Competition process;
3. the date(s) the CoC publicly announced it was open to proposal;
4. how the CoC ensures effective communication with individuals with disabilities, including the availability of accessible electronic formats; and
5. if the CoC does not accept proposals from organizations that have not previously received CoC Program funding or did not announce it was open to proposals from non-CoC Program funded organizations, the applicant must state this fact in the response and provide the reason the CoC does not accept proposals from organizations that have not previously received CoC Program funding.
(limit 2,000 characters)

1. The CoC and the City of St. Louis work together to develop the Request for Proposals (RFP) for new projects. Once finalized it is posted and open to any nonprofit both in and outside the Continuum of Care membership. The RFP is advertised on the St. Louis City CoC listserve, Department of Human Service's and City of St. Louis (List of Active City of St. Louis procurement opportunities) websites, City Journal, by word of mouth and announced at general membership meetings. Requirements of what the CoC was seeking for project applications were noted in the RFP and responses to the RFP were asked to be submitted to City Department of Human Services/Homeless Division. If a nonprofit is not a member of the CoC upon applying for CoC funds, the nonprofit will be required to join prior to awarding any CoC funds. Additionally, the nonprofit will have to maintain active membership within the CoC in accordance with the governance charter to receive ongoing CoC funding support.

2. The Program Performance Committee of the CoC and the Collaborative Applicant review all renewal and new project proposals and to select which projects will be accepted and ranked and which projects will be rejected in the CoC Program Competition. The CoC Board approves the selection first & then in accordance with the City of St. Louis procurement process, the Professional Services Agreement (PSA) Committee reviews and ratifies the rank and review. The final approval took place on September 5, 2019.

3. The RFP for 2019 CoC new projects was released & open to proposals on August 2, 2019.

4. Interpretation services or accessible electronic format are provided as needed through the City of St. Louis Office of the Disabled.

5. Not applicable.

1C. Continuum of Care (CoC) Coordination

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1C-1. CoCs Coordination, Planning, and Operation of Projects.

Applicants must select the appropriate response for each federal, state, local, private, other organizations, or program source the CoC included in the planning and operation of projects that serve individuals experiencing homelessness, families experiencing homelessness, unaccompanied youth experiencing homelessness, persons who are fleeing domestic violence, or persons at risk of homelessness.

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

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;
2. participated in the evaluating and reporting performance of ESG Program recipients and subrecipients; and
3. ensured local homelessness information is communicated and addressed in the Consolidated Plan updates.
(limit 2,000 characters)

1. The City of St. Louis is both the ESG grantee and Collaborative Applicant for the CoC. The Chief Program Manager of the Homeless Services Division is the current ex-officio member on the CoC Board. This arrangement facilitates alignment of ESG and CoC funds to support homeless service delivery and ensure local homelessness information is communicated in Consolidated Plan updates.

2. Members of the CoC Systems Performance Committee and CoC Board review and make recommendations on ESG proposal selection in collaboration with the City's Homeless Services Division. The selection process incorporates a process for the Homeless Services Division's sharing of performance outcomes of ESG recipients with the CoC.

3. CoC and ESG sub-recipients are required to participate in CoC activities including Point In Time and Housing Inventory Chart collection data. The CoC continues to recruit broad representation of stakeholders that are representative of the community and can address challenges with the coordinated entry system, coordination with weather related outreach, shelter and connections to permanent housing. CoC members are involved in priority setting activities and ESG assistance seeking from the Consolidated Plan jurisdiction, including CDBG, HOPWA and HOME. The Consolidated Plan will not only include input from the larger St. Louis City community but also a targeted focus group of CoC Members. The CoC has made progress towards higher functioning compliance with HEARTH Act amendments and is evaluating both CoC and ESG program and system performance.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. **Applicants must indicate whether the CoC provided 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.	Yes

Applicants must indicate whether the CoC ensured local homelessness information is communicated to Consolidated Plan Jurisdictions within its geographic area so it can be addressed in Consolidated Plan updates.

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 protocols for coordinated entry and the CoC's emergency transfer plan, that prioritize safety and incorporate trauma-informed, victim-centered services; and
2. how the CoC, through its coordinated entry, maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)

1. Service providers give the safety and confidentiality rights of the survivor highest priority and ensure the survivor's individual autonomy, self-determination and safety are respected. The CoC requires housing providers have emergency transfer plans in place that allow a survivor to move immediately to a safe location if the survivor fears for their life and safety. Victim service providers' highest priority is the safety and rights of the survivor. Case management, crisis intervention, and other supportive services focus on the provision of information, advocacy, safety planning, empowerment and support to reinforce the individual's autonomy, self-determination and safety.

2. Any Coordinated Entry (CE) front door responding to a victim of domestic or sexual violence provides a private location and assistance in contacting local shelters for victims of violence, when desired and per the Emergency Transfer protocols. Victim service providers do not solely accept referrals from the CE front doors, but also operate as their own front doors by receiving referrals from other sources, ensuring full access to victims in need. All victim service providers must have policies and procedures that comply with the Missouri Coalition Against Domestic & Sexual Violence which include prioritizing safety, trauma informed care and victim centered services. Victim Service providers maintain a comparable database and use a unique identifier, rather than the survivor's name or other identifying information. The unique identifier is used for the CE priority pool housing process and match meetings. The physical location of domestic violence front doors and other victim services providers is not disclosed publicly to ensure confidentiality. Clients placed on the CE Prioritization List with their unique identifier and communication about housing opportunities is done with their case managers. Case managers connect their clients to housing providers when a referral is accepted.

1C-3a. Training–Best Practices in Serving DV Survivors.

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:
1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in

serving survivors of domestic violence; and
2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence.
(limit 2,000 characters)

1. The CoC Service Delivery Committee works throughout the year to identify training needs and opportunities for CoC membership. At least once yearly training is provided to the full membership which covers best practices for working with victims of violence and stalking such as how to address safety, developing safety plans, being trauma-informed and victim centered. CE Staff are required to attend these trainings, which is assessed for compliance in program monitoring. These trainings are coordinated with victim services providers to be led by experts in the field. Victim service providers also open their agency training opportunities to the full CoC Membership, provided monthly. The CoC is planning to provide training opportunities more frequently in the coming year. The last trauma-informed care training took place February 11, 2019 and one is planned for November 2019.

2. The Coordinated Entry Committee in coordination with the Service Delivery Committee plan for periodic training for any staff interacting with the Coordinated Entry System. Any staff person which is given the task of doing CE assessments must go through specific CE HMIS training. Additionally, training on the common assessment tool occurs at a minimum twice per year and is required for those doing CE assessments. One-on-one trainings are provided as needed. Technical assistance from the HMIS lead agency is available for DV agencies who have comparable HMIS databases. This is to ensure that data, systems performance along with regulatory requirements needed for reports such as the CAPER are collected.

1C-3b. Domestic Violence–Community Need Data.

Applicants must describe how the CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking.
(limit 2,000 characters)

All DV providers within the St. Louis City CoC comply with best practices of the Missouri Coalition Against Domestic & Sexual Violence. DV providers maintain a comparable database. DV providers use a unique identifier, rather than the survivor's name or other identifying information. All DV providers participate in Coordinated Entry (CE) and place clients on the Community's Prioritization List using unique identifiers. The CE Policy and Procedures Manual or other guidance that is in effect specifies how referrals to housing openings happen. Currently the CE system is piloting a process, Priority Pool, to make referrals and do more extensive case conferencing. The Priority Pool uses the current prioritization standards established but uses them independently to build a pool of persons prioritized for housing.

When the CE Manager receives notice from housing providers about openings, the housing provider's criteria are reviewed to make the best possible match of an individual or family for that program opening. Under the current method, a match would be made from those in the Priority Pool. Those in the Priority Pool would be considered for the opening, and a selection would be made using the

housing provider's criteria, and the information known about clients to make the most appropriate match. The housing provider would be notified of the match, and the CE Manager would log the referral into the CE Project in HMIS. Persons placed in the Priority Pool will include those that have unique identifiers. The DV provider is contacted when their client is matched to a housing provider, and the DV providers assist with connecting their clients to housing programs referred to. Data collected from the CE Project in HMIS and DV comparable databases are used to submit both program and systems performance measures.

*1C-4. PHAs within CoC. Attachments Required.

Applicants must submit information for the two largest PHAs or the two PHAs with which the CoC has a working relationship within the CoC's geographic area.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On
St. Louis Housing Authority	6.00%	Yes-Both	No

1C-4a. PHAs' Written Policies on Homeless Admission Preferences.

Applicants must:
1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference–if the CoC only has one PHA within its geographic area, applicants may respond for one; or
2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

Preference already established. Not applicable.

1C-4b. Moving On Strategy with Affordable Housing Providers.

Applicants must indicate whether the CoC has a Moving On Strategy with affordable housing providers in its jurisdiction.

No

1C-5. Protecting Against Discrimination.

Applicants must describe the actions the CoC has taken to address all forms of discrimination, such as discrimination based on any protected

classes under the Fair Housing Act and 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.
(limit 2,000 characters)

The CoC partners with the St. Louis Equal Housing and Opportunity Council (EHOC). This organization provides is an annual Fair Housing conference, held April 12, 2019 this year. This conference tackled challenges faced in the metropolitan St. Louis area such as the concerning number of properties dissolved due to neglect by property owners and the subsequent large-scale number of affordable units lost, strategies for building consciously inclusive neighborhoods, progress on EHOC's policy priorities and how they have advanced the cause of Fair Housing. EHOC works to spread information on addressing all forms of discrimination based on the Fair Housing Act. EHOC advertises and supports events such as "Beyond Visibility," a community resource fair focused on active and informed support of the trans and gender non-conforming community. EHOC offers 7-12 monthly Fair Housing training sessions, open to anyone in the community, held at varying locations, including CoC member agencies, throughout the St. Louis City region. These are advertised to CoC members and are usually free. Arch City Defenders and Legal Services of Eastern Missouri also provide yearly training on these topics for CoC members.

All sub-recipients must comply with the Fair Housing Act and 24 CFR 5.105(a)(2) and 24 CFR 578.93 and as such this language is a part of all sub-recipient contracts with the City of St. Louis and thereby included as a part of program monitoring. In sub-recipient contracts it states this: "The Sub-recipient agrees to ensure fair and equal access to housing by adhering to the Fair Housing and Equal Opportunity provisions as set forth in 24 CFR 578.93: A) Nondiscrimination and equal opportunity requirement, B) Housing for specific sub-populations, C) Affirmatively furthering fair housing, D) Accessibility and integrative housing and services for people with disabilities." This information is also monitored through program monitoring to affirm that agencies are in compliance.

*1C-5a. Anti-Discrimination Policy and Training.

Applicants must indicate whether the CoC implemented an anti-discrimination policy and conduct training:

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively address discrimination based on any protected class under the Fair Housing Act?	Yes
3. Did the CoC conduct annual training on how to effectively address discrimination based on any protected class under 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing?	Yes

*1C-6. Criminalization of Homelessness.

Applicants must select all that apply that describe the strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area.

1. Engaged/educated local policymakers:	X
2. Engaged/educated law enforcement:	X
3. Engaged/educated local business leaders:	X
4. Implemented communitywide plans:	X
5. No strategies have been implemented:	
6. Other:(limit 50 characters)	

1C-7. Centralized or Coordinated Assessment System. Attachment Required.

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 for homelessness assistance in the absence of special outreach; and
3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner. (limit 2,000 characters)

1. The Coordinated Entry System (CES) for MO-501 covers the entire CoC geographic area as well as MO-500 because CES was launched as a joint implementation between these two CoCs.

2. CES access points include telephonic access, location-based facilities and mobile outreach. Additionally, there are specific population-based CES access points for veterans, HIV/AIDS, behavioral health, youth and DV providing trauma-informed access for these special populations. Every effort is made to meet the client where they are. Street Outreach services are used to engage people experiencing homelessness who are otherwise unable or unwilling to seek assistance on their own and assessments can be done wherever the client is most comfortable, through mobile assessment.

3. CES access points have trained staff using the common pre-assessment tool called the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI- SPDAT). If additional assessment is needed, staff may administer the Service Prioritization Assistance Tool (SPDAT). Scores received via the VI-SPDAT/SPDAT assessment tools, chronic status, length of time homeless and medical/frailty risk are the community's prioritization criteria. These criteria are used to prioritize people on the Prioritization List, and for placement in the

Priority Pool. Because there are more people on the Prioritization List than the Community can house, the Priority Pool is used to focus case conferencing efforts on a smaller group with the highest need and vulnerabilities to quickly match them to housing. A uniform assessment process is utilized to ensure needs-based access to housing interventions. The assessments at each front door must follow the requirements of the St. Louis City and County CoC CES Policies and Procedures Manual to ensure that clients are provided with the same assessment regardless of the entry access point.

1D. Continuum of Care (CoC) Discharge Planning

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1D-1. 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).

Foster Care:	X
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	X
None:	

1E. Local CoC Competition

Instructions

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*1E-1. Local CoC Competition–Announcement, Established Deadline, Applicant Notifications. Attachments Required.

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Yes
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

1E-2. Project Review and Ranking–Objective Criteria.

Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2019 CoC Program Competition:

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	Yes

1E-3. Project Review and Ranking–Severity of Needs and Vulnerabilities.

Applicants must describe:
1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and
2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects.
(limit 2,000 characters)

Renewals were reviewed using a 16-metric system based on data from HMIS, the program's Monitoring Agent, self-reports, and the CoC. Topics included completion of the application, positive housing outcomes and returns to homelessness, income performance, bed utilization, severity of needs served by the project, commitment to coordinated entry, commitment to Housing First principles, fiscal practices, CoC participation, HMIS data quality, and compliance monitoring outcomes.

New/expansion projects were reviewed on a 35-metric system based on the applicants' descriptions of the project scope/relevance, population served, case management plan, alignment with CoC priorities and participation, experience/capacity, HUD knowledge/experience, budget, HMIS utilization, and financial strength. Projects were only eligible for expansion funding if they were ranked among the top 10 projects in the prior year.

After project scoring was complete, the following were taken into account to complete the final rank: gaps in the system's performance, priority populations established by the CoC, cost effectiveness, unique gap/target population served, the level of negative impact on the continuum should a project be de-funded, expertise and capacity of the project applicant and/or sub-recipient, and severity of needs and vulnerability of the project participants.

1. Specific to the severity of needs/vulnerabilities, programs received points for serving a priority population including the chronically homeless, veterans, youth ages 18-24, clients with a history of domestic violence, or the medically fragile.

2. Projects that served more priority populations received more points. The points received for this criterion represented 7.59% of the total points available for each project.

1E-4. Public Postings–CoC Consolidated Application. Attachment Required.

Applicants must:
1. indicate how the CoC made public the review and ranking process the CoC used for all project applications; or
2. check 6 if the CoC did not make public the review and ranking process; and
3. indicate how the CoC made public the CoC Consolidated Application–including the CoC Application and CoC Priority Listing that includes all project applications accepted and ranked or rejected–which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the FY 2019 CoC Program Competition application submission deadline; or
4. check 6 if the CoC did not make public the CoC Consolidated

Application.

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	X	1. Email	X
2. Mail		2. Mail	
3. Advertising in Local Newspaper(s)	X	3. Advertising in Local Newspaper(s)	X
4. Advertising on Radio or Television		4. Advertising on Radio or Television	
5. Social Media (Twitter, Facebook, etc.)	X	5. Social Media (Twitter, Facebook, etc.)	X
6. Did Not Publicly Post Review and Ranking Process		6. Did Not Publicly Post CoC Consolidated Application	

1E-5. Reallocation between FY 2015 and FY 2018.

Applicants must report the percentage of the CoC's ARD that was reallocated between the FY 2015 and FY 2018 CoC Program Competitions.

Reallocation: 38%

1E-5a. Reallocation–CoC Review of Performance of Existing Projects.

Applicants must:
1. describe the CoC written process for reallocation;
2. indicate whether the CoC approved the reallocation process;
3. describe how the CoC communicated to all applicants the reallocation process;
4. describe how the CoC identified projects that were low performing or for which there is less need; and
5. describe how the CoC determined whether projects that were deemed low performing would be reallocated.
(limit 2,000 characters)

1. The Reallocation Policy states that project funds may be reallocated if they are "not well-performing as demonstrated by HMIS data; do not expend all their CoC grant; or that no longer fill a critical gap in the Continuum and would be better allocated to a new Project seeking to fill such a gap." Projects are considered for reallocation after the initial annual rank & review evaluations are complete. The Rank & Review sub-committee (comprised of Program Performance members w/ no CoC contracts) recommends projects for partial or total reallocation to the CoC board. The board makes the final decision by a vote to approve recommendations made by the sub-committee.

2. The CoC's Reallocation Policy was last updated and approved by the board May 9, 2019.

3. The Reallocation Policy and process are discussed during open CoC board meetings and is available to all members in the online cloud storage system used by the CoC. Additionally, after the FY2018 NOFA season, all renewal projects were provided opportunity to meet w/ Program Performance committee members to discuss their score/rank.

4. Spenddown reports are provided to the CoC by the collaborative applicant monthly and the CoC reaches out to projects at risk of not fully spending down their funds. Projects that are low-performing are quantified through the rank & review process described in section 1E-2. The Continuum uses system performance data to identify gaps in the system & understand where there is more/less need for various populations or program types.

5. In addition to low performing projects, the reallocation policy has 2 additional criteria that it may use to reallocate funds: (1) the project failed to spend down more than 10% of their CoC funding award at the end of their last completed contract or (2) the project in whole or part no longer fills a critical unmet need in the community. In the most recent cycle, two projects were reallocated because they both met 2 out of the 3 criteria.

DV Bonus

Instructions

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1F-1 DV Bonus Projects.

Applicants must indicate whether the CoC is requesting DV Bonus projects which are included on the CoC Priority Listing: Yes

1F-1a. Applicants must indicate the type(s) of project(s) included in the CoC Priority Listing.

1. PH-RRH	X
2. Joint TH/RRH	
3. SSO Coordinated Entry	

Applicants must click "Save" after checking SSO Coordinated Entry to view questions 1F-3 and 1F-3a.

*1F-2. Number of Domestic Violence Survivors in CoC's Geographic Area.

Applicants must report the number of DV survivors in the CoC's geographic area that:

Need Housing or Services	241.00

the CoC is Currently Serving	507.00

1F-2a. Local Need for DV Projects.

Applicants must describe:
1. how the CoC calculated the number of DV survivors needing housing or service in question 1F-2; and
2. the data source (e.g., HMIS, comparable database, other administrative data, external data source).
(limit 500 characters)

1. From the Coordinated Entry WHAMM Housing Prioritization List (WHPL) it was found that there were 241 survivors in need of housing and services. The CoC is currently serving 507 survivors, which are enrolled in Coordinated Entry, Emergency Shelter, Transitional Housing, Rapid Rehousing and Permanent Supportive Housing projects. The number of persons just in permanent housing programs is 268.

2. For both numbers reported above, HMIS data was used, which includes Coordinated Entry data.

1F-4. PH-RRH and Joint TH and PH-RRH Project Applicant Capacity.

Applicants must provide information for each unique project applicant applying for PH-RRH and Joint TH and PH-RRH DV Bonus projects which the CoC is including in its CoC Priority Listing–using the list feature below.

Applicant Name	DUNS Number
The Woman's Safe ...	179235437

1F-4. PH-RRH and Joint TH and PH-RRH Project

Applicant Capacity

DUNS Number:	179235437
Applicant Name:	The Woman's Safe House
Rate of Housing Placement of DV Survivors–Percentage:	45.31%
Rate of Housing Retention of DV Survivors–Percentage:	45.00%

1F-4a. Rate of Housing Placement and Housing Retention.

Applicants must describe:
1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and
2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)

Housing placements and rates of housing retention are based on information entered into DV-IMS between January 1, 2019, through September 23, 2019. In the residential program, 58 out of 128 (45.31%) individuals exited the shelter into permanent housing such as a rental apartment or house, regardless of housing subsidy.

1F-4b. DV Survivor Housing.

Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing.
(limit 2,000 characters)

As part of the program, the Housing Coordinator will create relationships with area housing providers (landlords) and developing lists of available housing options. The coordinator will work with landlords to help them understand the specific needs and barriers DV survivors' experience. By developing a list of landlords willing to rent to this population, and by identifying available rental units, survivors will have quicker access to permanent housing. In addition, financial assistance through the program will help DV survivors cover the costs associated to obtaining housing such as fees, deposits, and monthly assistance, which removes financial barrier and speeds up the process.

The Safe@Home Housing Stability Team will work with each client to prioritize preferences in housing placement and stabilization. Based on a woman-defined approach to advocacy, TWSH service practices are centered on a woman's perspective and understanding of her situation. Our Case Managers and Housing Stability Team provide resources and services based on her needs and works to overcome barriers she encounters. Participation in services is not required to access assistance, though it is encouraged. All residents are offered the same services based upon their individual needs.

1F-4c. DV Survivor Safety.

Applicants must describe how project applicant:
1. ensured the safety of DV survivors experiencing homelessness by:
(a) training staff on safety planning;
(b) adjusting intake space to better ensure a private conversation;
(c) conducting separate interviews/intake with each member of a couple;
(d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
(e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;
(f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and
2. measured its ability to ensure the safety of DV survivors the project served.
(limit 2,000 characters)

1. TWSH maintains the safety of DV survivors experiencing homelessness by:

a. Ensuring all new staff receive 40 hours of job-related training. Current employees receive 20 hours of annual training, and employees have access to further opportunities pertaining to their role and to MCADSV standards and guidelines. Safety Planning training is provided during an employee's onboarding and initial training phase. Training logs are kept, and supervisors are informed about additional required trainings.

b. The client intake area is configured to provide privacy for confidential conversations, with on-going case management within private offices.

c. Intake interviews are conducted individually with each client. Staff do not contact the client's abuser.

d. Within the confines of a woman-defined approach to advocacy, TWSH recognizes a client's perspective and experiences and provides services and resources to meet her specific needs. If a client has dependent children, individual intake interviews are conducted with each child to ensure needs are identified and met.

e. The Housing Coordinator builds relationships with providers in desired neighborhoods to create opportunities for women. Through the Safe@Home Program, women work with the Housing Coordinator and AfterCare Manager to determine desired and affordable locations.

f. Leases are made directly between a client and landlord. TWSH does not maintain a congregate-style living for RRH. In the event safety modifications are needed to the property, program staff work with the landlord to ensure completion.

2. TWSH takes precautions to ensure the security of the DVIMS database and the confidentiality of client data by making sure that only trained staff have access to logins and passwords. Computer monitors, and workstations are positioned to prevent unauthorized persons from viewing data and are never left unattended when the database is open.

1F-4d. Trauma-Informed, Victim-Centered Approaches.

Applicants must describe:
1. project applicant's experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors; and
2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:
(a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants' preferences;
(b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
(c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;
(d) placing emphasis on the participant's strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
(e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
(f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
(g) offering support for parenting, e.g., parenting classes, childcare.
(limit 4,000 characters)

1. Beginning in 2016, TWSH launched a multi-year initiative to integrate trauma-informed care (TIC) throughout its programs. A consultant facilitated an agency-wide training program. TWSH incorporated a TIC workgroup which includes former clients, staff, and stakeholders, which meets twice a month to evaluate organizational practices, institute regular internal and external reviews and assess that services and programs are trauma-informed. Other additions include integrated trauma awareness and responsiveness, development of trauma services for children and cultural/linguistic competencies that avoid traumatization.

2. The Safe@Home Housing Stability Team:

a. Prioritizes preferences in housing and stabilization. The Housing Coordinator works with housing providers to determine placement in client's desired location.

b. TWSH practices are centered on a woman's perspective and understanding of her situation. Case Managers and Housing Stability Team provide resources and services based on her needs and work to overcome barriers. Participation in services is not required to access assistance, though encouraged.

c. TWSH staff are trained to provide referrals to residents regarding trauma and DV services throughout sessions.

d. The assessment tools used by staff are based on national best practices and focus on the resident's strengths and opportunities, as well as the obstacles to overcome DV and homelessness. These tools assist the Case Management

team in making referrals that are useful to the client. Each client at TWSH will work with her case manager to develop an individual service plan (ISP).

e. On-going in-service training is provided for staff focusing on understanding cultural responsiveness and inclusivity, equal access, cultural competence, and nondiscrimination.

f. Safe@Home clients have access to a variety of topics including financial literacy, parenting skills, group support, etc. through support groups.

g. Childcare is provided during most group sessions.

1F-4e. Meeting Service Needs of DV Survivors.

Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:

- Child Custody
- Legal Services
- Criminal History
- Bad Credit History
- Education
- Job Training
- Employment
- Physical/Mental Healthcare
- Drug and Alcohol Treatment
- Childcare

(limit 2,000 characters)

Child Custody: The Legal Advocate will provide information regarding the safe transfer of joint visitation and will provide referrals to legal centers that can provide legal information.

Legal Services: Crime Victims Compensation information is disseminated during crisis hotline calls, intake, management meetings, and during group meetings. In addition, the Legal Advocate will provide recommendations and information regarding Orders of Protection and Crime Victim’s Compensation.

Criminal History: TWSH Legal Advocate will make referrals to agencies that assist with criminal issues and lawyers that may take pro-bono cases for clients needing these services.

Bad Credit History: Staff advises clients on techniques to improve credit history as well as financial literacy education, match-savings, budget planning, and emergency financial assistance.

Education: Staff makes referrals to GED and certification programs as needed. Clients have access to an on-site staffed computer lab to assist with program completion.

Job Training: An on-site computer lab is regularly staffed with volunteers who provide resume building assistance and completion of online applications and programs. Staff provides referrals to Job Corp and MERS training programs as needed.

Employment: TWSH Case Management promotes any community Job Fairs and employment opportunities.

Physical/Mental Healthcare: Shelter clients have access to an onsite Nurse Practitioner that can assess health status, immunizations, and other medical needs. In addition, the NP will make referrals to outside practitioners if needed.

Drug and Alcohol Treatment: Staff can provide information about drug and alcohol treatment services.

Childcare: Staff and volunteers provide respite services for the women at assigned times and the women can request individual services for meetings, appointments or just relief.
The case-managers will also provide referrals for on-going childcare options.

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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2A-1. HMIS Vendor Identification. Mediware

Applicants must review the HMIS software vendor name brought forward from FY 2018 CoC Application and update the information if there was a change.

2A-2. Bed Coverage Rate Using HIC and HMIS Data.

Using 2019 HIC and HMIS data, applicants must report by project type:

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	818	67	452	60.19%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	371	96	232	84.36%
Rapid Re-Housing (RRH) beds	319	7	312	100.00%
Permanent Supportive Housing (PSH) beds	1,940	0	1,547	79.74%
Other Permanent Housing (OPH) beds	21	0	21	100.00%

2A-2a. Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-2.

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-2., applicants must describe:

1. steps the CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2. how the CoC will implement the steps described to increase bed coverage to at least 85 percent.
(limit 2,000 characters)

PSH units not in HMIS are HUD VASH units. A large portion of TH beds not in HMIS are VA GPD beds. Additional TH beds not in HMIS are those provided for victims of violence. The gap in ES shelter beds is due to inclement weather occurring the night of the PIT Count. Due to extreme weather, several churches and other community groups opened their doors to have pop-up shelters, creating an additional 192 shelter beds on the night of the PIT Count. While this information was collected for the PIT/HIC Count, these beds were not recorded in HMIS. This is responsible for the vast majority of non-HMIS ES beds noted in the table above.

1.The CoC has increased cooperation with the VA through a regional initiative to end Veteran homelessness via the federal benchmarks and is continuing to work towards VA data integration in HMIS. This may be more feasible in the coming year with their increased participation in Coordinated Entry.

2.The City of St. Louis is moving forward to implement a strategy for higher Emergency Shelter bed utilization in HMIS by assisting in data collection for pop-up shelter beds that will in the next winter season also be funded by the City. As the City looks to fund upwards of 200 additional beds this winter and requiring HMIS data entry, the utilization rate should increase to 85% or better for ES beds. The CoC is in conversation with the VA to find solutions to record VASH usage in HMIS. This is starting with the Coordinated Entry System. The Coordinated Entry staff are working now to better understand VASH housing usage by starting to record VASH referrals and housed information dates. This is currently being discussed and will soon be implemented as the Community works to end Veteran Homelessness. Having VASH beds accounted for in Coordinated Entry which is in HMIS will be a step in the right direction to increase utilization.

***2A-3. Longitudinal System Analysis (LSA) Submission.**

Applicants must indicate whether the CoC submitted its LSA data to HUD in HDX 2.0.	Yes

***2A-4. HIC HDX Submission Date.**

Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy)	04/22/2019

2B. Continuum of Care (CoC) Point-in-Time Count

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).	01/30/2019
2B-2. PIT Count Data–HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).	04/22/2019

2B-3. Sheltered PIT Count–Change in Implementation.

Applicants must describe:
1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and
2. how the changes affected the CoC's sheltered PIT count results; or
3. state "Not Applicable" if there were no changes.
(limit 2,000 characters)

1. Extreme cold weather resulted in 9 cold-weather pop-up shelters opening the night of the PIT count. These shelters were volunteer operated and did not enter data in HMIS. PIT Count volunteers went to each of the pop-up shelters to complete client level surveys with clients staying in those shelters. Some clients refused to participate in the survey, which resulted in observational surveys being completed.

2. The result yielded an increase in the CoC's sheltered PIT Count numbers and a decrease in the unsheltered numbers.

3. For all HMIS participating shelters the process remained the same as it had been implemented in the 2018 count.

***2B-4. Sheltered PIT Count–Changes Due to Presidentially-declared Disaster.**

Applicants must select whether the CoC added or removed 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 2019 sheltered PIT count.	No

2B-5. Unsheltered PIT Count–Changes in Implementation.

Applicants must describe:
1. any changes in the unsheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and
2. how the changes affected the CoC's unsheltered PIT count results; or
3. state "Not Applicable" if there were no changes.
(limit 2,000 characters)

1. The night of the PIT Count had subfreezing temperatures that affected the Count in two major ways. First, the community responded to the weather by opening several temporary pop-up shelters.

2. The addition of pop-up shelter beds resulted in fewer persons staying on the streets during the night, thus lowering the overall number in our unsheltered count. Also this year, volunteers were hesitant to disturb individuals that they encountered on the street by asking them to complete the PIT survey. This resulted in additional observational surveys compared to the 2018 count and an added need to use the Data Extrapolation tool.

***2B-6. PIT Count–Identifying Youth Experiencing Homelessness.**

Applicants must:

Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count.	Yes

2B-6a. PIT Count–Involving Youth in Implementation.

Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:
1. plan the 2019 PIT count;

2. select locations where youth experiencing homelessness are most likely to be identified; and
3. involve youth in counting during the 2019 PIT count.
(limit 2,000 characters)

1. Youth providers were actively involved in the planning and implementation of our 2019 PIT count. Specific training around engaging homeless youth was provided to the volunteers by these involved parties at the PIT training, along with information about how homeless youth may identify differently and be found in different locations and by different means than homeless adults.

2. Homeless youth are likely to be found in similar locations to adults, along with temporarily doubling up with non-family periodically with no consistent, safe place to stay night to night. Homeless youth are also more likely to misreport age and homeless status, making more questions necessary to get to the likelihood of meeting the definition for homeless youth.

3. Youth were involved in the PIT count primarily at youth services agencies and shelters. Youth worked with volunteers to count those in attendance at youth programs and in shelters for the night of the PIT count.

2B-7. PIT Count–Improvements to Implementation.

Applicants must describe the CoC's actions implemented in its 2019 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)

The PIT Count took place on the coldest day of the winter season and through the generosity of individuals and the faith community additional shelter space was created, opened and meals were provided. Leadership believes this led to a more accurate count than in past years. After PIT volunteers surveyed their assigned area, they provided assistance in hotspot areas or at the 9 temporary pop up shelters.

1. Because of that addition op pop-up shelters, the CoC was able to better count individuals and families experiencing chronic homelessness, as people were more likely to go into shelter due to the extreme weather conditions.

2. There were no additional specific actions taken to net a better count of families with children, but again due to the pop-up shelters, the CoC believes there was a better representation of the homeless in this PIT count as compared to previous years.

3. Many VA staff participated in the count and VA outreach staff were on standby to assist with any veterans encountered during the unsheltered count. Communication and coordination are key components of how all areas of the City of St. Louis were able to be covered with well allocated volunteer resources.

3A. Continuum of Care (CoC) System Performance

Instructions

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*3A-1. First Time Homeless as Reported in HDX.

Applicants must:

Report the Number of First Time Homeless as Reported in HDX.	2,369

3A-1a. First Time Homeless Risk Factors.

Applicants must:
1. describe the process the CoC developed to identify 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)

First-time homelessness decreased by 41 persons between FY 2017 and 2018. HMIS generates the system performance report and first-time homeless is identified as "those who did not have entries in Emergency Shelter, Safe Haven, Transitional Housing or Permanent Housing in the previous 24 months."

1. The CoC focuses on data quality and incorporates diversion and prevention at the Coordinated Entry System (CES) access points which include the St. Louis Housing Helpline, all funded and voluntary Front Doors and Mobile Outreach. Additionally, prevention (supported through ESG funds) has been integrated into CES to help prevent at-risk individuals from becoming homeless.

Helping people to problem-solve in crisis is implemented as a diversion strategy. When diversion isn't successful, prevention funds may be used to further deter persons entering the homeless services system.

2. The CoC will work with hospitals and corrections to assist these sectors in aligning with CES and to incorporate diversion and prevention to reduce inflow into the system. As the CoC

3. The CoC System Performance Committee monitors strategy and performance through data and will inform and coordinate with the CoC Service Delivery Committee, who oversees system operations, as changes need to be made.

*3A-2. Length of Time Homeless as Reported in HDX.

Applicants must:

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.	112

3A-2a. Strategy to Reduce Length of Time Homeless.

Applicants must:
1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3. 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)

In 2018, persons were in Emergency Shelter (ES) projects for an average of 77 days, an increase of 4 days from the previous year, and persons were in ES, and Transitional Housing (TH) an average of 112 days, a decrease of 15 days from the previous year. The average length of time homeless for persons in ES, and Permanent Housing (PH), was 315 days, an increase of 75 days, and the average length of time for persons in ES, TH and PH was 340 days, an increase of 56 days.

1. Since the launch of coordinated entry on 1/3/2017, the CoC has worked to create a homeless service delivery that connects those who are most vulnerable and have the longest lengths of time homeless with housing. Many of these clients previously may have had no contact with HMIS participating agencies. The influx of the most vulnerable clients into the HMIS system, particularly into PH projects, increased the average length of time homeless and increased the overall length of time homeless in the CoC. Improving data quality remains a focus.

2. A reduction in the number of client records without the approximate date homelessness started has resulted in an increase in the average length of time homeless on the HUD SPM report. This reduction though was the result of

purposeful data entry training and cleanup so that the CoC would be better armed at identifying those individuals and persons in families with the longest lengths of time homeless. Length of time homeless is one of the Coordinated Entry System prioritization criteria and those the with the longest time homeless are pulled for the Priority Pool, which involves focused case conferencing and matching to housing resources.

3. The CoC System Performance Committee monitors strategy and performance through data and will inform & coordinate with the CoC Service Delivery Committee, who oversees system operations, as changes need to be made. (Note: this CoC has no Safe Haven projects).

*3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX.

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	36%
2. Report 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 as reported in HDX.	97%

3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.

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;
2. provide the organization name or position title responsible for overseeing 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;
3. 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; and
4. provide the organization name or position title responsible for overseeing 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. The CoC works with its HMIS Lead agency to create a monthly scorecard with program level and system level data that is viewed by several CoC Committees and the Board of Directors. These reports help the CoC to see progress monthly and are instrumental in helping the CoC monitor data such as exits to permanent housing. Weekly Housing & Match meetings (WHAMM) take place to ensure that individuals with the most severe needs are connected to

shelter and/or housing. CoC members comprised mostly of street outreach, housing providers, Coordinated Entry System (CES) and HMIS Lead agency staff meet at WHAMM weekly to case conference persons in the Priority Pool and other cases as needed to prevent exits to non-permanent destinations.

2. The Program Performance committee of the CoC is the primary body responsible for overseeing the strategy of reviewing the monthly programmatic scorecards which includes monitoring exit destinations for all program types. When necessary, the Program Performance committee elevates potential issues to the CoC Board which in turn works with our Collaborative Applicant to request special monitoring or technical assistance needed to help an agency improve performance. The Coordinated Entry leadership team and committee also monitors CES data regularly.

3. The CoC's CES utilizes WHAMM to facilitate lateral moves/transfers to help assist with maintaining permanent housing and exits to permanent housing destinations. Anytime a housing placement is in jeopardy of disruption staff can present those cases at the general WHAMM meetings or in the Acuity Review Panel Process to find alternatives keeping persons in permanent housing destinations wherever possible. Additionally, the CoC is working with the housing community to see how homeless service agencies can connect more quickly to available affordable housing units and to create a landlord incentive fund which will help in some cases maintain permanent housing placements.

4. See #2.

*3A-4. Returns to Homelessness as Reported in HDX.

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	3%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	7%

3A-4a. Returns to Homelessness–CoC Strategy to Reduce Rate.

Applicants must:
1. describe the strategy the CoC has implemented to identify 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 individuals and persons in families return to homelessness.
(limit 2,000 characters)

1. The goal of the CoC Coordinated Entry System is to quickly identify appropriate housing solutions to meet the clients' level of need, to avoid prolonged lengths of homelessness and returns to homelessness. The VI-

SPDAT and SPDAT help determine barriers and identify appropriate housing solutions that best meet the clients' needs.

2. The Coordinated Entry manual requires that housing case managers utilize the full SPDAT to guide case management services. Certified case managers are responsible for completing the full SPDAT within 7 days of move- in to housing and updating the full SPDAT every 6 months. Projects that are mandated to enter data into HMIS must record the scores for each domain of the full SPDAT within HMIS software for community-wide reporting. This ensures that clients who are exiting housing projects are sufficiently stable thus reducing returns to homelessness. In addition, the CoC is working to build capacity around employment and wrap-around services to address ongoing needs to assist households to increase income and improve housing stability. Community-based referrals focusing on strengthening financial and housing stability will help to decrease returns to homelessness.

3. The CoC monitors returns to homelessness through its HUD SPM report. The CoC Systems Performance and Program Performance Committees monitor this measure on a monthly basis.

*3A-5. Cash Income Changes as Reported in HDX.

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	20%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	27%

3A-5a. Increasing Employment Income.

Applicants must:
1. describe the CoC's strategy to increase employment income;
2. describe the CoC's strategy to increase access to employment;
3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and
4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment.
(limit 2,000 characters)

1. Stable income that meets basic human needs and maintains housing is a critical component in ending homelessness. The CoC monitors increases in employment income through the HUD SPM reports. To further assist in this strategy the CoC is committed to open communication in all CoC and committee meetings where agencies can share information with each other providing continual education and information opportunities for staff working to help clients increase income.

2. The CoC works with mainstream partners (CoC and non-CoC funded) to meet this need which include nonprofit, for-profit and government resources. CoC members make referrals to employment programs (many who are CoC members) in the community such as Connections for Success, Construction Training School of St. Louis, Employment Connections MERS/Goodwill, Missouri Division of Workforce Development, St. Louis Area Training and Employment (SLATE), St. Louis Job Corps, Employment Connections and Urban League. This past year, SLATE was appointed a new Executive Director who has increased opportunities for pre-apprenticeship and apprenticeship training and increased the number of employers working with this department. SLATE has committed to partnering with DHS and the CoC to provide more job training and opportunities for individuals experiencing homelessness. SLATE has participated in the Project Homeless Connect Resource Fair in January and provides staff office hours in emergency shelters.

3. For individuals who are unable to work, access to benefits is the best source of income, the CoC requires that CoC funded agencies have SSI/SSDI Outreach, Access and Recovery (SOAR) trained professionals.

4. The CoC Service Delivery committee oversees system operations, identifies service gaps and coordinates appropriate changes to increase efficiency and effectiveness. Systems Performance committee monitors performance through data and will inform & coordinate with the CoC Service Delivery Committee.

3A-5b. Increasing Non-employment Cash Income.

Applicants must:
1. describe the CoC's strategy to increase non-employment cash income;
2. describe the CoC's strategy to increase access to non-employment cash sources;
3. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase non-employment cash income.

1. CoC partners work with households to ensure they are tapping into any non-employment cash income that the household may be eligible for, such as SSI or SSDI, food stamps, etc. As a household meets with their case manager or outreach worker, non-employment cash income is typically one of the first items identified at initial engagement and work is done to establish non-employment case income or benefits quickly.

2. To expedite the process, the CoC has reached out to appropriate mainstream providers to identify efficiencies to increase enrollment in these programs. Additionally, CoC funded agencies are required to participate in SSI/SSDI Outreach Access and Recovery (SOAR) and provide access to SOAR trained professionals.

3. The CoC's Service Delivery Committee is developing a comprehensive Case Management standards document that will address employment and best practice strategies. The CoC has several employment focused agencies that sit on the Service Delivery committee and are members of the CoC and their experience, expertise and involvement are crucial to helping the CoC increase a focus on how to better employ training and recruitment activities for both clients

and agencies that are working with people in need of employment. The CoC has also invited several guest speakers at CoC meetings that have addressed or spoken about the importance of linkage with employment agencies and or education Institutions. These opportunities have provided both education of and specific connections for CoC members to build upon how to best assist those in need of employment.

3A-5c. Increasing Employment. Attachment Required.

Applicants must describe how the CoC:
1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and
2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being.
(limit 2,000 characters)

1. The CoC has several employment focused agencies that sit on the Service Delivery committee and are members of the CoC and their experience, expertise and involvement are crucial to helping the CoC increase a focus on how to better employ training and recruitment activities for both clients and agencies that are working with people in need of employment. Some of the organizations include: Connections for Success, Construction Training School of St. Louis, Employment Connections, MERS/Goodwill, Missouri Division of Workforce Development, St. Louis Area Training and Employment (SLATE), St. Louis Job Corps, and Urban League. These members provide opportunities for households experiencing homelessness to secure employment or to increase income to better stabilize housing. The CoC has also invited several guest speakers at CoC meetings that have addressed or spoken about the importance of linkage with employment agencies and or education Institutions. These opportunities have provided both education of and specific connections for CoC members to build upon how to best assist those in need of employment.

2. The Economic Development Commission has created $2.1 million to increase job training and education for youth. This is open to youth who are experiencing homelessness and will assist them in gaining access to career opportunities that prevent future occurrences of homelessness. For individuals with behavioral health issues in PSH, BJC Behavioral Health has opportunities in vocational rehabilitation where people with disabilities are able to be placed in a work environment. The Veterans Administration hosts job fairs specifically for Veterans that are experiencing or at-risk of homelessness.

3A-5d. Promoting Employment, Volunteerism, and Community Service.

Applicants must select all the steps the CoC has taken to promote employment, volunteerism and community service among people experiencing homelessness in the CoC's geographic area:

1. The CoC trains provider organization staff on connecting program participants and people experiencing homelessness with education and job training opportunities.	☐
2. The CoC trains provider organization staff on facilitating informal employment opportunities for program participants and people experiencing homelessness (e.g., babysitting, housekeeping, food delivery).	☐
3. The CoC trains provider organization staff on connecting program participants with formal employment opportunities.	☐
4. The CoC trains provider organization staff on volunteer opportunities for program participants and people experiencing homelessness.	☐
5. The CoC works with organizations to create volunteer opportunities for program participants.	☐
6. The CoC works with community organizations to create opportunities for civic participation for people experiencing homelessness (e.g., townhall forums, meeting with public officials).	☐
7. Provider organizations within the CoC have incentives for employment.	☐
8. The CoC trains provider organization staff on helping program participants budget and maximize their income to maintain stability in permanent housing.	☐

3A-6. System Performance Measures Data–HDX Submission Date

05/30/2019

Applicants must enter the date the CoCs submitted its FY 2018 System Performance Measures data in HDX. (mm/dd/yyyy)

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

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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The FY 2019 CoC Program Competition Notice of Funding Availability at: https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices

Warning! The CoC Application score could be affected if information is incomplete on this formlet.

3B-1. Prioritizing Households with Children.

Applicants must check each factor the CoC currently uses to prioritize households with children for assistance during FY 2019.

1. History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	X
2. Number of previous homeless episodes	X
3. Unsheltered homelessness	X
4. Criminal History	
5. Bad credit or rental history	
6. Head of Household with Mental/Physical Disability	X

3B-1a. Rapid Rehousing of Families with Children.

Applicants must:
1. describe how the CoC currently rehouses every household of families with children within 30 days of becoming homeless that addresses both housing and service needs;
2. describe how the CoC addresses both housing and service needs to ensure families with children successfully maintain their housing once

assistance ends; and
3. provide the organization name or position title responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of them becoming homeless.
(limit 2,000 characters)

1. The CoC launched the Coordinated Entry System (CES) in January 2017 and continues to improve the delivery of housing and shelter services. CES institutes a consistent and uniform assessment process to determine the most appropriate and quickest response to a family's immediate housing needs. All households who enter through a Coordinated Entry access point (i.e. St. Louis Housing Helpline, front door assessment providers or mobile outreach) utilize the common assessment tool, VI-SPDAT, to assess households who are homeless.

2. Households with children who enter shelter will be provided housing navigation to assist with housing planning and search, identification and lease signing within 30 days of entrance. For some this includes being referred for Rapid Rehousing (RRH) programs. Case managers focus on service connectedness for families with children, especially when placed in RRH programs, so that as the RRH program ends families continue to have supports in place. All CoC and ESG rapid rehousing programs must follow the housing first philosophy, but continually work with families to determine ways to meet all housing and service needs.

3. The Service Delivery Committee is responsible for overseeing the CoC's strategy to rapidly rehouse families with children. The CoC has Weekly Housing and Matching Meetings (WHAMM) to help ensure households are quickly connected to housing and the RRH Subcommittee monitors progress and recommends adjustments to CES as needed to the Coordinated Entry Committee.

3B-1b. 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 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 any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.

1. CoC conducts mandatory training for all CoC- and ESG-funded housing and services providers on these topics.	X
2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics.	X
3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	X
4. CoC has worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within the CoC geographic area that might be out of compliance and has taken steps to work directly with those facilities to come into compliance.	X

3B-1c. Unaccompanied Youth Experiencing Homelessness–Addressing Needs.

Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied youth experiencing homelessness who are 24 years of age and younger includes the following:

1. Unsheltered homelessness	Yes
2. Human trafficking and other forms of exploitation	Yes
3. LGBT youth homelessness	Yes
4. Exits from foster care into homelessness	Yes
5. Family reunification and community engagement	Yes
6. Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

3B-1c.1. Unaccompanied Youth Experiencing Homelessness–Prioritization Based on Needs.

Applicants must check all that apply that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.

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

3B-1d. Youth Experiencing Homelessness–Housing and Services Strategies.

Applicants must describe how the CoC increased availability of housing and services for:
1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and
2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.
(limit 3,000 characters)

1. The CoC has worked to build capacity and services focused on youth

homelessness. In the last 3 years the CoC approved funding for youth RRH (Youth in Need) and established St. Lazare House, the only youth-specific PSH program. Covenant House MO, a youth shelter and TH provider recently expanded their max age for services from 22 to 24, allowing the community to increase services to older youth. Youth In Need, the youth Coordinated Entry System (CES) lead front door, operates a street outreach program funded through new Missouri Housing Innovation Program state funding that works with the Mental Health Board to provide response services through the Youth Connection Helpline. Youth In Need also participated in the Youth Collaboratory's Community Entry Learning Collaborative, a collaborative to discuss best practices & challenges in youth homelessness. Youth In Need also participates in quarterly CES best practices conference calls with A Way Home America, to increase capacity of youth CES.
Covenant House, Epworth, Youth In Need along with other agencies have developed and implemented CES strategies to connect homeless youth to housing and support services. Youth Street Outreach providers provide reports to CoC Service Delivery Committee and effectiveness is monitored by the Systems Performance Committee.

2. Acknowledging the unique factors around youth homelessness, particularly those unsheltered, in the past year the CoC began holding bi-weekly youth-specific CES meetings. This allowed youth-specific and other homeless service agencies to have in-depth case conferencing to ensure engagement and housing of the most vulnerable in the most effective and efficient way. This has allowed the community to improve continuity of services between providers, target those youth most vulnerable, with focused efforts on unsheltered youth, and ensured better capture of homeless youth data in CES, and increased CES participation of agencies previously uninvolved.

3B-1d.1. Youth Experiencing Homelessness–Measuring Effectiveness of Housing and Services Strategies.

Applicants must:
1. provide evidence the CoC uses to measure each of the strategies in question 3B-1d. 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 both strategies in question 3B-1d.; and
3. describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of both strategies in question 3B-1d. (limit 3,000 characters)

1. The CoC and HMIS Lead agency are working to generate monthly system-wide reports on youth-specific outcomes. The CoC's Coordinated Entry Committee reviews monthly Coordinated Entry System (CES) reports, which include youth-specific data points. Additionally, the new AHAR allows the CoC to look at specific sub-population data outcomes providing new capabilities when looking at sub-population outcomes. Through Regional planning efforts focused on data the community is capturing real-time subpopulation data assisting in identifying gaps and progress in reducing youth homelessness.

2. The CoC measures effectiveness by utilizing HUD System Performance Measures (SPM) for length of time homeless, returns to homelessness, number

of homeless persons, successful placement from street outreach and successful placement and retention in permanent housing. The CoC monitors length of time between date the youth is assessed to housing entry date to ensure we are quickly connecting youth to appropriate Permanent Housing.

3. The CoC and HMIS Lead agency will soon launch a CES community dashboard to allow the community to visualize CES data in a way that has not happened in the past. This dashboard can filter by sub-populations, including youth. Youth In Need's participation in the CES collaborative calls includes submitting youth CES data to A Way Home America (AWHA) for their community dashboards. AWHA dashboards and the CoC's CES dashboard allow the CoC to track and assess how and when youth enter and exit the system. These dashboards will provide comparison of sub-populations and demographics. Visualizing this information in a dashboard helps make an overwhelming amount of data more easily consumable with less time trying to identify trends and service gaps and more time coming up with solutions.

3B-1e. Collaboration–Education Services.

Applicants must describe:

1. the formal partnerships with:
a. youth education providers;
b. McKinney-Vento LEA or SEA; and
c. school districts; and

2. how the CoC collaborates with:
a. youth education providers;
b. McKinney-Vento Local LEA or SEA; and
c. school districts.
(limit 2,000 characters)

1. A formal partnership is the program K-KIDS (Keeping Kids in District Schools), an extension of the St. Louis City and County CoCs and provides training, networking and local policy setting for addressing the educational needs of students who are homeless. It includes participation of 30+ school districts, 35+ social service agencies. The CoC is working closely with youth education providers and school districts to help children and families experiencing homelessness access housing and support services through the Coordinated Entry System (CES).

2. The CoC collaborates with youth education coordinators, McKinney-Vento liaisons and other programs such as Head Start. Member agency, Youth In Need (YIN), who also attends K-KIDS has a large Head Start program in St. Louis City and clients given preference at that Head Start Center when experiencing homelessness. Another specific example of collaboration is Gateway 180 which provides emergency shelter and RRH to families. Their staff work with school personnel to find shelter and provide guidance for students or families in need of services. They partner with schools to arrange and assist in student transportation and advocate for students that need counseling or other educational support services.

Education coordinators and school liaisons participate in the Community CES

by identifying and referring families for assessment when they meet the HUD homeless definition. They inform families of eligibility for McKinney-Vento education services and community services. CES leadership works with coordinators and liaisons on case conferencing when needed.
Educational staff attend CoC meetings and committees to keep abreast on CoC resources that benefit the families they work with. The CoC supports collaboration with local funding institutions like St. Louis Office of Developmental Disabilities, Department of Mental Health, and St. Louis Regional Center which support the needs of children and families.

3B-1e.1. Informing Individuals and Families Experiencing Homeless about Education Services Eligibility.

**Applicants must describe policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.
(limit 2,000 characters)**

All CoC member agencies that work with families with children have policies and procedures in place to make sure families are aware of their eligibility for education services. With participation in CoC meetings and committees from McKinney-Vento School liaisons, members are aware of eligibility for required educational services and are readily available to work with any families that are experiencing homelessness. Emergency shelters and transitional housing agencies arrange for transportation to and from school anytime there are issues with getting it set up through the school districts. These programs additionally work with schools to set up any needed services for families such as counseling, Individual Educational Plans (IEPs), food support, clothing or school uniforms and supplies, etc.
The CoC is working on developing common case management standards which will be incorporated into all CoC and ESG funded contracts. One of the elements that will be incorporated is the requirement of informing individuals and families that are experiencing homelessness of their eligibility to additional educational services. The CoC is collaborating with a couple different school districts to develop these protocols. Early childhood providers will be consulted with for their input to this document being developed. These standards when established will be publicized to the full CoC so even non-funded member agencies can incorporate them into their own programs as a best practice.

3B-1e.2. Written/Formal Agreements or Partnerships with Early Childhood Services Providers.

Applicant must indicate whether the CoC has an MOU/MOA or other types of agreements with listed providers of early childhood services and supports and may add other providers not listed.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
Head Start	No	Yes
Early Head Start	No	Yes

Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	No	Yes
Birth to 3 years	No	Yes
Tribal Home Visting Program	No	No
Other: (limit 50 characters)		

3B-2. Active List of Veterans Experiencing Homelessness.

Applicant must indicate whether the CoC uses an active list or by-name list to identify all veterans experiencing homelessness in the CoC. Yes

3B-2a. VA Coordination–Ending Veterans Homelessness.

Applicants must indicate whether the CoC is actively working with the U.S. Department of Veterans Affairs (VA) and VA-funded programs to achieve the benchmarks and criteria for ending veteran homelessness. Yes

3B-2b. Housing First for Veterans.

Applicants must indicate whether the CoC has sufficient resources to ensure each veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach. Yes

3B-3. Racial Disparity Assessment. Attachment Required.

Applicants must:
1. select all that apply to indicate the findings from the CoC's Racial Disparity Assessment; or
2. select 7 if the CoC did not conduct a Racial Disparity Assessment.

1. People of different races or ethnicities are more likely to receive homeless assistance.	X
2. People of different races or ethnicities are less likely to receive homeless assistance.	
3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	
4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	X
5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	

6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	
7. The CoC did not conduct a racial disparity assessment.	

3B-3a. Addressing Racial Disparities.

Applicants must select all that apply to indicate the CoC's strategy to address any racial disparities identified in its Racial Disparities Assessment:

1. The CoC is ensuring that staff at the project level are representative of the persons accessing homeless services in the CoC.	
2. The CoC has identified the cause(s) of racial disparities in their homeless system.	X
3. The CoC has identified strategies to reduce disparities in their homeless system.	X
4. The CoC has implemented strategies to reduce disparities in their homeless system.	
5. The CoC has identified resources available to reduce disparities in their homeless system.	X
6: The CoC did not conduct a racial disparity assessment.	

4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

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Warning! The CoC Application score could be affected if information is incomplete on this formlet.

4A-1. Healthcare–Enrollment/Effective Utilization

Applicants must indicate, for each type of healthcare listed below, whether the CoC assists persons experiencing homelessness with enrolling in health insurance and effectively utilizing Medicaid and other benefits.

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits.

Applicants must:
1. describe how the CoC systematically keeps program staff up to date regarding mainstream resources available for program participants (e.g., Food Stamps, SSI, TANF, substance abuse programs) within the geographic area;
2. describe how the CoC disseminates the availability of mainstream resources and other assistance information to projects and how often;
3. describe how the CoC works with projects to collaborate with healthcare organizations to assist program participants with enrolling in

health insurance;
4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and
5. 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. Public and private partnerships are essential to the CoC's ability to fully serve individuals and families at-risk of and experiencing homelessness in the St. Louis community. Case managers for HUD funded agencies are trained in SSI/SSDI Outreach, Access, and Recovery (SOAR) and assist clients on accessing mainstream resources such as SSI/SSDI, TANF and Food Stamps. The CoC strives to build upon community partnerships through its membership.

2. Time is set aside in CoC meetings to network and share information amongst members. Trainings or presentations by other agencies and organizations that provide mainstream resources are provided to the community and to CoC members. Additionally, the CoC introduced agency spotlights in CoC general meetings and via social media to better share information. Through the collaborative applicant (City of St. Louis), the CoC has access to the health department which assists in enrolling clients in insurance.

3. The CoC works with the Department of Health as well as healthcare partners to sign up individuals in need of insurance for any programs that they may be eligible for which typically includes Medicaid, Children's Health Insurance Program (CHIPS) or Gateway to Better Health, a temporary health care program for uninsured adults in St. Louis City and County designed to provide uninsured adults a bridge in care until they are able to enroll in health insurance coverage options available through the Affordable Care Act.

4. CoC member service providers assist clients to enroll in Medicaid. This allows service providers to bill insurance and to help pay for care coordination of services. The State of Missouri is not a Medicaid expansion state which poses a challenge for our community to ensure that all St. Louisans are adequately insured.

5. The responsibility for overseeing the CoC strategy for mainstream benefits lies jointly with the Planning and Service Delivery Committees of the CoC.

4A-2. Lowering Barriers to Entry Data:

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 has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	29
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	29
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

4A-3. Street Outreach.

Applicants must:
1. describe the CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
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. Street Outreach is a Coordinated Entry System (CES) access point and engages people experiencing both long-term or first-time homelessness and those unable or unwilling to seek assistance. ESG, PATH, RHY, local government & private funds support street outreach.

2. Multiple Street Outreach teams cover 100% of the CoC geographic area and workers can be accessed daily. St. Louis City CoC & County CoC are part of the Large City Cohort with Built for Zero and are working to ensure that efforts are coordinated and comprehensive. A recent implementation is having Team Leads that provide structure and streamline communication.

3. Street Outreach teams are on the streets daily assisting, canvasing or looking for people in need of services. Monthly case conferencing occurs with the professional outreach teams.

4. Outreach teams work closely with Crisis Intervention Trained (CIT) police officers. Street Outreach is a significant component of the Community's CES especially in reaching out to individuals who are chronically homeless, not in shelter and most resistant to assistance. Street Outreach teams are trained on the pre-screen assessment tool, VI-SPDAT, and common SPDAT assessment. Outreach workers can immediately connect people to shelter or housing and other supportive services. Street Outreach assists in locating individuals and households who are matched with housing. The Veterans Administration Street Outreach staff work closely to ensure all Veterans encountered can connect to veteran resources. A recent activity includes enhancing the structure of the professional outreach team meeting to include input from volunteer Street Outreach and the Police Homeless Outreach Officers, allowing additional information sharing. At the end of the full meetings, volunteer Street Outreach and Police Officers are excused so that professional Street Outreach workers can discuss cases in greater detail including sensitive or confidential information.

4A-4. RRH Beds as Reported in 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 2018 and 2019.

2018	2019	Difference

RRH beds available to serve all populations in the HIC	204	319	115

4A-5. Rehabilitation/Construction Costs–New Projects. No

Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting $200,000 or more in funding for housing rehabilitation or new construction.

4A-6. Projects Serving Homeless under Other Federal Statutes. No

Applicants must indicate whether the CoC is 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.

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

Document Type	Required?	Document Description	Date Attached
_FY 2019 CoC Competition Report (HDX Report)	Yes	FY2019 CoC Compet...	09/12/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners' Preference.	No		
1C-4. PHA Administrative Plan Homeless Preference.	No	PHA Administratio...	09/24/2019
1C-7. Centralized or Coordinated Assessment System.	Yes	CE Assessment Tool	09/26/2019
1E-1.Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.	Yes	Projects Accepted...	09/26/2019
1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.	Yes	Projects Rejected...	09/26/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	Local Competition...	09/26/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	Local Competition...	09/26/2019
1E-4.Public Posting–CoC-Approved Consolidated Application	Yes	Consolidated Appl...	09/26/2019
3A. Written Agreement with Local Education or Training Organization.	No		
3A. Written Agreement with State or Local Workforce Development Board.	No		
3B-3. Summary of Racial Disparity Assessment.	Yes	Racial Disparity ...	09/24/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No		
Other	No	Projects Accepted...	09/26/2019
Other	No	Projects Accepted...	09/26/2019

Other	No	CoC Governance & ...	09/26/2019

Attachment Details

Document Description: FY2019 CoC Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Administration Plan Preference

Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description: Projects Accepted Notification part 1

Attachment Details

Document Description: Projects Rejected/Reduced Notification

Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Public Announcement

Attachment Details

Document Description: Consolidated Application

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Racial Disparity Assessment Summary

Attachment Details

Document Description:

Attachment Details

Document Description: Projects Accepted Notification part 2

Attachment Details

Document Description: Projects Accepted Notification part 3

Attachment Details

Document Description: CoC Governance & HMIS Policies

Submission Summary

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

Page	Last Updated
1A. Identification	09/13/2019
1B. Engagement	09/23/2019
1C. Coordination	09/26/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/23/2019
1F. DV Bonus	09/26/2019
2A. HMIS Implementation	09/27/2019
2B. PIT Count	09/27/2019
3A. System Performance	09/27/2019
3B. Performance and Strategic Planning	09/27/2019
4A. Mainstream Benefits and Additional Policies	09/26/2019
4B. Attachments	09/26/2019

Submission Summary	No Input Required

2019 HDX Competition Report

PIT Count Data for MO-501 - St.Louis City CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	**1248**	**1336**	**949**	**1031**
Emergency Shelter Total	567	650	561	702
Safe Haven Total	0	0	0	0
Transitional Housing Total	583	544	291	276
Total Sheltered Count	**1150**	**1194**	**852**	**978**
Total Unsheltered Count	**98**	**142**	**97**	**53**

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	**168**	**151**	**95**	**191**
Sheltered Count of Chronically Homeless Persons	132	81	74	184
Unsheltered Count of Chronically Homeless Persons	36	70	21	7

2019 HDX Competition Report

PIT Count Data for MO-501 - St.Louis City CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	**146**	**172**	**112**	**105**
Sheltered Count of Homeless Households with Children	146	172	112	105
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	**124**	**140**	**169**	**136**	**141**
Sheltered Count of Homeless Veterans	99	137	158	132	131
Unsheltered Count of Homeless Veterans	25	3	11	4	10

2019 HDX Competition Report

HIC Data for MO-501 - St.Louis City CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	**532**	**67**	**379**	**81.51%**
Safe Haven (SH) Beds	**0**	**0**	**0**	**NA**
Transitional Housing (TH) Beds	**371**	**96**	**232**	**84.36%**
Rapid Re-Housing (RRH) Beds	**319**	**7**	**312**	**100.00%**
Permanent Supportive Housing (PSH) Beds	**1940**	**0**	**1547**	**79.74%**
Other Permanent Housing (OPH) Beds	**21**	**0**	**0**	**0.00%**
Total Beds	3,183	170	2470	81.98%

2019 HDX Competition Report

HIC Data for MO-501 - St.Louis City CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	119	513	1239	1936

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

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC		21	34	55

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC		65	204	319

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Summary Report for MO-501 - St.Louis City CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

RESUBMITTING FY2018 DATA: If you provided revised FY2018 data, the original FY2018 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

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.

FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	2605	2594	2455	74	73	77	4	41	40	36	-4
1.2 Persons in ES, SH, and TH	3175	3116	2842	129	127	112	-15	63	60	48	-12

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.

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	2562	2499	2417	216	240	315	75	90	95	120	25
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	3218	2993	2766	266	284	340	56	130	130	157	27

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

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.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY 2017	FY 2018	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	0	0	0	0		0	0		0	0		0	
Exit was from ES	168	347	19	19	5%	16	11	3%	15	35	10%	65	19%
Exit was from TH	252	313	9	7	2%	14	11	4%	11	14	4%	32	10%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	535	345	22	10	3%	20	8	2%	34	23	7%	41	12%
TOTAL Returns to Homelessness	955	1005	50	36	4%	50	30	3%	60	72	7%	138	14%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1336	949	-387
Emergency Shelter Total	650	561	-89
Safe Haven Total	0	0	0
Transitional Housing Total	544	291	-253
Total Sheltered Count	1194	852	-342
Unsheltered Count	142	97	-45

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	3242	3160	2905	-255
Emergency Shelter Total	2591	2573	2477	-96
Safe Haven Total	0	0	0	0
Transitional Housing Total	790	725	489	-236

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	842	917	902	-15
Number of adults with increased earned income	50	71	61	-10
Percentage of adults who increased earned income	6%	8%	7%	-1%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	842	917	902	-15
Number of adults with increased non-employment cash income	172	168	138	-30
Percentage of adults who increased non-employment cash income	20%	18%	15%	-3%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	842	917	902	-15
Number of adults with increased total income	214	207	171	-36
Percentage of adults who increased total income	25%	23%	19%	-4%

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	318	304	330	26
Number of adults who exited with increased earned income	72	66	67	1
Percentage of adults who increased earned income	23%	22%	20%	-2%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	318	304	330	26
Number of adults who exited with increased non-employment cash income	69	66	89	23
Percentage of adults who increased non-employment cash income	22%	22%	27%	5%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	318	304	330	26
Number of adults who exited with increased total income	133	124	145	21
Percentage of adults who increased total income	42%	41%	44%	3%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2620	2544	2385	-159
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.	595	564	517	-47
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)	2025	1980	1868	-112

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	3144	3046	3098	52
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.	745	718	729	11
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.)	2399	2328	2369	41

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 FY2018 (Oct 1, 2017 - Sept 30, 2018) 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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	298	286	503	217
Of persons above, those who exited to temporary & some institutional destinations	47	42	110	68
Of the persons above, those who exited to permanent housing destinations	52	54	111	57
% Successful exits	33%	34%	44%	10%

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

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	2753	2582	2447	-135
Of the persons above, those who exited to permanent housing destinations	1121	1011	893	-118
% Successful exits	41%	39%	36%	-3%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	1630	1637	1719	82
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1598	1608	1668	60
% Successful exits/retention	98%	98%	97%	-1%

2019 HDX Competition Report

FY2018 - SysPM Data Quality

MO-501 - St.Louis City CoC

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.

2019 HDX Competition Report

FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	533	650	584	433	667	622	575	308	1349	1396	1764	1885			65	203				
2. Number of HMIS Beds	154	460	436	384	0	533	535	268	40	1116	1417	1595			51	203				
3. HMIS Participation Rate from HIC (%)	28.89	70.77	74.66	88.68	0.00	85.69	93.04	87.01	2.97	79.94	80.33	84.62			78.46	100.00				
4. Unduplicated Persons Served (HMIS)	1984	2320	2587	2486	1097	976	789	542	1788	1716	1765	1892	1071	404	957	1114	0	26	401	742
5. Total Leavers (HMIS)	1677	1954	2197	2109	640	566	532	337	283	310	198	366	774	86	559	560	0	2	276	575
6. Destination of Don't Know, Refused, or Missing (HMIS)	1071	737	715	238	56	23	22	10	6	5	4	9	430	0	5	13	0	0	52	171
7. Destination Error Rate (%)	63.86	37.72	32.54	11.28	8.75	4.06	4.14	2.97	2.12	1.61	2.02	2.46	55.56	0.00	0.89	2.32		0.00	18.84	29.74

2019 HDX Competition Report

Submission and Count Dates for MO-501 - St.Louis City CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/30/2019	

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/22/2019	Yes
2019 HIC Count Submittal Date	4/22/2019	Yes
2018 System PM Submittal Date	5/30/2019	Yes

PUBLIC HOUSING PREFERENCE

ST. LOUIS
HOUSING
AUTHORITY

ACOP

Admissions & Continued Occupancy Policy

July 25, 2019

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consistent with local goals SLHA may skip a family on the waiting list to reach another family in an effort that would further the goals of deconcentration.

6.5 Waiting List Preferences

SLHA has established a preference system for admission to its public housing program. SLHA uses the following local preference system:

- Employed, elderly or disabled
- Enrolled in or recently graduated from a job training or educational program
- Homeless
- Veteran

6.5.1 Employed, Elderly, Disabled, Veteran or Homeless Preference

An applicant qualifies for this preference if the family meets the definitions below. SLHA will only apply the preference points once to each family if the applicant family meets more than one definition under this preference.

6.5.1.1 Employed

An applicant qualifies for this preference if the head of household or spouse, life partner of the applicant family is employed. For the purpose of this preference, an applicant is considered employed if they work at least 20 hours per week.

6.5.1.2 Elderly

An applicant qualifies for this preference if the head of household, spouse or life partner of the applicant family is 62 years old or older.

6.5.1.3 Disabled

An applicant qualifies for this preference if the head of household, spouse, life partner or sole member is a person with disabilities; or two or more adult persons with disabilities living together; or one or more persons with disabilities living with one or more live-in aides. A person who is under a disability, as defined in Section 233 of the Social Security Act (42 U.S.C. 423), or who has a developmental disability as defined in Section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001 (7)). People who are diagnosed with alcoholism or drug abuse are not part of the definition of disabled. SLHA does recognize an applicant, family, or spouse, life partner with HIV as a disabled person.

6.5.1.4 Veteran

An applicant qualifies for this preference if the head of household, spouse or life partner of the applicant is a person who served in the active military, naval, or air service, and who was discharged or released therefrom under conditions other than dishonorable.

6.5.1.5 Homeless

An applicant qualifies for this preference if the head of household, spouse or life partner of the applicant presents evidence to SLHA that the family is homeless by meeting one of the following definitions:

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

        - An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state or local government programs for low-income individuals)
        - An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
        - A primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport or camping ground
    - Unaccompanied youth under 25 years of age or families with children and youth, who do not otherwise qualify as homeless under this definition, but who-
        - Have experienced a long term period, more than 60 days, without living independently in permanent housing; and
        - Have experienced persistent instability as measured by frequent moves, more than two moves in 60 days, over such period; and
        - 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

6.5.2 Enrolled In or Recently Graduated from a Job Training or Educational Program

An applicant qualifies for this preference if the head of household or spouse, life partner of the applicant family is currently enrolled in or within the last 12 months has graduated from a job training or educational program.

SLHA defines a job training program as a learning process with goals and objectives, generally having a variety of components, and taking place in a series of sessions over a period of time. It is designed to lead to a higher level of proficiency and it enhances the individual's ability to obtain employment.

SLHA defines an educational program as a GED program or an institution of higher learning. To qualify, the applicant must be regularly attending a GED program and making progress toward attainment of a GED or they must be taking at least six credit hours at an institution of higher learning.

An applicant remains qualified for the preference if the applicant completed the job training program, obtained a GED or graduated from the institution of higher learning within the past 12 months.

6.6 Order of Selection [24 CFR 960.206(e)]

Families will be selected from the waiting list based on preference. Each preference will receive an allocation of points. If an applicant qualifies for more than one preference, the points for each preference are added together to determine the ranking on the waiting list. Among applicants with

equal preference status, the waiting list ranking is determined by date and time of receipt of the application. Applicants that do not qualify for any preferences will be placed on the waiting list based on time and date of application. Points will be assigned as follows:

Pt. Value Assigned	Criteria
20	Employed, Elderly or Disabled
15	Enrolled in or recently graduated from a job training or educational program
5	Homeless
5	A veteran

When selecting applicants from the waiting list SLHA will match the characteristics of the available unit (unit size, accessibility features, unit type) to the applicants on the waiting lists. SLHA will offer the unit to the highest ranking applicant who qualifies for that unit size or type, or that requires the accessibility features. By matching unit and family characteristics, it is possible that families who have a lower ranking on the site based waiting list may receive an offer of housing ahead of families with an earlier date and time of application or higher preference points. In addition, families may be selected to satisfy deconcentration or income mixing and income targeting requirements. This may also result in families with a lower ranking on the site-based waiting list, receiving an offer of housing ahead of families with an earlier date and time of application or higher preference points.

6.7 Verification of Local Preference

An applicant's entitlement to a local preference will be accepted without verification at the initial application. When the family is selected from the waiting list for the final determination of eligibility, the preference will be verified. Applicants that cannot verify the claimed preferences will be denied the preference placed on the waiting list without the preference points and re-ranked based on the date and time of the application. If, at the time the family applied, the preference claim was the only reason for placement of the family on the list and the family could not verify their eligibility for the preference as of the date of application, the family will be removed from the list. All preferences will be verified in accordance with the verification procedures outlined in Chapter 9.

6.8 Preference Denial

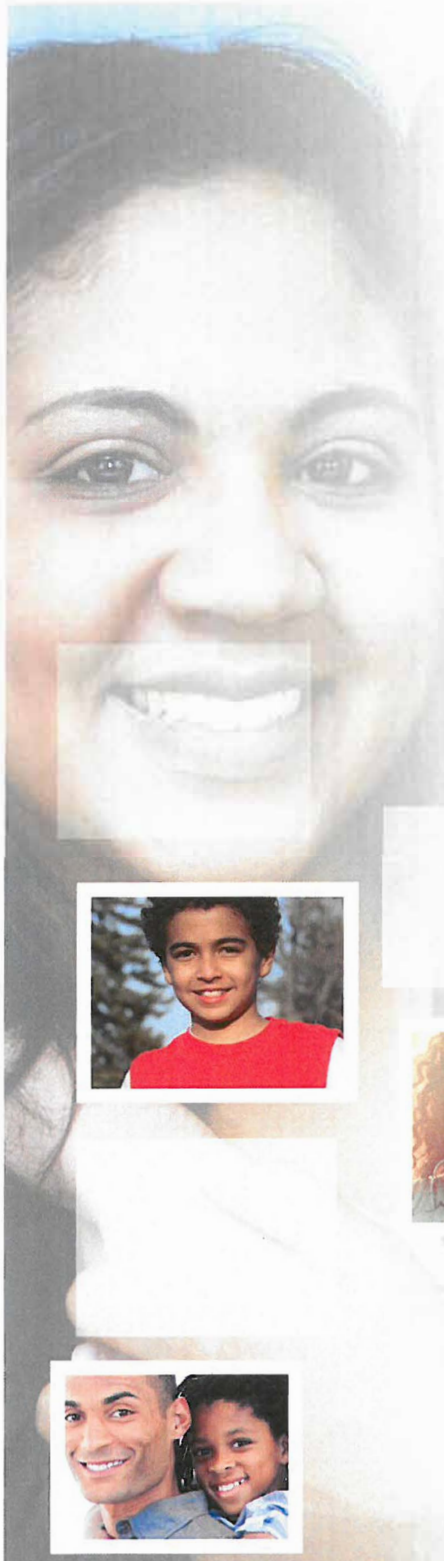
If SLHA denies a preference, SLHA will notify the applicant in writing of the reasons why the preference was denied and the applicant will be placed on the waiting list without benefit of the preference. If the applicant falsifies documents or makes false statements in order to qualify for any preference, they will be removed from the waiting list.

6.9 Notification of Selection

SLHA will notify the family by first class mail when it is selected from the waiting list at least five (5) business days prior to appointment. The notice will inform the family of the following:

- Date, time, and location of the scheduled application interview, including any procedures for rescheduling the interview
- Who is required to attend the interview
- Documents that must be provided at the interview to document the legal identity of household members, including information about what constitutes acceptable documentation

HOUSING CHOICE VOUCHER PREFERENCE



St. Louis Housing Authority

Administrative Plan

Housing Choice Voucher Program

Revision No. 11

Approved: October 25, 2018

St. Louis Housing Authority
3520 Page Boulevard
St. Louis, Missouri 63106

ST. LOUIS
HOUSING
AUTHORITY

A family's decision to apply for, receive or refuse other housing assistance does not affect the family's placement on the HCV waiting list or any preferences for which the family may qualify.

6.4 Waiting List Preferences [24 CFR 982.207]

SLHA has established a preference system for admission to its HCV assistance programs. SLHA uses the following local preference system:

- In-place families in units converted to PBV assistance
- Families who are involuntarily displaced by natural disaster or government action
- Disabled persons or families with a disabled member as defined in this Plan
- Victims of domestic violence
- Families who are homeless in accordance with the definition provided in this Plan
- Non-elderly persons with disabilities transitioning out of an institutional or segregated setting or at serious risk on institutionalization
- At risk of becoming homeless

6.4.1 In-Place Families in Units Converted to PBV Assistance

An applicant qualifies for this preference if the applicant is an eligible family residing in a proposed PBV contract unit on the date the proposal is selected by SLHA, as stated in Section 6.3.2.1.

6.4.2 Families Who Are Involuntarily Displaced By Natural Disaster or Government Action

An applicant qualifies for this preference on the basis of involuntary displacement if either of the following apply:

- The applicant has been involuntarily displaced and is not living in standard permanent replacement housing
    - Standard permanent replacement housing is housing that is decent, safe and sanitary and adequate for the family size, and that the family is occupying pursuant to a lease agreement
- The applicant will be involuntarily displaced within no more than six months from the date of preference status certification or verification

An applicant is or will be involuntarily displaced if the applicant has vacated or will have to vacate the unit where the applicant lives because of one or more of the following:

- An applicant's unit is uninhabitable because of a disaster, such as a fire or flood
- Activities carried on by an agency of the United States or by any state or local governmental body or agency in connection with code enforcement, public improvements or development program
- Displacement to avoid reprisal, such as family cooperating with the police
    - SLHA may only grant this if a law enforcement agency carries out a threat assessment and recommends re-housing the family
- Displacement due to hate crimes when applicants have been victims of a hate crime
    - Hate crime is defined as actual or threatened physical violence that is based on victim's race, color, religion, sex, national origin, handicap or familial status

6.4.3 Disability Preference [24 CFR 982.207]

This preference applies to a person or family whose head, spouse, or sole member is a person with disabilities; or two or more persons with disabilities living together; or one or more persons with disabilities living with one or more live-in aides. A person who is under a disability, as defined in Section 233 of the Social Security Act (42 U.S.C. 423), or who has a developmental disability as defined in Section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001 (7)). People who are diagnosed with alcoholism or drug abuse are not part of the definition of disabled. SLHA does recognize an applicant or family or spouse of household with HIV as a disabled person (Adopted in Board Resolution).

6.4.4 Victims of Domestic Violence

To qualify for this preference, an applicant must present evidence that the family has been displaced as a result of fleeing violence in the home. Families are also eligible for this preference if there is proof that the family is currently living in a situation where they are being subjected to or victimized by violence in the home. Suitable evidence can be provided from law enforcement officials or social service agencies that have adequate knowledge of the family's living situation.

6.4.5 Homeless

To qualify for this preference, an applicant must present evidence to SLHA that the family is homeless by meeting one of the following definitions:

- An individual or family who lacks a fixed, regular and adequate nighttime residence meaning:
  - An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state or local government programs for low-income individuals)
  - An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution
  - A primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport or camping ground
- Unaccompanied youth under 25 years of age or families with children and youth, who do not otherwise qualify as homeless under this definition, but who-
  - Have experienced a long term period, more than 60 days, without living independently in permanent housing; and
  - Have experienced persistent instability as measured by frequent moves, more than two moves in 60 days, over such period; and
  - 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

6.4.6 Non-elderly Persons with Disabilities Transitioning Out of an Institutional or Other Segregated Setting or at Serious Risk of Institutionalization

To qualify for this preference, an applicant must present evidence to SLHA that a non-elderly family member with disabilities is transitioning out of an institutional or other segregated setting or at serious risk on institutionalization by meeting the following definitions:

- Institutional or other segregated setting include, but are not limited to:
  - congregate settings populated exclusively or primarily with individuals with disabilities;
  - congregate settings characterized by regimentation in daily activities, lack of privacy or autonomy, policies limiting visitors, or limits on individuals' ability to engage freely in community activities and to manage their own activities of daily living; or
  - settings that provide for daytime activities primarily with other individuals with disabilities.
- At serious risk of institutionalization: Includes an individual with a disability who as a result of a public entity's failure to provide community services or its cut to such services will likely cause a decline in health, safety, or welfare that would lead to the individual's eventual placement in an institution. This includes individuals experiencing lack of access to supportive services for independent living, long waiting lists for or lack of access to housing combined with community-based services, individuals currently living under poor housing conditions or homeless with barriers to geographic mobility, and/or currently living alone, but requiring supportive services for independent living. A person cannot be considered at serious risk of institutionalization unless the person has a disability. An individual may be designated as at serious risk of institutionalization either by a health and human services agency, by a community-based organization, or be self-identification.

6.4.7 At Risk of Becoming Homeless

To qualify for this preference, an applicant must present evidence to SLHA that the family is at risk of becoming homeless by meeting one of the following definitions:

- An individual or family who:
  - Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to emergency shelter or another place described in the "Homeless" definition; and
  - Meets one of the following condition:
    - Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance
    - Is living in the home of another because of economic hardship
    - Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance
    - Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, state or local government programs for low-income individuals

- Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau
- Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution)
- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness

6.5 Verification of Local Preference [24 CFR 5.415]

An applicant's entitlement to a local preference will be accepted without verification at the initial application. When the family is selected from the waiting list for the final determination of eligibility, the preference will be verified. Applicants that cannot certify to the preferences will lose their position on the waiting list. If an applicant cannot certify to this information or does not meet the criteria for receiving a preference, SLHA shall provide a written notice of determination which will contain the reason of the determination and the applicant's right to appeal the decision. If, at the time the family applied, the preference claim was the only reason for placement of the family on the list and the family could not verify their eligibility for the preference as of the date of application, the family will be removed from the list. All preferences will be verified in accordance with the verification procedures outlined in Chapter 9.

6.6 Preference Denial [24 CFR 5.415]

If SLHA denies a preference, SLHA will notify the applicant in writing that the preference was denied. Once the preference has been denied, the applicant will be placed on the waiting list without benefit of the preference.

If the applicant falsifies documents or makes false statements in order to qualify for any preference, they will be removed from the waiting list.

6.7 Change in Circumstances

Changes in an applicant's circumstances while on the waiting list may affect the family's entitlement to a preference. Applicants are required to notify SLHA in writing when their circumstances change. When an applicant claims an additional preference, they will be placed on the waiting list in the appropriate order determined by the newly-claimed preference. The exception to this is, if at the time the family applied, the waiting list was only open to families who claimed that preference. In such case, the applicant must verify that they were eligible for the first preference before they are returned to the waiting list with the new preference.

If the family's verified annual income at final eligibility determination does not fall under the extremely low-income limit and the family was selected for income targeting purposes before family(ies) with a higher preference, the family will be returned to the waiting list. In addition, while the family is on the waiting list, the family must immediately inform SLHA of changes in contact information, including current residence, mailing address and phone number. The changes must be submitted in writing.

6.8 Order of Selection [24 CFR 982.207(e)]

SLHA will select applicants from the waiting list by using a ranking preference system. Each preference will receive an allocation of points. If an applicant qualifies for more than one preference, the points for each preference are added together to determine the ranking on the waiting list.
Among applicants with equal preference status, the waiting list ranking is determined by date and time of receipt of the application. Applicants that do not qualify for any preferences will be placed on the waiting list based on time and date of application. Points will be assigned as follows:

Pt. Value Assigned	Criteria
80	In-place families in units converted to PBV assistance
40	Involuntarily displaced by natural disaster or government action
15	Victims of domestic violence
10	Disabled head of household, spouse or co-head
10	Homeless
10	Non-elderly persons with disabilities transitioning out of an institutional or other segregated setting or at serious risk of institutionalization
5	At risk of becoming homeless

6.9 Income Targeting

Each fiscal year SLHA will reserve a minimum of 75 percent of its HCV tenant-based new admissions for extremely low-income families (See Section 8.4 for definition). SLHA will admit families who qualify under the extremely low-income limit to meet the income targeting requirement, to the extent possible given the income demographics of applicants to the program. A higher or lower percent of new admissions will be allowed if HUD determines a higher or lower percent is necessary because of unusually high or low family incomes. SLHA will monitor new admissions' incomes to determine if a request to HUD to change the percentage is warranted.

Additionally, SLHA will reserve a minimum of not less than 40 percent of its HCV project based admissions for extremely low-income families. A higher or lower percent of new admissions will be allowed if HUD determines a higher or lower percent is necessary because of unusually high or low family incomes. SLHA will monitor new admissions' incomes to determine if a request to HUD to change the percentage is warranted.

The income targeting requirement does not apply where SLHA is providing assistance to low income or moderate income families entitled to preservation assistance under the tenant based program as a result of a mortgage prepayment or opt-out.

SLHA shall have the discretion, at least annually, to exercise the fungibility provision of the requirement. This provision allows SLHA to admit less than the minimum 40 percent of its extremely low-income families in a fiscal year to its public housing program to the extent that admission of extremely low income families in the tenant based assistance program exceeds 75 percent of all admissions during the fiscal year. If exercising this option, SLHA will follow the fungibility threshold limitations.

Vulnerability Index -

Service Prioritization Decision Assistance Tool

(VI-SPDAT)

Prescreen Triage Tool for Single Adults

AMERICAN VERSION 2.01

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COMMUNITY SOLUTIONS

ORG CODE

Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

Current versions available:

- VI-SPDAT V 2.0 for Individuals
- VI-SPDAT V 2.0 for Families
- VI-SPDAT V 1.0 for Youth

All versions are available online at

www.orgcode.com/products/vi-spdat/

SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

Current versions available:

- SPDAT V 4.0 for Individuals
- SPDAT V 2.0 for Families
- SPDAT V 1.0 for Youth

Information about all versions is available online at

www.orgcode.com/products/spdat/

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1 (800) 355-0420 info@orgcode.com www.orgcode.com

SPDAT Training Series

To use the SPDAT, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

The training gives you the manual, case studies, application to current practice, a review of each component of the tool, conversation guidance with prospective clients – and more!

Current SPDAT training available:

- Level 0 SPDAT Training: VI-SPDAT for Frontline Workers
- Level 1 SPDAT Training: SPDAT for Frontline Workers
- Level 2 SPDAT Training: SPDAT for Supervisors
- Level 3 SPDAT Training: SPDAT for Trainers

Other related training available:

- Excellence in Housing-Based Case Management
- Coordinated Access & Common Assessment
- Motivational Interviewing
- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

http://www.orgcode.com/product-category/training/spdat/

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Administration

Interviewer's Name	**Agency**	☐ Team ☐ Staff ☐ Volunteer
_____	_____	
Survey Date	**Survey Time**	**Survey Location**
DD/MM/YYYY ____/____/_____	__ __ __ __	_____

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

First Name	**Nickname**	**Last Name**
_____	_____	_____

In what language do you feel best able to express yourself? _____

Date of Birth	**Age**	**Social Security Number**	**Consent to participate**	
DD/MM/YYYY ____/____/_____	_____	_____	☐ Yes	☐ No

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

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A. History of Housing and Homelessness

1. Where do you sleep most frequently? (check one)

☐ Shelters
☐ Transitional Housing
☐ Safe Haven
☐ **Outdoors**
☐ **Other (specify):** _____
☐ **Refused**

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

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.**	**SCORE:**

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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

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES.** **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

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION.** **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

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

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR **MONEY MANAGEMENT.** **SCORE:**

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

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY.** **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

IF "NO," THEN SCORE 1 FOR **SELF-CARE.** **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

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS.** **SCORE:**

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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.** **SCORE:**

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.** **SCORE:**

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.** **SCORE:**

IF THE RESPONENT SCORED 1 FOR **PHYSICAL HEALTH** AND 1 FOR **SUBSTANCE USE** AND 1 FOR **MENTAL HEALTH**, SCORE 1 FOR **TRI-MORBIDITY**. **SCORE:**

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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

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	/1	**Score: Recommendation:**
A. HISTORY OF HOUSING & HOMELESSNESS	/2	0-3: no housing intervention
B. RISKS	/4	4-7: an assessment for Rapid Re-Housing
C. SOCIALIZATION & DAILY FUNCTIONS	/4	8+: an assessment for Permanent Supportive Housing/Housing First
D. WELLNESS	/6	
GRAND TOTAL:	/17	

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

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

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Appendix A: About the VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using "gut instincts" in lieu of solid evidence. Communities need practical, evidence-informed tools that enhance their ability to to satisfy federal regulations and quickly implement an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

Version 2

Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

You will notice some differences in Version 2 compared to Version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

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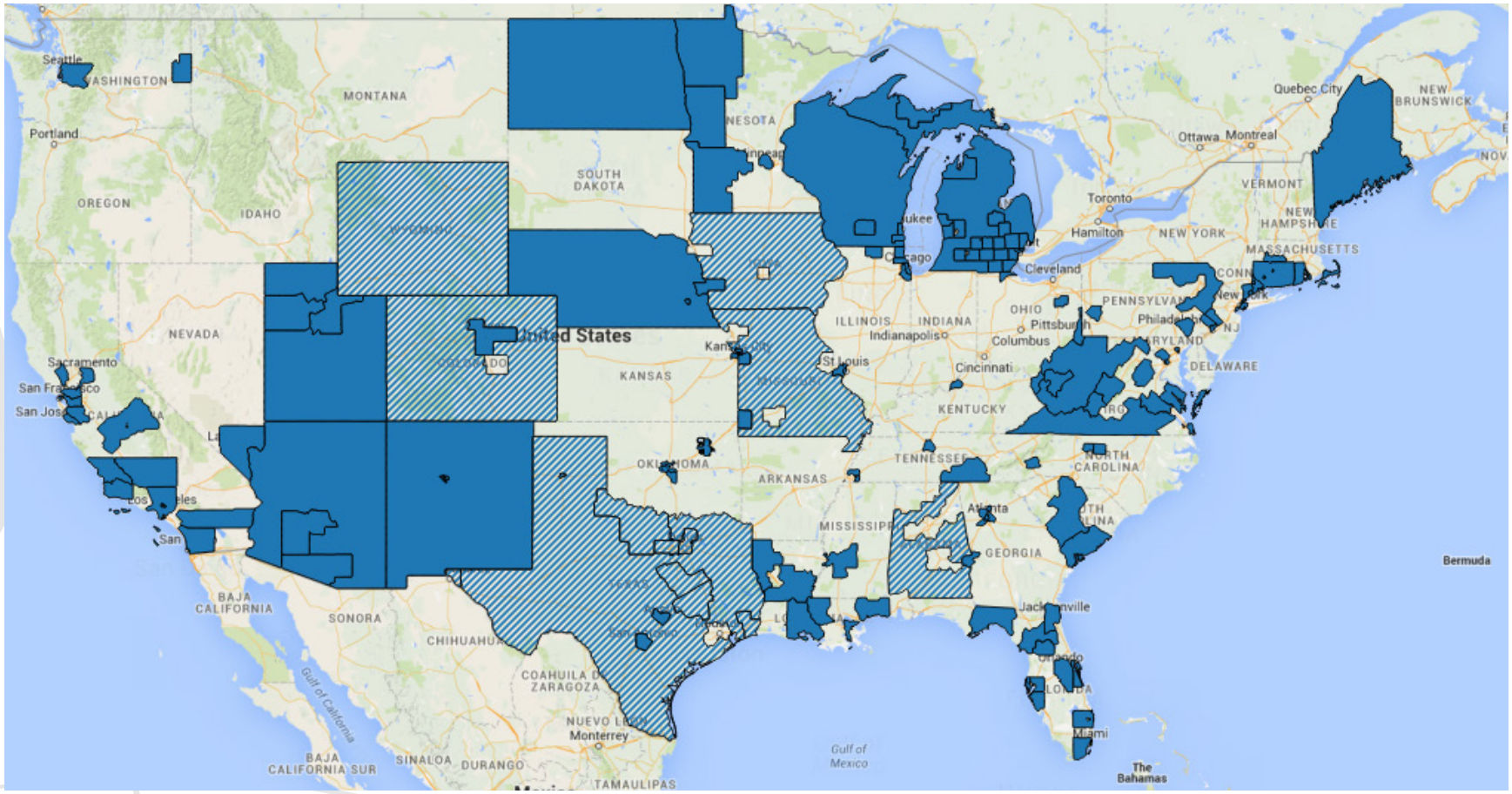
1 (800) 355-0420 info@orgcode.com www.orgcode.com

Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.



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A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

Alabama
- Parts of Alabama Balance of State

Arizona
- Statewide

California
- San Jose/Santa Clara City & County
- San Francisco
- Oakland/Alameda County
- Sacramento City & County
- Richmond/Contra Costa County
- Watsonville/Santa Cruz City & County
- Fresno/Madera County
- Napa City & County
- Los Angeles City & County
- San Diego
- Santa Maria/Santa Barbara County
- Bakersfield/Kern County
- Pasadena
- Riverside City & County
- Glendale
- San Luis Obispo County

Colorado
- Metropolitan Denver Homeless Initiative
- Parts of Colorado Balance of State

Connecticut
- Hartford
- Bridgeport/Stratford/Fairfield
- Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- City of Waterbury

District of Columbia
- District of Columbia

Florida
- Sarasota/Bradenton/Manatee, Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/Largo/Pinellas County
- Tallahassee/Leon County
- Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

Georgia
- Atlanta County
- Fulton County
- Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

Hawaii
- Honolulu

Illinois
- Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/Lake County
- Chicago
- Cook County

Iowa
- Parts of Iowa Balance of State

Kansas
- Kansas City/Wyandotte County

Kentucky
- Louisville/Jefferson County

Louisiana
- Lafayette/Acadiana
- Shreveport/Bossier/Northwest
- New Orleans/Jefferson Parish
- Baton Rouge
- Alexandria/Central Louisiana CoC

Massachusetts
- Cape Cod Islands
- Springfield/Holyoke/Chicopee/Westfield/Hampden County

Maryland
- Baltimore City
- Montgomery County

Maine
- Statewide

Michigan
- Statewide

Minnesota
- Minneapolis/Hennepin County
- Northwest Minnesota
- Moorhead/West Central Minnesota
- Southwest Minnesota

Missouri
- St. Louis County
- St. Louis City
- Joplin/Jasper, Newton Counties
- Kansas City/Independence/Lee's Summit/Jackson County
- Parts of Missouri Balance of State

Mississippi
- Jackson/Rankin, Madison Counties
- Gulf Port/Gulf Coast Regional

North Carolina
- Winston Salem/Forsyth County
- Asheville/Buncombe County
- Greensboro/High Point

North Dakota
- Statewide

Nebraska
- Statewide

New Mexico
- Statewide

Nevada
- Las Vegas/Clark County

New York
- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

Ohio
- Toledo/Lucas County
- Canton/Massillon/Alliance/Stark County

Oklahoma
- Tulsa City & County/Broken Arrow
- Oklahoma City
- Norman/Cleveland County

Pennsylvania
- Philadelphia
- Lower Marion/Norristown/Abington/Montgomery County
- Allentown/Northeast Pennsylvania
- Lancaster City & County
- Bristol/Bensalem/Bucks County
- Pittsburgh/McKeesport/Penn Hills/Allegheny County

Rhode Island
- Statewide

South Carolina
- Charleston/Low Country
- Columbia/Midlands

Tennessee
- Chattanooga/Southeast Tennessee
- Memphis/Shelby County
- Nashville/Davidson County

Texas
- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- Wichita Falls/Wise, Palo Pinto, Wichita, Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South East Texas

Utah
- Statewide

Virginia
- Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- Virginia Beach
- Portsmouth
- Virginia Balance of State
- Arlington County

Washington
- Seattle/King County
- Spokane City & County

Wisconsin
- Statewide

West Virginia
- Statewide

Wyoming
- Wyoming Statewide is in the process of implementing

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Bickford, Amy <bickforda@stlouis-mo.gov>

FY2019 St. Louis CoC funding notices

7 messages

Jane Oliphant <JOliphant@slha.org> Wed, Sep 11, 2019 at 5:06 PM
To: "Bickford, Amy" <bickforda@stlouis-mo.gov>, "Heil, Jamie" <heilj@stlouis-mo.gov>

Amy and Jamie,

These official notices of funding recommendations went out today.

Please let me know if you have any questions/concerns.

Best,

Janie

Janie Oliphant
Program Director
Mobility Connection

Ascend STL, Inc.

314.438.7859
ascendstl.org

34 attachments

- **DHS.pdf** 151K
- **Doorways Expansion.pdf** 178K
- **Employment Connection.pdf** 179K
- **Horizon West.pdf** 179K
- **SPC Coordinated Entry.pdf** 179K
- **Women's Safe House Stacey Krieg.pdf** 178K
- **Center for Women in Transition Laura Toledo.pdf** 179K
- **Covenant House Meloney Jones-White.pdf** 179K

Homefull Tina Patterson.pdf
176K

Youth in Need Josh Jennemann.pdf
176K

YWCA nicole hughes.pdf
176K

DePaul Suzanne Kenyon.pdf
411K

DMH SCL.pdf
412K

DMH SCQ.pdf
412K

DMH SCS.pdf
412K

DMH SCY.pdf
422K

DMH SZP.pdf
412K

DMH SZS.pdf
422K

Doorways Delmar.pdf
411K

Doorways jumpstart.pdf
411K

Doorways Maryland.pdf
411K

Gateway renewal Kathy Conners.pdf
412K

Horizon Housing Regina Cavanaugh.pdf
411K

ICA.pdf
175K

Places for People Felicia Spratt.pdf
412K

Queen of Peace.pdf
412K

SPC home again Jess Cox.pdf
422K

SPC project live Beverly Austin.pdf
411K

SPC project protect Jonathan Belcher.pdf
412K

SPC Rosati Jonathan Belcher.pdf
412K

YWCA renewal Nicole Hughes.pdf
423K

Covenant House Julie Treece.pdf
412K

DePaul Gretchen Shipp.pdf

411K

DePaul Project Plus Rich LaPlume.pdf
396K

Heil, Jamie <heilj@stlouis-mo.gov> Thu, Sep 12, 2019 at 4:13 PM
To: Jane Oliphant <JOliphant@slha.org>
Cc: "Bickford, Amy" <bickforda@stlouis-mo.gov>

Janie,

Could you send the revised priority listing? Wasn't CE & HMIS moved?

Thanks,
Jamie
[Quoted text hidden]
--
Jamie Heil
Secretary II
City of St. Louis Department of Human Services
Homeless Services Division
1520 Market Street, Room 4062
St. Louis, MO 63103
314-657-1704
heilj@stlouis-mo.gov

Jane Oliphant <JOliphant@slha.org> Thu, Sep 12, 2019 at 4:15 PM
To: "Heil, Jamie" <heilj@stlouis-mo.gov>
Cc: "Bickford, Amy" <bickforda@stlouis-mo.gov>

CE and HMIS were moved back down to the bottom of tier 1. Please see attached.

[Quoted text hidden]

Final FY19 Rank PSA & board approved 2019-09-05.pdf
25K

Bickford, Amy <bickforda@stlouis-mo.gov> Thu, Sep 12, 2019 at 4:26 PM
To: Jane Oliphant <JOliphant@slha.org>
Cc: "Heil, Jamie" <heilj@stlouis-mo.gov>

Thanks Janie!! Amy

Amy Bickford, MPA
Chief Program Manager
City of St. Louis Dept of Human Services
Homeless Services Division
1520 Market St | St. Louis, MO 63103
314.657.1718 office | 314.612.5939 fax

[Quoted text hidden]

Jane Oliphant <JOliphant@slha.org> Thu, Sep 12, 2019 at 4:27 PM
To: "Bickford, Amy" <bickforda@stlouis-mo.gov>

Of course! Missed you at the board meeting. Hope you had fun with the Mayor ;)

[Quoted text hidden]

Bickford, Amy <bickforda@stlouis-mo.gov> Thu, Sep 12, 2019 at 4:28 PM
To: Jane Oliphant <JOliphant@slha.org>

Sounds like it was an interesting meeting...wish I'd been there...instead I was being insulted by New Life folks...Oh well, such is the life of a City worker, Amy

Amy Bickford, MPA
Chief Program Manager
City of St. Louis Dept of Human Services
Homeless Services Division
1520 Market St | St. Louis, MO 63103
314.657.1718 office | 314.612.5939 fax

[Quoted text hidden]

Jane Oliphant <JOliphant@slha.org> Thu, Sep 12, 2019 at 4:31 PM
To: "Bickford, Amy" <bickforda@stlouis-mo.gov>

FUN! Hope your evening proves to be better.

janie

[Quoted text hidden]

Saint Louis City
Continuum of Care
Making moves that #endhomelessness

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Taylor McCabe

HMIS
Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

Rich LaPlume
St. Louis Director
DePaul USA
2904 Arsenal Street
St. Louis, MO 63116

RE: FY2019 CoC Funding Application

Dear Rich LaPlume,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for DePaul project Plus was accepted and scored in tier 1. The program ranked 1 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Attachment

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11 September 2019

Judy Johnson
Affordable Housing Consultant
Missouri Department of Mental Health
1706 E. Elm
Jefferson City, MO 65102

RE: FY2019 CoC Funding Application

Dear Judy Johnson,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for DMH - SCY was accepted and scored in tier 1. The program ranked 2 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

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Sincerely,

Janie Oliphant
Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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11 September 2019

Judy Johnson
Affordable Housing Consultant
Missouri Department of Mental Health
1706 E. Elm
Jefferson City, MO 65102

RE: FY2019 CoC Funding Application

Dear Judy Johnson,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for DMH - SCL was accepted and scored in tier 1. The program ranked 3 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

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Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Suzanne Kenyon
Director, Project MORE
DePaul USA
2904 Arsenal Street
St. Louis, MO 63116

RE: FY2019 CoC Funding Application

Dear Suzanne Kenyon,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Depaul Project More was accepted and scored in tier 1. The program ranked 4 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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11 September 2019

Gretchen Shipp
Director, St. Lazare House
DePaul USA
2904 Arsenal Street
St. Louis, MO 63116

RE: FY2019 CoC Funding Application

Dear Gretchen Shipp,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Depaul Lazare was accepted and scored in tier 1. The program ranked 5 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Judy Johnson
Affordable Housing Consultant
Missouri Department of Mental Health
1706 E. Elm
Jefferson City, MO 65102

RE: FY2019 CoC Funding Application

Dear Judy Johnson,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for DMH - SCS was accepted and scored in tier 1. The program ranked 6 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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11 September 2019

Judy Johnson
Affordable Housing Consultant
Missouri Department of Mental Health
1706 E. Elm
Jefferson City, MO 65102

RE: FY2019 CoC Funding Application

Dear Judy Johnson,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for DMH - SZS was accepted and scored in tier 1. The program ranked 7 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Attachment

Saint Louis City Continuum of Care
Making moves that #endhomelessness

CoC Board of Directors

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City of St. Louis
Amy Bickford * *ex-officio*

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Governance & Membership
Laura Toledo

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Kim Warden

Program Performance
Janie Oliphant

Service Delivery
Taylor McCabe

HMIS
Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

David Kessel
Executive Vice President
Employment Connection
2838 market Street
St. Louis, MO 63103

RE: FY2019 CoC Funding

Dear David Kessel,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Employment Connection's application, Coordinated Entery Supportive Services, submitted for Coordinated Entry, was received and reviewed. After careful consideration, we did not choose your proposal for inclusion in the FY2019 HUD CoC Competition application. Between the Employment Connection proposal and the other applicate the committee chose, Employment Connection scored lower on the scoring tool and was more expensive than the competing proposal.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Saint Louis City Continuum of Care
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CE
Pat Plumley

11 September 2019

Amy Bickford
Chief Program Officer
City of St. Louis, Department of Human Services
1520 market Street
St. Louis, MO 63103

RE: FY2019 CoC Funding

Dear Amy Bickford,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

DHS's application, Project Navigate submitted for Coordinated Entry, was received and reviewed. After some deliberation, the committee presented the application to the board for further scrutiny given that DHS's involvement in the preparation of the RFP and monitoring of projects presented inherent advantages and conflicts of interests. Therefore, the application was rejected and not scored with the rest of the applications.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Saint Louis City Continuum of Care

Making moves that #endhomelessness

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CE
Pat Plumley

11 September 2019

Meloney Jones-White
Covenant House Missouri
2727 N Kingshighway
St. Louis, MO 63113

RE: FY2019 CoC Funding

Dear Meloney Jones-White,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Covenant House Missouri's application, Expanding Services to Reverse Homelessness for Youth submitted for bonus PSH/reallocated funds, was received and reviewed. After careful consideration, we did not choose to include your proposal in the FY2019 HUD CoC Competition application. As discussed previously, Covenant House originally applied for an expansion of your Transitional Housing Project, which unfortunately was not permitted according the NOFA. According to Covenant House's request, the committee instead considered the proposal as a new TH-RRH project, however it did not score well because of the limited information provided.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant
Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

Nicole Hughes
Director of Program Operations
YWCA Metro St. Louis
3820 West Pine Blvd
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

Dear Nicole Hughes,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for YWCA PSH was accepted and scored in tier 1. The program ranked 18 out of 31 for both renewal and new projects. Your proposal was recommended to receive 82.35% of renewal funding. As discussed with your agency previously, a portion of the project's funding was reallocated because it met two of the criteria for reallocation: underspending by 10% or more and overall low performance compared to other projects.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Attachment

YWCA PSH	Score achieved
A-1 Required Documentation (out of 10)	10
B-2 Alignment with Priority Populations (out of 18)	9
B-3 Entries with a CE referral (out of 18)	18
B-4 WHMM participation (out of 10)	5
B-5 Housing First principles (out of 25)	25
C-6 Housing Performance (out of 25)	25
C-7 Income Performance (out of 25)	12
C-8 Bed Rate Utilization (out of 20)	20
D-9 Reasonable expenditure (out of 35 points)	0
E-10 Decision maker attendance (out of 4)	0
E-11 Active Committee member (out of 2)	2
E-12 Leadership Role (out of 4)	0
E-13 HMIS Data Quality (out of 15)	15
E-14 Contract Compliance (out of 10)	10
E-15 Fiscal Compliance (out of 10)	10
E-16 PIT participation (out of 2)	0
Total	161
Test Q- 17 HMIS data entry timeliness (out of 5)	5
Test Q- 18 cost effectiveness (out of 20)	0

Please reference your application for comparison to final scores.

Saint Louis City Continuum of Care

Making moves that #endhomelessness

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Taylor McCabe

HMIS
Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

Nancy Yohe
Chief Program Officer
St. Patrick Center
800 N. Tucker
St. Louis, MO 63101

RE: FY2019 CoC Funding

Dear Nancy Yohe,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

St. Patrick Center's application, SPC Coordinated Entry (new) submitted for Coordinated Entry, was received and reviewed. After careful consideration, we recommended that St. Patrick Center receive 82.96% (or $452,187) of the requested funding to create SPC Coordinated Entry (new). Your project was placed in Tier 1. St. Patrick Center scored higher than the other projects reviewed, however the committee needed to meet the tier 1 fund cap amount, so the full funding request was not recommended. Per the Rank and Review Policy, the Coordinated Entry project was placed towards the bottom of Tier 1.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Rosalie Seiler
Director of Housing and Community Services
Queen of Peace Center
325 N Newstead
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

Dear Rosalie Seiler,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for QoP Our Lady of Perpetual Help was accepted and scored in tier 2. The program ranked 28 out of 31 for both renewal and new projects. Your proposal was recommended to receive 86.40% of renewal funding. As discussed with your agency previously, a portion of the project's funding was reallocated because it met two of the criteria for reallocation: underspending by 10% or more and overall low performance compared to other projects.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,
Janie Oliphant
Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Attachment

QoP Our Lady of Perpetual Help	Score achieved
A-1 Required Documentation (out of 10)	0
B-2 Alignment with Priority Populations (out of 18)	12
B-3 Entries with a CE referral (out of 18)	18
B-4 WHMM participation (out of 10)	10
B-5 Housing First principles (out of 25)	25
C-6 Housing Performance (out of 25)	25
C-7 Income Performance (out of 25)	0
C-8 Bed Rate Utilization (out of 20)	20
D-9 Reasonable expenditure (out of 35 points)	0
E-10 Decision maker attendance (out of 4)	0
E-11 Active Committee member (out of 2)	2
E-12 Leadership Role (out of 4)	0
E-13 HMIS Data Quality (out of 15)	15
E-14 Contract Compliance (out of 10)	10
E-15 Fiscal Compliance (out of 10)	10
E-16 PIT participation (out of 2)	2
Total	149
Test Q- 17 HMIS data entry timeliness (out of 5)	0
Test Q- 18 cost effectiveness (out of 20)	0

Please reference your application for comparison to final scores.

Saint Louis City Continuum of Care
Making moves that #endhomelessness

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Cynthia Duffe

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Virginia Shelton

City of St. Louis
Amy Bickford * *ex-officio*

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Program Performance
Janie Oliphant

Service Delivery
Taylor McCabe

HMIS
Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

Laura Toledo
Executive Director
Center for Women in Transition
7716 S. Broadway
St. Louis, MO 63111

RE: FY2019 CoC Funding

Dear Laura Toledo,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Center for Women in Transition's application, CWIT Housing For Success submitted for bonus PSH/reallocated funds, was received and reviewed. After careful consideration, we recommended that Center for Women in Transition receive 25.67% of the requested funding to create CWIT Housing For Success. Your project was placed in Tier 2. While the project scored very high on the committee's scoring tool, it was prohibitively expensive to fully fund and did not leverage the same percentage of dollars compared to another new project.

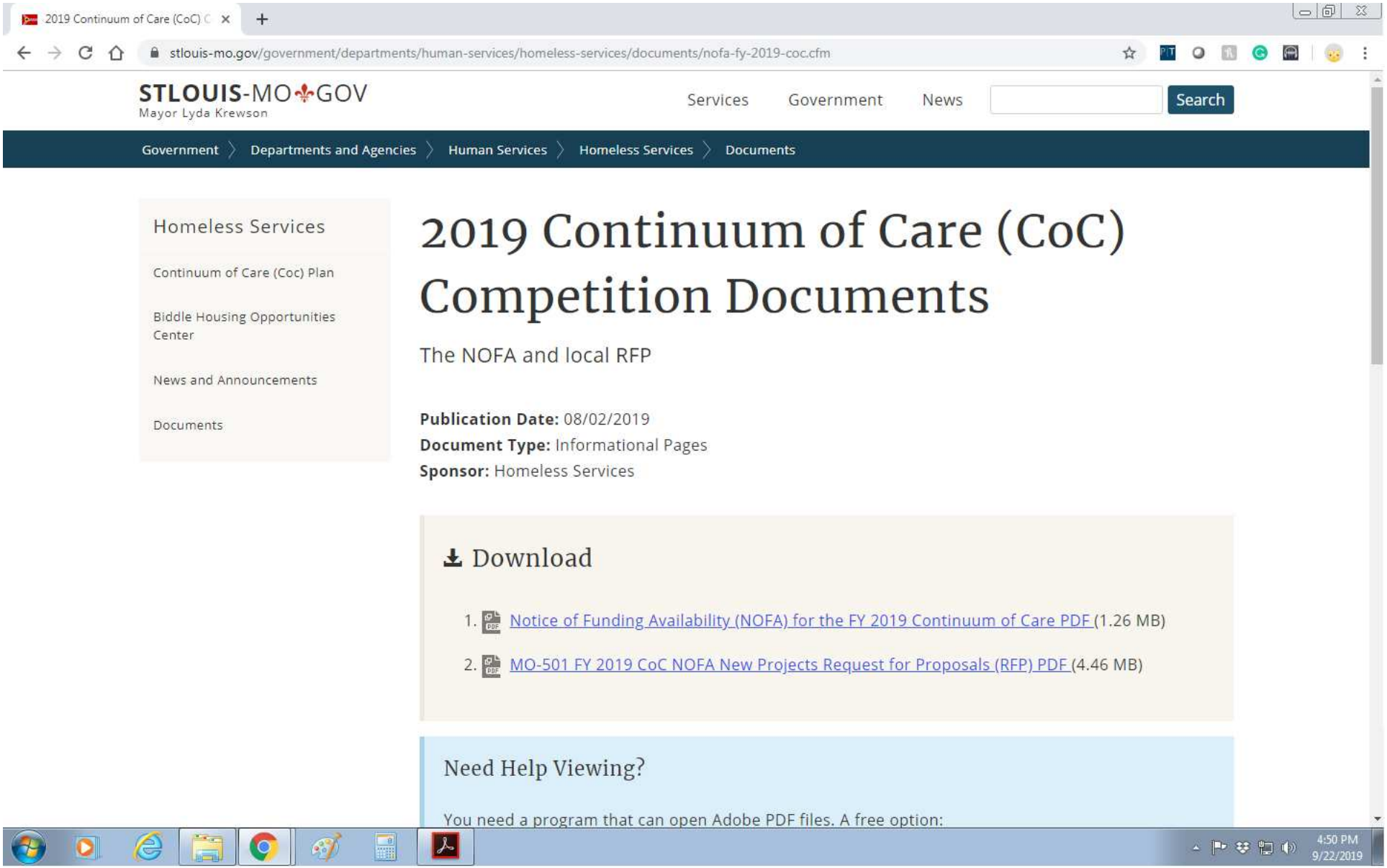
If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care


2019 Continuum of Care (CoC) C
stlouis-mo.gov/government/departments/human-services/homeless-services/documents/nofa-fy-2019-coc.cfm
STLOUIS-MO GOV
Mayor Lyda Krewson
Services
Government
News
Search
Government
Departments and Agencies
Human Services
Homeless Services
Documents
Homeless Services
Continuum of Care (Coc) Plan
Biddle Housing Opportunities Center
News and Announcements
Documents
2019 Continuum of Care (CoC) Competition Documents
The NOFA and local RFP
Publication Date: 08/02/2019
Document Type: Informational Pages
Sponsor: Homeless Services
Download
1. Notice of Funding Availability (NOFA) for the FY 2019 Continuum of Care PDF (1.26 MB)
2. MO-501 FY 2019 CoC NOFA New Projects Request for Proposals (RFP) PDF (4.46 MB)
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You need a program that can open Adobe PDF files. A free option:
4:50 PM
9/22/2019

PUBLIC NOTICE

Conditional Use Hearing will be held in Room 208 City Hall at 8:30 a.m. on **Thursday, August 29, 2019.**

4024 Camellia - #AHO-4175-19- LaKisha Lee Home Daycare (Home Daycare/6 Children) "B-"-Two Family Dwelling District. Dm **Ward 21**

1412 Bremen - #AHO-4183-19- Shirley Smith Daycare Provider (Home Daycare/6 Children) "B"- Two Family Dwelling District. Sab Ward 3

1399 Blackstone - #AHO-4189-19- Belinda's Home Daycare (Home Daycare/4 Children) "B"- Two Family Dwelling District. Dm **Ward 22**

5956 Tara Lane - #AHO-4203-19- Nina Cosey Home Daycare (Home Daycare/8 Children) "A"-Single Family Dwelling District. Dm **Ward 27**

6412 Winona - #AHO-4207-19- Frisella Electrical Services (Construction/Contracting/Office Use Only) "B"-Two Family Dwelling District. Dm **Ward 16**

3459 Chippewa - #AOP-4071-19- Infinity Blue Lounge (Full Drink Bar/Restaurant/Front Patio Seating) "F"-Neighborhood Commercial District. Dm **Ward 20**

4010 Gravois - #AOP-4142-19- Abdalla Store (Convenience Store/Check Cashing) "G"-Local Commercial and Office District. Sk **Ward 15**

2023 E. Grand - #AB-550230-19- Borroum Management, LLC (Int Alt per plans for Convenience Store) "F"-Neighborhood Commercial District. Dm **Ward 3**

REQUEST FOR PROPOSALS (RFP)

The Department of Personnel of the City of St. Louis is seeking attorneys in good standing with the Missouri Bar who have experience in the area of employment law. Attorneys must not be delinquent in taxes owed to the City of St. Louis.

A copy of the Request for Proposal can be obtained by calling (314) 622-3403 or reviewed on the City's Website at www.stlouis-mo.gov and link to "RFQ's, RFP's and Bids".

Responses to the RFP must be submitted no later than **5:00 P.M.** on **Monday, August 19, 2019.**

PUBLIC NOTICE

The Department of Public Safety will hold a Public Hearing on the Fiscal Year 2019 Edward Byrne Memorial Justice Assistance Grant application on **Thursday, August 15, 2019** at 10:00 a.m. in Room 401, City Hall, 1200 Market Street, St. Louis, MO 63103.

Copies of the application are available for review in Room 401, City Hall.

SOLICITATION FOR PROPOSALS (SFP)

CITY OF ST. LOUIS
DEPARTMENT OF HUMAN SERVICES

The City of St. Louis Department of Human Services is soliciting **Proposals for the FY2019 Continuum of Care (CoC) – Annual NOFA Competition for New Projects**. There are a variety of permanent housing project types available under this RFP. There is also an opportunity for Coordinated Entry projects.

Beginning **August 2, 2019,** RFP packets will be available via pick-up at:

Department of Human Services
Homeless Services Division
1520 Market, Room 4065
St. Louis, MO 63103

Or at the following website: https://www.stlouis-mo.gov/government/procurement/

A Bidder's Conference regarding this RFP was held on August 12, 2019 at 1:00 p.m. at the Office of the Department of Human Services, City of St. Louis, 1520 Market Street, Room 3005, Comptroller's Office: Conference Room A, St. Louis, MO 63103.

Questions may be referred **by email only** and must be submitted on or before **August 16, 2019**, to Amy Bickford, Chief Program Manager, at bickforda@stlouis-mo.gov.

All responses to the RFP shall be addressed and returned in sealed envelopes or containers to the above address.

The RFP closing date is 4:00 p.m. Monday, August 26, 2019.

DEPARTMENT OF PERSONNEL

NOTICE OF EXAMINATIONS

The City of St. Louis, Department of Personnel at 1114 Market Street, Room 700, announces competitive Civil Service examinations to fill vacancies in the Municipal Service.

The last date for filing an application for the following examination is **AUGUST 23, 2019.**

ATTORNEY I
Prom./O.C. 2975
$58,890 to $74,906 (Annual Salary Range)

Applications for the following examinations will be accepted until a sufficient number are received to fill the anticipated vacancies. Please submit application as soon as possible.

CIVIL ENGINEER I
Prom./O.C.C. 2984
$47,710 to $65,234 (Annual Salary Range)

CLERK TYPIST II
Prom./O.C.C. 2981
$25,714 to $40,196 (Annual Salary Range)

ELECTRONIC CONTROL SYSTEMS TECHNICIAN
(St. Louis Lambert International Airport)
Prom./O.C.C. 2983
$42,328 to $60,866 (Annual Salary Range)

NEIGHBORHOOD DEVELOPMENT EXECUTIVE
Prom./O.C.C. 2961
$62,946 to $98,670 (Annual Salary Range)

TELECOMMUNICATOR
Prom./O.C.C. 2985
$27,924 to $43,654 (Annual Salary Range)

Vacation, Holidays, Medical Leave, Social Security, and Employees Retirement System Benefits privileges are provided in addition to salary.

Application forms and further information concerning duties of positions, desirable and necessary qualifications, relative weights of examination components, and duration of eligible lists may be secured at the office of the Department of Personnel, 1114 Market Street, Room 700, St. Louis MO 63101. Applications can be submitted on the Internet. Visit the City web site at

CITY OF ST. LOUIS
DEPARTMENT OF HUMAN SERVICES

HOMELESS SERVICES DIVISION

FY2019

Continuum of Care (CoC) Grant

Annual NOFA Competition for New Projects

REQUEST FOR PROPOSALS (RFP)

Bidder's Conference – 1:00 p.m.
Monday, August 12, 2019 at
Department of Human Services
1520 Market St. Room 3005,
Comptroller's Office: Conference Room A
St. Louis, MO 63103

Release Date: August 2, 2019
Due Date: August 26, 2019, 4:00 pm

CITY OF ST. LOUIS
DEPARTMENT OF HUMAN SERVICES
HOMELESS SERVICES DIVISION
REQUEST FOR PROPOSALS

The City of St. Louis, Department of Human Services (DHS) is issuing a Request For Proposals (RFP) for the following U. S. Department of Housing and Urban Development (HUD) programs:

FY2019 Continuum of Care (CoC) – Annual NOFA Competition for New Projects

Applications will be accepted for a variety of new projects outlining specific activities as stated below. The following types of projects will be allowed under this RFP.

A) Projects allowed through the **Permanent Housing Bonus Funds** and **Reallocation** funds are:

1. Permanent Supportive Housing (PSH) – 100% Dedicated to Chronic
2. Permanent Supportive Housing (PSH) – DedicatedPlus
3. Joint Transitional Housing/Rapid Rehousing (TH-RRH)
4. Supportive Services Only for Coordinated Entry (SSO-CE)
5. Expansion Projects for Current Renewal Projects

B) Projects allowed through the **Domestic Violence (DV) Bonus** funds are as follows:

6. DV Bonus Project for Rapid Rehousing Projects (RRH)
7. DV Bonus Project for Joint TH-RRH Projects
8. Expansion of a Current Renewal Projects, where the expansion portion is for those experiencing DV or Human Trafficking

C) **Consolidation** of 2-4 Current Renewal Projects: Current projects that desire to consolidate are allowed under this RFP to do so following the instructions outlined in this RFP. A full application is not required as is for project types 1-8 listed above, but a letter will need to be submitted stating intent to consolidate.

Beginning August 2, 2019, RFP packets will be available for pick-up at the Homeless Services Division or the following website:

https://www.stlouis-mo.gov/government/procurement/

The Bidder's Conference regarding this RFP will be held on August 12, 2019 at 1:00 p.m. at the Office of the Department of Human Services, City of St. Louis, 1520 Market Street, Room 3005, Comptroller's Office: Conference Room A, St. Louis, MO 63103. All other questions should be submitted on or before August 16, 2019, and should be referred to:

Amy Bickford
Chief Program Manager
Department of Human Services
Homeless Services Division
1520 Market Street, Room 4065
St. Louis, MO 63103
bickforda@stlouis-mo.gov

Each question should begin by referencing the RFP page number and section to which it applies. DHS will record any questions and provide written responses that will be posted on the website. All contacts and questions must be submitted in writing to this designated contact person and such contact person will respond in writing to each contact and/or question. The Department shall maintain a list of all entities requesting copies of the Request for Proposals and shall ensure that copies of all questions and responses thereto shall be made available to each entity on such list.

Contact with Selection Committee members is strictly prohibited.

To be considered by the Selection Committee, proposals must be submitted to the above address by 4:00 p.m. August 26, 2019. All applicants must provide seven (7) copies of their proposal at the time of submission (please no staples). Proposals received after the aforementioned date and time, or incomplete proposals may be rejected. The City of St. Louis reserves the right to reject and/or negotiate any and all proposals. Funding for this program is subject to appropriations from federal agencies.

ABOUT THE CITY OF ST. LOUIS HOMELESS SERVICES DIVISION

As administrator of federal, state and local funds, the City of St. Louis Department of Human Services, Homeless Services Division (HSD) provides a comprehensive approach in responding to the diverse needs of people experiencing homelessness or housing displacement in the City of St. Louis.

The City of St. Louis HSD is the collaborative applicant for the St. Louis City Continuum of Care (CoC), as well as the administrator of Emergency Solution Grant (ESG) and Domestic Violence Shelter Funding (RSMo 455.210 - 455.230). HSD performs several important functions to coordinate homeless services with the CoC in St. Louis City that includes the following:

- Development, coordination, and monitoring of new and existing housing and services programs to meet the needs of people experiencing homelessness and/or at-risk of homelessness,
- Negotiation of contracts with social services agencies ensuring that housing and services are delivered efficiently, effectively and unduplicated,
- Collaboration and partnership with a broad spectrum of participants in the homeless services delivery system such as health and human services professionals, advocates, government officials, representatives from nonprofit agencies, businesses and persons with lived experience from the metropolitan area, to address any needs that arise for the homeless community,
- Participation in a wide array of community meetings, committees, councils, training events and national events and conferences, and community events, to educate and share information and best practices in the field of serving and housing homeless individuals and families.

Through these activities, the Homeless Services Division works to ensure an efficient homeless services system for funding the most efficient and effective programs, reducing duplication of services and increasing innovative program design.

INTRODUCTION

The City of St. Louis Department of Human Services (DHS) is issuing a Request for Proposals (RFP) for the U.S. Department of Housing and Urban Development (HUD) FY 2019 Continuum of Care (CoC) Program. The selection of the project is subject to the funding availability from HUD to the City of St. Louis. In keeping with HUD FY 2019 CoC Program NOFA, the City of St. Louis is soliciting proposals consistent with the proposed project priorities by both HUD and our local CoC.

New project applications submitted in response to this RFP will be evaluated by the Rank and Review Committee that is a part of the Program Performance Committee, under the process established by the City of

St. Louis CoC. The ranking, review, and recommendations of new project proposals and the criteria employed by the CoC Rank and Review Committee are included in the evaluation criteria used by the Professional Service Agreement (PSA) Committee.

HUD's Homeless Policy Priorities

The FY2019 HUD NOFA clearly states what the Administration's Program Priorities are and all new projects under this NOFA will be required to state how their programs currently or will align with these priorities. These priorities are national homeless and housing best practices and are further endorsed by the local Continuum of Care.

1. ***End Homelessness for All Persons*** – Serve ALL persons experiencing homelessness • CoC's should have a comprehensive Outreach Strategy in place to identify and continuously engage all unsheltered individuals and families • Use Local Data to determine characteristics of those with the highest needs and long experiences of unsheltered homelessness & develop housing and supportive services tailored to those needs • Use Reallocation Process to create new projects that improve overall performance.

2. **Create a Systemic Response to Homelessness** -- Use System Performance Measures to determine how effectively they are serving people experiencing homelessness • Use Coordinated Entry Process to promote participant choice, coordinate homeless assistance and mainstream housing and service ensuring assistance is received quickly • Make homelessness assistance open, inclusive and transparent.

3. ***Strategically Allocate and Use Resources*** – Use Cost, Performance, and Outcome Data to make improvements to how resources are utilized • CoC's should review Project Quality, Performance and Cost Effectiveness • Maximize Mainstream and Community-Based Resources • Develop partnerships to help participants exit PSH • Cost Effectiveness!!!

4. ***Use an Evidence-Based Approach*** – Prioritize projects that employ strong use of Data and Evidence, including Cost Effectiveness and Positive Housing Outcomes • Look at Positive Housing Outcomes, Reduced Length of Time Homeless, Reduced Rates of Return to Homelessness, Improvements in Employment and Income, Improvements in Overall Well-Being such as Improvements in Mental Health, Physical Health, Connection to Family and Safety.

5. ***Increase Employment –*** Work with Local Employment Agencies and Employers to prioritize training and employment opportunities for people experiencing homelessness • Promote Partnerships with Public and Private Organizations that promote employment.

6. ***Provide Flexibility for Housing First with Service Participation Requirements –*** A word about the 2 fundamental basic parts of Housing First (see Appendix A):
    - ***a.*** Individuals are rapidly placed and stabilized in Permanent Housing without any preconditions regarding income, work effort, sobriety or any other factor. ***This remains an important priority to ensure that federal funds are allocated to providers that serve the most vulnerable homeless individuals!***

    - ***b.*** Once in Housing, individuals never face requirements to participate in services as a condition of retaining their housing. ***This NOFA maintains the commitment to unconditional acceptance of individuals into housing, especially for people with a high degree of vulnerability. At the same time, allowing service participation requirements once a person has been stably housed may promote important outcomes so this NOFA also provides communities and programs with flexibility, without penalty, to use service participation requirements after people have been stabilized in housing*** (consistent with 24 CFR 578.75(h)).

AVAILABLE FUNDS

A) There is approximately $907,881 available for new bonus projects and through funds the CoC has reallocated. Projects allowed through the **Permanent Housing Bonus Funds** and through **Reallocation** funds are as follows:

1. Permanent Supportive Housing (PSH) – 100% Dedicated to Chronic Persons
2. Permanent Supportive Housing (PSH) – DedicatedPlus
3. Joint Transitional Housing/Rapid Rehousing (TH-RRH)
4. Supportive Services Only for Coordinated Entry (SSO-CE)
5. Expansion Projects for Current Renewal Projects

B) There is up to $1,304,390 available for **Domestic Violence Bonus Projects**. Projects allowed through the Domestic Violence Bonus funds are as follows:

6. DV Bonus Project for Rapid Rehousing Projects (RRH)
7. DV Bonus Project for Joint TH-RRH Projects
8. Expansion of Current Renewal Projects, where the expansion portion is for those experiencing DV or Human Trafficking

C) **Consolidation** of 2-4 Current Renewal Projects

PERMANENT HOUSING BONUS & REALLOCATED FUNDS PROJECTS

This section will explain each program type in detail and will provide specific information that the CoC is looking to fund in each category.

1. Permanent Supportive Housing (PSH) – 100% Dedicated to Chronic Persons

Per 24 CFR 578.3, "To be permanent housing, the program participant must be the tenant on a lease for a term of at least one year, which is renewable for terms that are a minimum of one month long and is terminable only for cause. Permanent supportive housing means permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently."

Per 24 CFR 578.3, "Chronically homeless means:

(1) A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

(i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

(ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;

(2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or

(3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless."

For a program to be classified as PSH for 100% Chronically Homeless Persons means that all participants that enter permanent housing through this program type must meet the definition of chronically homeless as stated above. The FY2019 CoC HUD NOFA additionally states, "when a program participant exits the project, the bed must be filled by another chronically homeless participant unless there are no chronically homeless persons located within the CoC's geographic area (p. 15-16)."

All permanent supportive housing programs are required to fully participate in the community's Coordinated Entry System. Per 24 CFR 578.3, "Centralized or coordinated assessment (entry) system means a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool."

Additionally all Permanent Supportive Housing programs for 100% Dedicated to Chronic Persons must comply with the Approved CoC Best Practices (see Appendix B). Permanent Supportive Housing Projects must also comply with Housing First and should implement a harm reduction model, both of which have been proven to be effective in helping persons experiencing chronic homelessness to have better outcomes for those with high service needs (see Appendix A). These two best practices, when implemented well, can have a marked effect on long-term stability, improved physical, behavioral and health outcomes and reduced use of crisis intervention services.

Eligible costs for PSH projects include Leasing costs, Rental Assistance, Supportive Services Costs, Operating Costs, HMIS costs and Project Administration. Acquisition/Rehabilitation/New Constructions is another category that can also be utilized. As to specific allowable costs per category, please see 24 CFR 578.37(a) and additional information can be found on the HUD Exchange at www.hudexchange.info. It shall be noted that half of the Project Administration budget line is kept by the City of St. Louis for their administrative costs, and the total Project Administration budget line is 10% of the full budget.

2. Permanent Supportive Housing (PSH) – DedicatedPlus

All of the information in category number one above is applicable to this program type except instead of being 100% dedicated to chronically homeless, the category of persons who can be served is broadened to include special other circumstances.

As stated on page 17 of the FY2019 NOFA, a DedicatedPlus project is "a permanent supportive housing project where 100% of the beds are dedicated to serve individuals, households with children, and unaccompanied youth that at intake meet one of the following categories:

i. Experiencing chronic homelessness as defined in 24 CFR 578.3;
ii. Residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
iii. Residing in a place not meant for human habitation, emergency shelter, or Safe Haven and had been admitted and enrolled in a permanent housing project within the last year but were unable to maintain a housing placement and met the definition of chronic homeless as defined by 24 CFR 578.3 prior to entering the project;
iv. Residing in transitional housing funded by a Joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined by 24 CFR 578.3;
v. Residing and has resided in a place not meant for human habitation, Save Haven or emergency shelter for at least 12 months in the last 3 years, but has not done so on 4 separate occasions and the individual or head of household met the definition of 'homeless individual with a disability; or
vi. Receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

All permanent supportive housing programs are required to fully participate in the community's Coordinated Entry System. Per 24 CFR 578.3, "Centralized or coordinated assessment (entry) system means a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool."

Additionally all Permanent Supportive Housing programs for DedicatedPlus must comply with the Approved CoC Best Practices (see Appendix B). Permanent Supportive Housing Projects must also comply with Housing First and should implement a harm reduction model, both of which have been proven to be effective in helping persons experiencing chronic homelessness to have better outcomes for those with high service needs (see Appendix A). These two best practices, when implemented well, can have a marked effect on long-term stability, improved physical, behavioral and health outcomes and reduced use of crisis intervention services.

Eligible costs for PSH projects include Leasing costs, Rental Assistance, Supportive Services Costs, Operating Costs, HMIS costs and Project Administration. Acquisition/Rehabilitation/New Constructions is another category that can also be utilized. As to specific allowable costs per category, please see 24 CFR 578.37(a) and additional information can be found on the HUD Exchange at www.hudexchange.info. It shall be noted that half of the Project Administration budget line is kept by the City of St. Louis for their administrative costs, and the total Project Administration budget line is 10% of the full budget.

3. Joint Transitional Housing/Rapid Rehousing (TH-RRH)

Per page 18-19 of the FY2019 NOFA, the Joint TH-RRH program "component project combines two existing program components (transitional housing and permanent housing-rapid rehousing) into a single project to serve individuals and families experiencing homelessness. Sub-recipients should prioritize those with highest needs using an evidence-based approach designed to provide stable housing and services that, to the greatest extent possible, move the participant towards self-sufficiency and independence. Program participants may only receive up to 24-months of total assistance.

If funded, HUD will limit eligible costs as follows, in additional to other limitations found in 24 CFR 578:

i. Leasing of a structure or units, and operating costs to provide transitional housing;
ii. Short- or medium-term tenant-based rental assistance on behalf of program participants to pay for the rapid rehousing portion of the project;
iii. Supportive services;
iv. HMIS; and
v. Project administration costs.

When a program participant is enrolled in a Joint TH-RRH component project, the recipient or sub-recipient must be able to provide both components, including the units supported by the transitional housing component and the tenant-based rental assistance and services provided through the RRH component, to all participants. A program participant may choose to receive only the TH unit, or the assistance provided through the RRH component, but the recipient or sub-recipient must make both types of assistance available." If a participant chose TH initially and transitions to the RRH portion of the program later, the sub-recipient can only provide a total of 24-months of assistance to the participant.

The CoC is accepting new project applications for this component type to serve specific populations only. The populations that are being targeted for this program component are youth age 24 and under, those serving persons with substance use addictions or in recovery programs, and re-entry programs. Programs that serve those experiencing domestic violence, dating violence, stalking and human trafficking may also apply in this category but may also be better suited to apply for the DV bonus funds. Agency's should consider possible partnering relationships. A partnership could be formed with 2 agencies where each agency provides one of the components, but one agency must take the lead in handling grant administrative tasks.

4. Supportive Services Only for Coordinated Entry (SSO-CE)

The CoC currently has a Supportive Services Only Grant for Coordinated Entry, in the amount of $150,000. The City of St. Louis and the CoC seek to expand this grant to cover more activities and thereby will likely be funded at a larger amount. The current applicant may apply as a brand new project, incorporating activities stated below. Any other local agency may also apply for this opportunity. Additionally, within the scope of this project, an applicant may choose to partner up with other agencies in the community to provide a full breadth of the below activities. Partnering in a Coordinated Entry project takes some of the burden off of a single agency and allows for more collaboration within the system.

Per 24 CFR 578.3, "Centralized or coordinated assessment (entry) system means a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool."

The current grant is funding two full time staff positions and portions of three additional positions with salary and benefits costs. The positions are a manager, two intake/diversion specialists, a concierge and a receptionist. There are some other funds allowed for emergency assistance, supplies and mileage reimbursement. For this project to be re-scoped and expanded the current structure can be completely rewritten and staffed in different ways. There are many activities that the CoC is seeking to fund through this Coordinated Entry project. At a minimum the following staffing positions are important for Coordinated Entry and should be written into the project:

- **Intake/Diversion Specialists**. This is still a crucial part of the system and there is still a warranted need for workers to provide this type of service. Diversion is a practice involving the use of social work skills with mediation and problem-solving techniques to help individuals and families find solutions to their homeless crisis, diverting them from the homeless shelter system.
- **Case Managers**. The current Coordinated Entry System is deficient in having enough case managers to support those persons that have been assessed and have no linkage to any other service provider. A Coordinated Entry Case Manager would carry a case load providing support to those that need linked to other service providers and assistance with getting appropriate documentation needed to be housed. An additional requirement for any CE Case Managers will be that they are SOAR trained, which will allow them to also work with individuals and families to secure social security benefits.
- **Mobile Outreach and Assessment Workers**. A person working in this capacity would provide street outreach tasks working with those identified as not able to access front doors to the system. An additional requirement would be to provide assessments in the field at remote locations in both the City of St. Louis and in St. Louis County. Mobile Outreach and Assessment Workers may also become SOAR trained to assist with obtaining social security income for persons on their caseloads.
- **Housing Navigators.** A Housing Navigator is a position that CE systems across the country are starting to fund in mass quantities because of the support they provide to both front end providers and housing providers. A Housing Navigator knows the housing market and is an expert at locating affordable units for clients with housing referrals and at building relationships with and securing commitments from landlords that are willing to work with persons that have high vulnerabilities and barriers to housing.
- **Licensed Clinical Social Worker (LCSW).** The CoC sees it as critical that the system employ an LCSW that can validate and affirm disability documentation for those that are experiencing chronic homelessness. This person will become invaluable to the CE team and will also work with persons to connect them to services and assist the case management team. This person could be the lead staff person in a management role or an additional person on the team.

As 24 CFR 578.53(e)(17) explains, if the service is being directly delivered by the recipient or sub-recipient, eligible costs under the specific supportive services for which funding is being requested includes: the cost of labor or supplies, and materials incurred by the recipient or sub-recipient in directly providing supportive services to program participants; and the salary and benefit packages of the recipient and sub-recipient staff who directly deliver the services. The Supportive Services budget allows for salary and benefits of staff and expenditures in these itemized budget items: Assessment of Service Needs, Assistance with Moving Costs, Case Management, Child Care, Education Services, Employment Assistance, Food,

Housing/Counseling Services, Legal Services, Life Skills, Mental Health Services, Outpatient Health Services, Outreach Services, Substance Abuse Treatment Services, Transportation, and Utility Deposits. Operating Cost (maintenance, repair, building security, furniture, utilities, and equipment) in the Supportive Services budget can only be used if the costs are for a facility that is used to provide supportive services for program participants.

5. Expansion Projects for Current Renewal Projects

Current renewal sub-recipients may utilize Permanent Housing Bonus or Reallocated funds to expand their current renewal project. **The only renewal projects allowed to expand their projects in this FY2019 Competition are those that were ranked in the top 10 ranked projects of Tier 1 in the FY2018 NOFA Competition's Rank and Review.**

Expansions would expand the current renewal project by adding units, beds, persons served, or services provided to existing program participants. Under this RFP the application completed will be for the expansion portion only. If the expansion is selected the HSD Contract Compliance Officer will work with the project to complete 3 separate e-snaps applications, the renewal alone, the expansion portion alone, and a third application which incorporates all activities (the renewal and expansion portion) into one application. For the new expansion project to be conditionally awarded by HUD the renewal project application must also be selected by HUD for a conditional award.

The electronic grants management system used by HUD's Office of Special Needs Assistance Programs (SNAPS) is known as *e-snaps*. This system supports the CoC Program funding applications and grant awards process for the HUD CoC Program.

DOMESTIC VIOLENCE BONUS PROJECTS

Per the FY2019 HUD Appropriations Act, the only projects allowed for funding under the DV Bonus are for "rapid rehousing projects and supportive services projects providing coordinated entry, and for eligible activities that the Secretary of HUD determines are critical in order to assist survivors of domestic violence, dating violence, and stalking (pg. 7 of HUD CoC NOFA)." DV Bonus components allowed are RRH, Joint TH-RRH and SSO-CE projects. Projects have to be a minimum amount of $25,000, and total funds available in the City of St. Louis competition are $1,304,390. Unlike last year the CoC may enter multiple projects as long as their total doesn't exceed the total amount available and there may only be one SSO-CE project entered.

In this NOFA HUD has clarified that persons fleeing or attempting to flee human trafficking may qualify as homeless under Paragraph 4 of the homeless definition, therefore any of the next three application types in this NOFA will be allowed to serve those that are fleeing or attempting to flee human trafficking. HUD considers human trafficking, including sex trafficking, to be "other dangerous or life-threatening conditions that relate to violence against the individual or family member" under paragraph (4) of the definition of homeless at 24 CFR 578.3.

6. DV Bonus Project for Rapid Rehousing Projects (RRH)

Rapid Rehousing projects funded under the DV Bonus funds must demonstrate trauma-informed, victim centered approaches. These projects must comply with Coordinated Entry Policies and Procedures. All participants are verified to be homeless under category 4 of the homeless definition and are victims of domestic violence, dating violence and or stalking. Rapid Rehousing programs must comply with the Approved CoC Best Practices (see Appendix B). These programs rapidly move individuals and families experiencing homelessness to permanent housing using varying levels of assistance and services dictated by the needs of those in the program.

Eligible costs for RRH projects include Rental Assistance, Supportive Services Costs, HMIS costs and Project Administration. As to specific allowable costs per category, please see 24 CFR 578.37(a) and additional information can be found on the HUD Exchange at www.hudexchange.info. It shall be noted that half of the Project Administration budget line is kept by the City of St. Louis for their administrative costs, and the total Project Administration budget line is 10% of the full budget.

7. DV Bonus Project for Joint TH-RRH Projects

Joint Transitional Housing-Rapid Rehousing (Joint TH-RRH) projects funded under the DV Bonus funds must demonstrate trauma-informed, victim centered approaches. These projects must comply with Coordinated Entry Policies and Procedures. All participants are verified to be homeless under category 4 of the homeless definition and are victims of domestic violence, dating violence and or stalking. Rapid Rehousing programs must comply with the Approved CoC Best Practices (see Appendix B).

Per page 18-19 of the FY2019 NOFA, the Joint TH-RRH program "component project combines two existing program components (transitional housing and permanent housing-rapid rehousing) into a single project to serve individuals and families experiencing homelessness. Sub-recipients should prioritize those with highest needs using an evidence-based approach designed to provide stable housing and services that, to the greatest extent possible, move the participant towards self-sufficiency and independence. Program participants may only receive up to 24-months of total assistance.

If funded, HUD will limit eligible costs as follows, in addition to other limitations found in 24 CFR 578:

i. Leasing of a structure or units, and operating costs to provide transitional housing;
ii. Short- or medium-term tenant-based rental assistance on behalf of program participants to pay for the rapid rehousing portion of the project;
iii. Supportive services;
iv. HMIS; and
iv. Project administration costs. It shall be noted that half of the Project Administration budget line is kept by the City of St. Louis for their administrative costs, and the total Project Administration budget line is 10% of the full budget.

When a program participant is enrolled in a Joint TH-RRH component project, the recipient or sub-recipient must be able to provide both components, including the units supported by the transitional housing component and the tenant-based rental assistance and services provided through the RRH component, to all participants. A program participant may choose to receive only the TH unit, or the assistance provided through the RRH component, but the recipient or sub-recipient must make both types of assistance available." If a participant chose TH initially and transitions to the RRH portion of the program later, the sub-recipient can only provide a total of 24-months of assistance to the participant. Agency's should consider possible partnering relationships. A partnership could be formed with 2 agencies where each agency provides one of the components, but one agency has to take the lead in handling grant administration tasks.

8. Expansion of Current Renewal Projects, where the expansion portion is for those experiencing DV or Human Trafficking

"DV Bonus funding may be used to expand an existing renewal project that is not dedicated to serving survivors of domestic violence, dating violence or stalking who meet the definition of homeless in paragraph (4) of 24 CFR 578.3. So long as, the DV Bonus funds for expansion are solely for additional units, beds, or services dedicated to persons eligible to be served with DV Bonus funding (page 7 of HUD CoC NOFA)."

Current renewal sub-recipients may utilize Permanent Housing Bonus or Reallocated funds to expand their current renewal project. **The only renewal projects allowed to expand their projects in this FY2019 Competition are those that were ranked in the top 10 ranked projects of Tier 1 in the FY2018 NOFA Competition's Rank and Review.**

Expansions would expand the current renewal project by adding units, beds, persons served, or services provided to existing program participants. Under this RFP the application completed will be for the expansion portion only. If the expansion is selected the HSD Contract Compliance Officer will work with the project to complete 3 separate e-snaps applications, the renewal alone, the expansion portion alone, and a third application which incorporates all activities (the renewal and expansion portion) into one application. For the new expansion project to be conditionally awarded by HUD the renewal project application must also be selected by HUD for a conditional award.

CONSOLIDATIONS

One final option for projects under this FY2019 CoC NOFA is for existing renewal projects that would like to do a consolidation.

Consolidation Projects of 2-4 Current Renewal Projects

If an agency has 2 to 4 identical project types and those projects are in good standing with both HUD and the City of St. Louis, they may be consolidated into one project. If there is any agency that chooses to consolidate two to four of their current renewal projects, they must submit a letter through this RFP process. **Agency's that wish to do a consolidation will not need to submit a full application. A letter, on agency letterhead, addressed to their HSD Contract Compliance Officer and the HSD contact person for this RFP will need to be submitted by the due date of this RFP.** The HSD Contract Compliance Officer will work with the agency on submission of their renewal applications and an additional application, which combines all the data and narrative into one application into e-snaps.

REQUIREMENTS of PROPOSALS & EVALUATION CRITERIA:

In addition to submitting the *Application Cover Sheet* (attached), the applicant will need to provide detailed narratives for each project proposal. The narrative should include the following topics highlighted with the bolded titles. The following items will be evaluated for funding decisions:

Project Description, Scope, and Relevance: Narrative should include a *Statement of Priorities* regarding project description, scope, and relevance, including the intended impact of the project on homeless individuals and families and those at risk of homelessness. The applicant should provide detailed descriptions addressing the requirements of the project and how the applicant will achieve the desired outcomes.

If the applicant believes, there are additional pieces to be considered not specifically listed within the project description in this RFP that should be considered include that information. Ability of the applicant to provide innovative programs and solutions will be considered. Approach to the project and any unusual problems anticipated will be considered.

These additional questions from e-snaps are required for PSH, RRH, & Joint TH-RRH Project Applications:

- (3B-1) Provide a description that addresses the entire scope of the project.
- (3B-2) Project Milestones. State the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this application:
    - o New project staff hired, or other project expenses begin?
    - o Participant enrollment in project begins?
    - o Participants begin to occupy leased units or structures and supportive services begin?
    - o Leased or rental assistance units or structure and supportive services near 100% capacity?
- (3B-6) If applicable, describe the proposed development activities and the responsibilities that the sub-recipient will have in developing, operating, and maintaining the property.
- (3B-7) Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation? If yes, explain how and why the project will implement this requirement.
- (3B-8) Will more than 16 persons live in one structure? If yes, describe the local market conditions that necessitate a project of this size. Also, describe how the project will be integrated into the neighborhood.
- (4B-1) What type of housing will be provided? (Barracks, Dormitory with shared rooms, Dormitory with private rooms, Shared Housing, Single Room Occupancy-SROs, Clustered Apartments, Scattered-site Apartments including efficiencies, Single family homes/townhouses/duplexes.
- (4B-2) Indicate the maximum number of units and beds available for the project. For the Joint TH-RRH project designate numbers of units and beds for each component separately, and for TH, it must be both the CoC Funded and non-funded or in other words the full TH capacity. For the non-CoC funded TH, state where funding is coming from (ESG, Section 8, HUD-VASH, Mixed funding, other)

These additional questions from e-snaps are required for the SSO-CE Project Applications:

- (3B-4c) Describe the advertisement strategy for the coordinated entry process and how it is designed to reach those with the highest barriers to accessing assistance.
- (3B-4e) Describe the referral process and how the coordinated entry process ensures that participants are directed to appropriate housing and/or services.
- (3B-4g) What specific plan does this project have to specifically coordinated and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible?

Client Population: The proposal should clearly identify and describe the characteristics and needs of the clients the project intends to serve.

These additional questions from e-snaps are required for housing Project Applications:

- (3B-4) If the project will have a specific population focus, please identify (Chronic homeless, Veterans, Youth under age 25, Families, Domestic Violence, Substance Abuse, Mental Illness, HIV/AIDS, or state any other not mentioned). May select all that apply.
- (3B-10) If the project is a PSH project state if project will be 100% dedicated to chronic homelessness or if it will use the DedicatedPlus option.
- (5A) Complete the Chart in Exhibit B about project participant households. For new projects the numbers to be entered into the chart are estimates of the populations you anticipate serving in the project.
- (5B) Complete the Chart in Exhibit C about project participant subpopulations. . For new projects the numbers to be entered into the chart are estimates of the populations you anticipate serving in the project.
    - For each row, the first 3 columns (B-D) that are in dark gray, along with the last column (K), also dark gray, are mutually exclusive (i.e., for each row you cannot count the same person in more than one of these 4 columns).
    - Columns 4-9 (E-J), the ones not shaded, are not mutually exclusive (i.e., in each row, you may include the same person in multiple columns if they have multiple characteristics). However, for each row, if you list a person in column 10 (K), you cannot include the person in columns 4-9 (E-J).
    - For each household type listed in Exhibit B, you must fill in at least one cell on the corresponding Exhibit C. In Exhibit B, the household types are displayed as columns and on Exhibit C, the household types are shown in individual tables.

Case Management and Services Planning: This section should show that the applicant provides a progressive service plan for each program participant based on individualized assessments. The plan should include personalized services that address the strengths and needs of each participant. It should include case management that matches services to specific identified needs, tracks clients' progress, and maintains program data for reporting. It should explain how needs will be identified, how individual plans will be developed and implemented, how case management facilitates progress toward housing stability and independence.

HMIS can be the tool to allow for participant tracking, but some programs may have other methods. Please demonstration how participant tracking will be done in conjunction with case management and services planning. This includes at a minimum: a) tracking participants through the progression of services provided, b) assessing individual progress toward individualized goals, c) evaluating the effectiveness of the services delivered AND the effectiveness of the project in achieving program goals, and d) reporting data on total number served and client characteristics, use of services, and expenditures to the funding agency.

These additional questions from e-snaps are required for PSH, RRH, & Joint TH-RRH Project Applications:

- (4A-2) Describe how participants will be assisted to obtain and remain in permanent housing.
- (4A-3) What specific plan does this project have to specifically coordinated and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible?
- (4A-4) Complete the Chart in Exhibit A and submit with your application about the supportive services

provided in the project. Indicate the Provider and the Frequency for which the service will be provided. For Provider, will it be provided by the sub-recipient, a partner, or a non-partner. For Frequency, state if the service will be provided daily, weekly, bi-weekly, monthly, bi-monthly, quarterly, semi-annually, annually, or as needed. At least one supportive service must be filled out below. See Exhibit A

- (4A-5-6) Identify whether the project will include the following activities (yes/no):
    - Transportation assistance to clients to attend mainstream benefit appointments, employment training or jobs?
    - Regular follow-ups with participants to ensure mainstream benefits are received and renewed?
    - Will project participants have access to Supplemental Security Income/Social Security Disability (SSI/SSDI) technical assistance provided by the sub-recipient or partner agency?
    - Has the staff person providing the technical assistance completed SOAR training in the past 24 months?

CoC Goals, Priorities & Participation: Provide a narrative stating how the applicant's work is in alignment with the St. Louis City Continuum of Care goals and priorities. State how the project will improve upon what the CoC is currently doing in the community. Include a statement regarding which staff attend which CoC events, meetings or committees. More information about the CoC can be found here: https://www.stlouis-mo.gov/government/departments/human-services/homeless-services/continuum-of-care/

Applicant Experience & Capacity: The applicant's experience within the subject area of the project should be well documented in the proposal. There should be an explanation of how the applicant can demonstrate having extensive knowledge of providing services that benefit persons experiencing or at risk of homelessness. Demonstrate how the applicant has the capacity to carry out the project.

The applicant should demonstrate a history of assessing the needs of, and providing services to, low income individuals who are homeless, formerly homeless or at risk of becoming homeless. The applicant should provide outcome data from similar programs operated by the organization that show the impact of the services provided. The applicant should verify established working relationships with other organizations in the community to ensure a network of services to meet the described needs of the participants.

These additional questions from e-snaps are required for NOFA Applications:

- (2B-1) Describe the experience of the sub-recipient in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.
- (2B-2) Describe the experience of the sub-recipient in leveraging other Federal, State, local and private sector funds.
- (2B-3) Describe the basic organization and management structure of the sub-recipient. Include evidence of internal and external coordination and an adequate financial accounting system.

HUD Experience and Knowledge: Explain the applicant's direct experience and knowledge in providing or supervising programs and/or services that are funded by the U.S. Department of Housing and Urban Development's Continuum of Care grant, and how that experience and knowledge will lead to positive outcomes for the consultation project. Ability of the applicant to meet all statutory and ordinance requirements will be considered.

Communication and Reporting: State in this section how the applicant will ensure communication with DHS. Communication regarding billings should occur on a monthly basis. Additionally, there should be communication or at least involvement occurring monthly with the St. Louis City CoC. If the proposal is to provide shelter or housing services, state how the applicant has staff involved in Coordinated Entry, and how communication is ensured with the Coordinated Entry System.

Timeline: Please include a detailed timeline that identifies appropriate assignments, tasks, and activities to achieve stated outcomes for the project. The timeline should demonstrate the ability to have a plan for spending down all funds while serving persons in an appropriate timeframe and manner.

Budget and Spending Capacity: The budget for the project should demonstrate full expenditure of the funds applied for within a suitable timeframe. The Grant Term for all CoC projects is 1 year. Projects funded in the

FY2019 CoC NOFA will be expected to start by September 1, 2020. Under the 2019 NOFA there is the option for new projects to specify up to an 18-month grant term, but funding will only be available for 12 months. This additional 6 months could be added in to cover delays in startup which sometime can occur in coordinating with HUD and City DHS. Determine what line items will justify expenditure and state in detail what is within each specific line item of the project budget. Applicants need to state a projected start date and end date for the project. The applicant should further be able to demonstrate within this section the ability to provide solid fiscal accountability to the project. Costs should be reasonable for the services to be provided and the number of persons to be served.

Eligible activities allowed for each project component type are as follows:

Permanent Housing – PSH	**Permanent Housing – RRH**	**Joint TH/PH-RRH**	**SSO-CE**
Acquisition/Rehabilitation/New Construction			
Leased Units		Leased Units	
Leased Structures		Leased Structures	
Rental Assistance	Rental Assistance	Rental Assistance	
Supportive Services	Supportive Services	Supportive Services	Supportive Services
Operations		Operations	
HMIS	HMIS	HMIS	
Administration (10%)	Administration (10%)	Administration (10%)	Administration (10%)

For the Leasing and Rental Assistance category, the FY2018 Fair Market Rent (FMR) are used to calculate allowed rent costs. Rent paid for program participants can be equal to or below the FMR amount. FMR's cannot be exceeded.

Complete the following Exhibit Worksheets to finalize all budget parts:

- Exhibit D: Leasing or Rental Assistance Budget
- Exhibit E: Supportive Services Budget
- Exhibit F: Operations Budget
- Exhibit G: HMIS Budget
- Exhibit H: Total Summary Budget

HMIS Utilization: The sub-recipient must ensure that data on all persons served and all activities assisted under the CoC and ESG programs are entered into the HMIS in accordance with HUD's standards on participation, data collection, and reporting requirements. The sub-recipient is required to enter data on a regular and consistent basis. Data must be entered for CoC and ESG funded shelter and housing programs according to the CoC data timeliness standards. The data required for entry into HMIS includes the following data elements: Name, Social Security Number, Date of Birth, Ethnicity, Race, Gender, Veteran Status, Disabling Condition, Residence Prior to Program Entry, Zip Code, Length of Stay at Previous Residence and Homeless Cause.

The sub-recipient agrees to collect all HUD required data elements. The sub-recipient is required to update a client's status at a minimum annually. Additional updates should be completed at intake and discharge, and as client information changes. DHS will monitor data entry progress and data quality on a regular basis. For any questions related to implementing HMIS in your program, please contact the HMIS Lead – Institute of Community Alliances at (314) 655-4778.

As part of the application, the HMIS Lead will provide you with a letter to confirm that your organization is an active HMIS user. For organizations that provide legal services or services to victims of domestic violence, a comparable HMIS system may be used. As part of the application, a letter from the HMIS Lead will be required to confirm that your client database system is able to generate the Annual Performance Report (APR)

for CoC programs and the Consolidated Annual Performance and Evaluation Report (CAPER) for ESG programs. If your database is not comparable, you may include in your budget the cost for data collection.

Match: See 24 CFR 578.73 regarding match requirements to ensure in-kind match reported is documented appropriately if this method of match is selected. Match may be in the form of Cash or In-Kind. Match is required on all projects in the amount of 25% of the total budget amount, excluding Leasing. Program Income as described in 24 CFR 578.97 may also be used as match. Provide narrative stating what sources will be used as match, and how much will be provided by each source. A dated written letter will need to be provided for each match source.

MWBE and/or DBE: Provide evidence and a statement if the applicant is involved with Minority and Women Business Enterprises (MWBE) and/or Disadvantaged Business Enterprise (DBE) participation. M/WBE and/or DBE participation will be considered.

Claims for Reimbursement: Sub-recipients will be reimbursed for eligible expenses. Monthly, each billing request submitted must contain expenses that were either incurred or paid during the month claimed. Claims for reimbursement shall be submitted to HSD within fifteen (15) calendar days after the calendar month in which the expenses are incurred or paid. Claims for reimbursement must be submitted to the assigned HSD Contract Compliance Officer. ALL supporting documentation must be submitted with reimbursement claim. Place in this section of narrative how the applicant plans to comply with this policy. Is there a specific person in charge of billings for the organization? What policies are in place within the applicant's organization to ensure this timeline for billings?

ADDITIONAL CONSIDERATIONS

Please note the City of St. Louis has the discretion to change allocations based on the quality and quantity of proposals received. Private, nonprofit, tax-exempt organizations that plan to provide these projects/services are eligible to apply.

Proposal Review Process: Applicants for all projects must make themselves available for interview by the St. Louis City Continuum of Care Board and/or their designees, making up a Review Panel. The CoC Board Review Panel may choose to rank proposals and present its analysis and recommendations regarding selection to the Department of Human Services for consideration in the selection(s) made under this RFP by the PSA Committee. Please see additional information regarding the Proposal Review process below.

PSA Committee: In accordance with Ordinance 64102 and the Rules and Procedures for Professional Service Agreements promulgated pursuant to the same and approved by the Board of Public Service of the City of St. Louis, professional service selections shall comply with these procedures, including the use of a Selection Committee.

The Professional Services Selection committee shall be composed of the following: the Director of the department, division or agency seeking the professional service or the designee of the Director, who shall act as chairperson; one member of said department's, division's or agency's staff selected by said Director, one member selected by the Mayor; one member selected by the Comptroller; and one member selected by the President of the Board of Aldermen.

SELECTION PROCESS

The City will evaluate all proposals in a four-phase process:

1. The first phase will involve a review of the proposals by the Homeless Services Division staff of the Department of Human Services (DHS) for conformance to the submission requirements and a determination of whether the proposals meet the minimum criteria established in this RFP. Each proposal will be reviewed for adherence to guidance provided within this RFP and feasibility for implementation. The Homeless Services Division Staff will provide a consolidated recommendation for the PSA committee review process.

2. The second phase of this review process will allow the Continuum of Care's Board or their designee(s) to review proposals. The CoC designees will then submit in writing to HSD their recommendations to be forwarded on to the PSA Committee to be used in the PSA review and selection process. This will include submission of a statement in writing of CoC membership and/or participation in the CoC of each applicant.

3. The third phase will involve the evaluation of the proposal's merits by each Selection Committee member independently.

4. The final phase will be a review of the proposals, CoC Board/Designee recommendations and DHS recommendations by the Selection Committee. During this phase, and at its discretion, the PSA committee may conduct interviews/presentations with applicants and provide applicants the opportunity to clarify their proposals and advise the City of any additional factors that may be relevant to their decision. Each member of the Selection Committee shall vote to select applicants to perform the services requested in the RFP. If presentations have been made, the Selection Committee shall defer the selection vote until after presentations are complete.

After the PSA Committee's review process and decision-making meeting DHS Homeless Services Division will provide written notification to all applicants regarding selections. This communication will further discuss the process for awarding contracts.

RFP Terms and Conditions

1. The City reserves the right to reject any and all proposals submitted; to select one or more respondents; to void this RFP and the review process and/or terminate negotiations at any time; to select separate respondents for various components of the scope of services; to select final team members from among the proposals received in response to this RFP. Additionally, any and all RFP project elements, requirements and schedules are subject to change and modification. The City also reserves the unqualified right to modify, suspend, or terminate at its sole discretion any and all aspects of this RFP process, to obtain further information from any and all respondents, and to waive any defects as to form or content of the RFP or any responses by any firm. Respondents may be asked to make one or more presentations and participate in interviews.

2. This RFP does not commit the City to award a contract, to defray any costs incurred in the preparation of a response to this request, or to procure or contract for services. All submitted RFPs become the property of the City as public records. All proposals may be subject to public review, on request, unless exempted as discussed elsewhere in this RFP.

3. By accepting this RFP and/or submitting a proposal in response thereto, each proponent agrees for itself, its successors and assigns, to hold the City and all of their various agents, commissioners, directors, consultants, attorneys, officers and employees harmless from and against any and all claims and demands of whatever nature or type, which any such proponent, its representatives, agents, contractors, successors or assigns may have against any of them as a result of issuing this RFP, revising this RFP, conducting the selection process and subsequent negotiations, making a final recommendation, selecting a proponent or negotiating or executing an agreement incorporating the commitments of the selected proponent.

4. Proposals shall be open and valid for a period of 60 days from the date of their submission to the City.

5. All materials submitted in accordance with this RFP will become and remain the property of the City and will not be returned. All proposals will be considered public records, pursuant to the City's understanding and interpretation of the laws of the State of Missouri. All proposal material may be treated as open records. The City cannot guarantee confidentiality of any materials. Thus, proposals

and communications exchanged in response to this RFP should be assumed to be subject to public disclosure.

Missouri Unauthorized Aliens Law

Requirements: Respondents are hereby advised that any Agreement that will be executed with a successful respondent pursuant to this RFP is subject to sections 285.525 through 285.555 of the Revised Statutes of Missouri, as amended (the "Missouri Unauthorized Aliens Act"). As a condition to the award of any such agreement, the successful respondent shall, pursuant to the applicable provisions of the Missouri Unauthorized Aliens Law, by sworn affidavit and provision of documentation, affirm its enrollment and participation in a federal work authorization program with respect to the employees working in connection with the agreement. The successful respondent shall also affirm in said affidavit that it does not knowingly employ any person who is an unauthorized alien in connection with the Agreement pursuant to the Missouri Unauthorized Aliens Law. A copy of an affidavit can be found at the following website https://ago.mo.gov/docs/default-source/forms/affidavit_of_compliance.pdf?sfvrsn=2 and on the RFP's website page.

Information regarding the Missouri Unauthorized Aliens Law is available on the Missouri Attorney General's web site at https://ago.mo.gov/criminal-division/public-safety/unauthorized-alien-workers. Information regarding E-Verify can be found on U.S. Citizenship and Immigration Services' web site at https://everify.uscis.gov/enroll.

City of St. Louis
Homeless Services Division
FY2019 Continuum of Care (CoC) Grant
Annual NOFA Competition for New Projects
REQUEST FOR PROPOSALS (RFP)
APPLICATION COVER SHEET (page 1 of 2)

Organization Name			
New Project Name			
Project Address			
Executive Director Name			
Executive Director Email			
Executive Director Telephone #			
Organization Address			
Organization Telephone #			
Organization Fax #			
Organization Website			
Organization DUNS #		**Tax ID or EIN:**	
Contact Person & Title			
Contact's E-mail			
Contact's Telephone #			

SELECT <u>ONLY ONE OF THE FOLLOWING</u> CATEGORIES TO APPLY FOR CoC 2019 FUNDING. An agency may request funds from multiple categories; however, the agency MUST complete a separate application for each category. To select a category please check a box.

☐ 1. PSH 100% Dedicated Chronic
☐ 2. PSH DedicatedPlus
☐ 3. Joint TH-RRH
☐ 4. SSO-CE
☐ 5. Expansion Project – Current Renewal Project Expanding: ☐ RRH or ☐ PSH Name of Project Expanding:_____
☐ 6. DV Bonus – RRH
☐ 7. DV Bonus – Joint TH-RRH
☐ 8. Expansion Project – Current Renewal Project – DV or Human Trafficking Expanding: ☐ RRH or ☐ PSH Name of Project Expanding:_____

City of St. Louis
Homeless Services Division
FY2019 Continuum of Care (CoC) Grant
Annual NOFA Competition for New Projects
REQUEST FOR PROPOSALS (RFP)
APPLICATION COVER SHEET (page 2 of 2)

Financial Section:

Amount Requested: $_____

Requested amount reflects ____% of the program/project budget $_____

Requested amount reflects ____% of the total agency's budget $_____

Amount of funds that will serve as match for this project $_____

Operational Section:

Does the organization have offices in the City of St. Louis? ☐ Yes ☐ No

Does or will the organization have staff in the City of St. Louis providing services? ☐ Yes ☐ No

Does proposal include travel? ☐ Yes ☐ No

How many trips to St. Louis will be provided if travel is included to provide services? _____

Target Population

☐ Single Men	☐ Women w/children	☐ Veterans	☐ Mentally Ill
☐ Single Women	☐ Elderly	☐ Youth	☐ Other
☐ Families	☐ Reentry	☐ Substance Use/Treatment	
☐ Teenage Mothers	☐ Chronic Homeless	☐ Domestic Violence, Dating Violence & Stalking	
☐ Persons with HIV/AIDS	☐ Physically Disabled	☐ Developmentally Disabled	

Housing

☐ Barracks	☐ Scattered Site Apartments	☐ Single Room Occupancy	
☐ Group/Large House	☐ Detached House	☐ On-site Apartments	☐ Other

PROPOSAL NARRATIVE & ATTACHMENTS GUIDANCE

All proposals submitted to HSD must include the following items:

Project Proposal Narrative:	**Required Attachments:**
(not to exceed 15 pages) Narrative includes these sections: • Project Description, Scope & Relevance • Client Population • Case Management and Services Planning • CoC Goals, Priorities, and Participation • Applicant Experience & Capacity • HUD Experience & Knowledge • Communication & Reporting • Timeline • Budget & Spending Capacity • HMIS Utilization • Match • MWBE and/or DBE • Claims for Reimbursement	(not included in page limit) • Evidence of 501 (c) 3 status • Copy of System for Award Management (SAM) Report • HMIS Participation Letter • Organizational Chart • Current List of the Board of Directors • Federal Form 990 • Job Descriptions/Resumes (for key personnel involved in the project) • Detailed Project/Program Budget • Agency Budget • Recent A133 or most recent audit • Recent Income Statement • Balance Sheet for the last three years • Recent statement of Cash Flows • Letter of support from the Alderman/woman

ALL DOCUMENTS MUST BE INCLUDED TO BE CONSIDERED FOR FUNDING

Proposals must be submitted to the below address by 4:00 p.m. August 26, 2019. All applicants must provide seven (7) copies of their proposal at the time of submission (please no staples). Proposals received after the aforementioned date and time, or incomplete proposals may be rejected. The City of St. Louis reserves the right to reject and/or negotiate any proposals. Funding for this program is subject to appropriations from federal agencies.

Department of Human Services
Homeless Services Division
1520 Market Street, Room 4065
St. Louis, MO 63103

Exhibit A

Supportive Services Table

Supportive Services	Provider	Frequency
Assessment of Service Needs		
Assistance with Moving		
Case Management		
Child Care		
Educational Services		
Employment Assistance		
Food		
Housing Search and Counseling Services		
Legal Services		
Life Skills Training		
Mental Health Services		
Outpatient Health Services		
Outreach Services		
Substance Abuse Treatment Services		
Transportation		
Utility Deposits		

Exhibit B

Households Table

	Households with at least One Adult & One Child	Adult Households without Children	Households with Only Children
Number of Households			
Characteristics	**Persons in Households with at least One Adults and One Child**	**Adults Persons in Households without Children**	**Persons in Households with Only Children**
Adults over age 24			
Persons ages 18-24			
Accompanied Children under age 18			
Unaccompanied Children under age 18			
Total Persons			

Exhibit C

Subpopulations Tables

Persons in Households with at Least one Adult and One Child										
Characteristics	**Chronically Homeless Non-Veterans**	**Chronically Homeless Veterans**	**Non-Chronically Homeless Veterans**	**Chronic Substance Abuse**	**Persons with HIV/AIDS**	**Severely Mentally Ill**	**Victims of Domestic Violence**	**Physically Disability**	**Developmental Disability**	**Persons Not Represented by Listed populations**
Adults over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons										

Persons in Households WITHOUT Children										
Characteristics	**Chronically Homeless Non-Veterans**	**Chronically Homeless Veterans**	**Non-Chronically Homeless Veterans**	**Chronic Substance Abuse**	**Persons with HIV/AIDS**	**Severely Mentally Ill**	**Victims of Domestic Violence**	**Physically Disability**	**Developmental Disability**	**Persons Not Represented by Listed populations**
Adults over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons										

Persons in Households with ONLY Children										
Characteristics	**Chronically Homeless Non-Veterans**	**Chronically Homeless Veterans**	**Non-Chronically Homeless Veterans**	**Chronic Substance Abuse**	**Persons with HIV/AIDS**	**Severely Mentally Ill**	**Victims of Domestic Violence**	**Physically Disability**	**Developmental Disability**	**Persons Not Represented by Listed populations**
Adults over age 24										
Persons ages 18-24										
Children under age 18										
Total Persons										

Exhibit D

Leasing or Rental Assistance Budget Detail					
Size of Units	**Number of Units**	**FMR Rate**	**Rent to be Paid by Grant**	**12 months (x12)**	**Total Request**
SRO					
0 Bedroom					
1 Bedroom					
2 Bedroom					
3 Bedroom					
4 Bedroom					
5 Bedroom					
6 Bedroom					
7 Bedroom					
8 Bedroom					
9 Bedroom					
Total Units					
Total Request					

Leasing or Rental Assistance Budget Detail					
Example					
Size of Units	**Number of Units**	**FMR Rate**	**Rent to be Paid by Grant**	**12 months (x12)**	**Total Request**
SRO					$0
0 Bedroom					$0
1 Bedroom	2	$700	$650	12	$15,600
2 Bedroom	4	$800	$800	12	$38,400
3 Bedroom	2	$900	$900	12	$21,600
4 Bedroom					$0
5 Bedroom					$0
6 Bedroom					$0
7 Bedroom					$0
8 Bedroom					$0
9 Bedroom					$0
Total Units	8				
Total Request					$75,600

Exhibit E

Supportive Services Budget

	Eligible Costs	Quantity and Description	Amount of Assistance Requested
1	Assessment of Service Needs		
2	Assistance with Moving Costs		
3	Case Management		
4	Child Care		
5	Education Services		
6	Employment Assistance		
7	Food		
8	Housing/Counseling Services		
9	Legal Services		
10	Life Skills		
11	Mental Health Services		
12	Outpatient Health Services		
13	Outreach Services		
14	Substance Abuse Treatment Services		
15	Transportation		
16	Utility Deposits		
17	Operating Costs		
	Total Assistance Requested		$0

Narrative in Quantity and Description column is up to 400 characters. Be brief and abbreviate as much as possible.

#17, Operating Costs is for facilities providing only supportive services.

Exhibit F

Operating Budget

	Eligible Costs	Quantity and Description	Amount of Assistance Requested
1	Maintenance/Repair		
2	Property Taxes and insurance		
3	Replacement Reserve		
4	Building Security		
5	Electricity, Gas, and Water		
6	Furniture		
7	Equipment (lease, buy)		
	Total Assistance Requested		$0

Narrative in Quantity and Description column is up to 400 characters. Be brief and abbreviate as much as possible.

Exhibit G

HMIS Budget			
	Eligible Costs	**Quantity and Description**	**Amount of Assistance Requested**
1	Equipment		
2	Software		
3	Services		
4	Personnel		
5	Space & Operations		
	Total Assistance Requested		$0
	Narrative in Quantity and Description column is up to 400 characters. Be brief and abbreviate as much as possible.		

Exhibit H

Summary Budget		
	Eligible Costs	**Total Assistance Requested for Grant Term**
1a	Acquisition	
1b	Rehabilitation	
1c	New Construction	
2a	Leased Units	
2b	Leased Structures	
3	Rental Assistance	
4	Supportive Services	
5	Operating	
6	HMIS	
7	Sub-Total Costs Requested	$0
8	Administration (10%)	$0
9	**Total Assistance Requested**	**$0**
10	Cash Match	
11	In-Kind Match	
12	Total Match	$0
13	Total Program Budget	$0

Summary Budget *Example*		
	Eligible Costs	**Total Assistance Requested for Grant Term**
1a	Acquisition	
1b	Rehabilitation	
1c	New Construction	
2a	Leased Units	
2b	Leased Structures	
3	Rental Assistance	$125,000
4	Supportive Services	$60,000
5	Operating	$5,000
6	HMIS	$1,500
7	Sub-Total Costs Requested	$191,500
8	Administration (10%)	$19,150
9	**Total Assistance Requested**	**$210,650**
10	Cash Match	$50,000
11	In-Kind Match	$5,000
12	Total Match	$55,000
13	Total Program Budget	$265,650

Appendix A
Housing First Fact Sheet

RAPID RE-HOUSING RRH

APRIL 2016

FACT SHEET: HOUSING FIRST

National Alliance to End Homelessness

WHAT IS HOUSING FIRST?

Housing First is a homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life. This approach is guided by the belief that people need basic necessities like food and a place to live before attending to anything less critical, such as getting a job, budgeting properly, or attending to substance use issues. Additionally, Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life.[i]

HOW IS HOUSING FIRST DIFFERENT FROM OTHER APPROACHES?

Housing First does not require people experiencing homelessness to address the all of their problems including behavioral health problems, or to graduate through a series of services programs before they can access housing. Housing First does not mandate participation in services either before obtaining housing or in order to retain housing. The Housing First approach views housing as the foundation for life improvement and enables access to permanent housing without prerequisites or conditions beyond those of a typical renter. Supportive services are offered to support people with housing stability and individual well-being, but participation is not required as services have been found to be more effective when a person chooses to engage.[ii] Other approaches do make such requirements in order for a person to obtain and retain housing.

WHO CAN BE HELPED BY HOUSING FIRST?

A Housing First approach can benefit both homeless families and individuals with any degree of service needs. The flexible and responsive nature of a Housing First approach allows it to be tailored to help anyone. As such, a Housing First approach can be applied to help end homelessness for a household who became homeless due to a temporary personal or financial crisis and has limited service needs, only needing help accessing and securing permanent housing. At the same time, Housing First has been found to be particularly effective approach to end homelessness for high need populations, such as chronically homeless individuals.[iii]

WHAT ARE THE ELEMENTS OF A HOUSING FIRST PROGRAM?

Housing First programs often provide rental assistance that varies in duration depending on the household's needs. Consumers sign a standard lease and are able to access supports as necessary to help them do so. A variety of voluntary services may be used to promote housing stability and well-being during and following housing placement.

Two common program models follow the Housing First approach but differ in implementation. Permanent supportive housing (PSH) is targeted to individuals and families with chronic illnesses, disabilities, mental health issues, or substance use disorders who have experienced long-term or repeated homelessness. It provides longterm rental assistance and supportive services.

A second program model, rapid re-housing, is employed for a wide variety of individuals and

families. It provides short-term rental assistance and services. The goals are to help people obtain housing quickly, increase self-sufficiency, and remain housed. The Core Components of rapid re-housing—housing identification, rent and move-in assistance, and case management and services—operationalize Housing First principals.

DOES HOUSING FIRST WORK?

There is a large and growing evidence base demonstrating that Housing First is an effective solution to homelessness. Consumers in a Housing First model access housing faster[iv] and are more likely to remain stably housed.[v] This is true for both PSH and rapid re-housing programs. PSH has a long-term housing retention rate of up to 98 percent.[vi] Studies have shown that rapid re-housing helps people exit homelessness quickly—in one study, an average of two months[vii]—and remain housed. A variety of studies have shown that between 75 percent and 91 percent of households remain housed a year after being rapidly re-housed.[viii]

More extensive studies have been completed on PSH finding that clients report an increase in perceived levels of autonomy, choice, and control in Housing First programs. A majority of clients are found to participate in the optional supportive services provided,[ix] often resulting in greater housing stability. Clients using supportive services are more likely to participate in job training programs, attend school, discontinue substance use, have fewer instances of domestic violence,[x] and spend fewer days hospitalized than those not participating.[xi]

Finally, permanent supportive housing has been found to be cost efficient. Providing access to housing generally results in cost savings for communities because housed people are less likely to use emergency services, including hospitals, jails, and emergency shelter, than those who are homeless. One study found an average cost savings on emergency services of $31,545 per person housed in a Housing First program over the course of two years.xii Another study showed that a Housing First program could cost up to $23,000 less per consumer per year than a shelter program.[xiii]

[i]Tsemberis, S. & Eisenberg, R. Pathways to Housing: Supported Housing for Street-Dwelling Homeless Individuals with Psychiatric Disabilities. 2000.
[ii]Einbinder, S. & Tull, T. The Housing First Program for Homeless Families: Empirical Evidence of Long-term Efficacy to End and Prevent Family Homelessness. 2007.
[iii]Gulcur, L., Stefancic, A., Shinn, M., Tsemberis, S., & Fishcer, S. Housing, Hospitalization, and Cost Outcomes for Homeless Individuals with Psychiatric Disabilities Participating in Continuum of Care and Housing First Programmes. 2003.
[iv]Gulcur, L., Stefancic, A., Shinn, M., Tsemberis, S., & Fishcer, S. Housing, Hospitalization, and Cost Outcomes for Homeless Individuals with Psychiatric Disabilities Participating in Continuum of Care and Housing First programs. 2003.
vTsemberis, S. & Eisenberg, R. Pathways to Housing: Supported Housing for Street-Dwelling Homeless Individuals with Psychiatric Disabilities. 2000.
[vi]Montgomery, A.E., Hill, L., Kane, V., & Culhane, D. Housing Chronically Homeless Veterans: Evaluating the Efficacy of a Housing First Approach to HUD-VASH. 2013.
[vii]U.S. Department of Housing and Urban Development. Family Options Study: Short-Term Impacts. 2015.
[viii]Byrne, T., Treglia, D., Culhane, D., Kuhn, J., & Kane, V. Predictors of Homelessness Among Families and Single Adults After Exit from Homelessness Prevention and Rapid Re-Housing Programs: Evidence from the Department of Veterans Affairs Supportive Services for Veterans Program. 2015.
[ix]Tsemberis, S., Gulcur, L., & Nakae, M. Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals with a Dual Diagnosis. 2004.
[x]Einbinder, S. & Tull, T. The Housing First Program for Homeless Families: Empirical Evidence of Long-term Efficacy to End and Prevent Family Homelessness. 2007.
[xi]Gulcur, L., Stefancic, A., Shinn, M., Tsemberis, S., & Fishcer, S. Housing, Hospitalization, and Cost Outcomes for Homeless Individuals with Psychiatric Disabilities Participating in Continuum of Care and Housing First programs. 2003.
[xii]Perlman, J. & Parvensky, J. Denver Housing First Collaborative: Cost Benefit Analysis and Program Outcomes Report. 2006.
[xiii]Tsemberis, S. & Stefancic, A. Housing First for Long-Term Shelter Dwellers with Psychiatric Disabilities in a Suburban County: A Four-Year Study of Housing Access and Retention. 2007.

Appendix B
Approved CoC Best Practices
Emergency Shelter Programs

Emergency shelter (ES) is emergency housing and related supportive services provided in a safe, protective environment for individuals and families who have no alternative places to reside or housing resources to utilize.

Access to Emergency Shelter:

- ES can be accessed by anyone in Saint Louis who is experiencing homeless – men, women, and children regardless of residential origin.
- Individuals and families accessing ES are seeking permanent housing solutions.
- Referrals to ES are made solely from Front Door providers. ES providers are not to accept any referrals from other sources.
- If space is available, ES providers can accept a limited number of referrals from Saint Louis PD who transport a person experiencing a nighttime emergency to the shelter. That person would then need to obtain a referral from the Front Door the following day.
- ES programs will not require consumer sobriety or income for entry and access to services

Emergency Shelter Services:

- ES is a safe place to sleep overnight. ES provides basic needs (bed, food, drink, hygiene products, clothing (if available), showers, blankets, etc.). If ES providers are not open to provide services during the day, partnerships should be in place so that these services are available 24 hours a day.
- Shelter and housing focused case management services are offered 24 hours a day. If 24 hour services are not available, partnerships should be in place for necessary referrals. Resource referrals should include, but are not limited to vocational, medical, mental health, substance abuse, and benefits assistance (i.e. food stamps, SSI).
- ES offers crisis services for circumstances needing immediate attention (medical, familial, mental health, etc.).
- ES providers will have policies that allow for service to individuals under the influence of drugs and/or alcohol. These policies will ensure the safety of staff and fellow consumers.
- Length of clients' stay in ES is based on the clients' exit to housing, using the CoC target benchmarks as a guide.
- ES providers will offer reasonable accommodations for individuals with disabilities.
- Transgender clients are able to receive ES services based on the gender they identify with.
- Intake processes should address all shelter and privacy policies. Hard copies of these policies must be given to each consumer.
- ES consumers have freedom to choose the services they need and ES providers will not require consumers to save money.
- ES providers focus on services and supports that will help consumers be successful and satisfied in housing rather than on symptom reduction.

Emergency Shelter Operations:

- HMIS compliance
  a. All programs should be trained and aware of the HMIS standards and enter data accordingly
  b. All programs will enter data into HMIS accurately and in a timely manner
  c. Ensure confidentiality of all consumer data entered by obtaining informed consent
- Shelter exits occur under the following conditions: when consumers choose to leave, are not engaged in housing-focused services, referred to housing programs, or do not adhere to shelter policies and procedures.
- Shelters must have in place standardized guidelines for involuntary termination of client services, due process, and timeframes for re-admittance to services.
- Consumer evaluation of shelter services must be conducted annually to ensure quality of services.
- At a minimum ES programs use community-wide standard performance measures established through the CoC among their core program outcomes.

Emergency Shelter Coordination:

- An Emergency Shelter Subcommittee composed of both administrative and front line staff will meet quarterly to improve and standardize the services offered in shelters and to create professional development opportunities for shelter staff.
- At least one member of the Emergency Shelter Subcommittee will attend the monthly meeting of Street Outreach staff. The Emergency Shelter Subcommittee together with Street Outreach will share information and collaborate to serve clients with the highest needs – in particular, clients who move rapidly between street and shelter. This collaboration must be visible in HMIS.

Transitional Housing Programs

Transitional housing (TH) is non-emergency housing for individuals and families experiencing homelessness. TH is free or low-cost subsidized housing directly available through a TH program. TH affords more privacy and independence than emergency shelter.

Access to Transitional Housing:

- TH can be accessed by anyone in Saint Louis who is experiencing homelessness- men, women, and children regardless of residential origin.
- Individuals and families accessing TH are seeking permanent housing solutions.
- Referrals to TH are made solely from Front Door providers. TH providers are not to accept any referrals from other sources.
- The VI-SPDAT will be the standardized assessment tool by which a consumer will be approved to receive TH services. TH is accessed by individuals/families that have a medium acuity level with transitional issues (as defined by the CoC).
- TH programs will not require consumer sobriety or income for entry and access to services.

Transitional Housing Services:

- Housing focused case management services are offered 24 hours a day; if not possible, partnerships should be in place for necessary referrals. Resource referrals should include, but are not limited to vocational, medical, mental health, substance abuse, and benefits assistance (i.e. food stamps, SSI).
- TH providers offer crisis services for circumstances needing immediate attention (medical, familial, mental health, etc.).
- Length of services is based on the clients' exit to housing, using the CoC target benchmarks as a guide.
- TH programs will offer reasonable accommodations for individuals with disabilities.
- Transgender clients are able to receive TH services based on the gender they identify with.
- Intake processes should address all program policies. Hard copies must be given to each consumer.
- TH consumers have freedom to choose the services they need and housing matches consumer preferences.
- TH providers focus on services and supports that will help consumers be successful and satisfied in housing rather than on symptom reduction.

Transitional Housing Operations:

- HMIS compliance
  a. All programs should be trained and aware of the HMIS standards and enter data accordingly
  b. All programs will enter data into HMIS accurately and in a timely manner
  c. Ensure confidentiality of all consumer data entered by obtaining informed consent
- Adherence to Housing First Principles
  a. Continued housing is not dependent on participation in services
  b. Consumers are moved into housing directly from the street/shelter without preconditions of treatment acceptance or compliance
  c. Harm reduction approach rather than mandating abstinence
  d. Residents have leases and tenant protection under the law
  e. Can be implemented in either project based or scattered site model
- TH exits occur under the following conditions: when consumers choose to leave, are not engaged in housing focused services, referred to housing programs, non-adherence to program policies and procedures.
- Consumer evaluation of TH services must be conducted annually to ensure quality of services.
- TH services may be provided through any of the following types of housing:
  a. Organization owned and leased;
  b. Organization owned and managed by a property management company;
  c. Leased by organization;
  d. Off-site, one location; and
  e. Off site, scattered locations
- At a minimum TH programs use community-wide standard performance measures established through the CoC among their core program outcomes

Permanent Supportive Housing Programs

Permanent Supportive Housing (PSH) is a proven, effective means of reintegrating chronically homeless and other highly vulnerable homeless families and individuals with psychiatric disabilities or chronic health challenges into the community by addressing their basic needs for housing and providing ongoing support.

Access to Permanent Supportive Housing:

- PSH can be accessed by anyone in Saint Louis who is experiencing homelessness- men, women, and children regardless of residential origin.
- Individuals and families accessing PSH are seeking permanent housing solutions.
- Referrals to PSH are made solely from Front Door providers. PSH providers are not to accept any referrals from other sources.
- The VI-SPDAT will be the standardized assessment tool by which a consumer will be approved to receive PSH services. PSH is accessed by individuals/families that have a high acuity level; targeted for the most vulnerable homeless person in the community
- PSH programs will not require consumer sobriety or income for entry and access to services.

Permanent Supportive Housing Services:

- Housing focused case management services are offered 24 hours a day; if not possible, partnerships should be in place for necessary referrals. Resource referrals should include, but are not limited to vocational, medical, mental health, substance abuse, and benefits assistance (i.e. food stamps, SSI).
- PSH providers offer crisis services for circumstances needing immediate attention (medical, familial, mental health, etc.).
- PSH providers provide person-centered services that are holistic in nature, working as a team with client to provide practical assistance, emotional support and teaching life skills; services are flexible, voluntary and recovery-focused.
- Length of services is based on the clients' exit to housing other than PSH, using the CoC target benchmarks as a guide.
- PSH programs will offer reasonable accommodations for individuals with disabilities.
- Transgender clients are able to receive PSH services based on the gender they identify with.
- Intake processes should address all program policies. Hard copies must be given to each consumer.
- PSH tenants have freedom to choose the services they need and housing matches consumer preferences.
- PSH providers focus on services and supports that will help consumers be successful and satisfied in housing rather than on symptom reduction.
- PSH services should include but not limited to: outreach and engagement, ensuring client choice in housing, assisting to find and secure housing, help with apartment set-up, move in and getting utilities turned on client's name, ongoing community support services directed by yearly assessment and treatment planning, mediating issues between client and landlord, working closely with landlord to avoid any evictions, ensuring utilities remain on during length of stay in housing
- PSH tenants have rights to tenancy: privacy, repairs, and protection against eviction
- PSH providers need to be knowledgeable of both the rights and responsibilities of both the tenants and landlords

Permanent Supportive Housing Operations:

- HMIS compliance
  a. All programs should be trained and aware of the HMIS standards and enter data accordingly
  b. All programs will enter data into HMIS accurately and in a timely manner
  c. Ensure confidentiality of all consumer data entered by obtaining informed consent
- PSH services may be provided through any of the following types of housing:
  a. Organization owned and leased;
  b. Organization owned and managed by a property management company;
  c. Leased by organization;
  d. Off-site, one location; and
  e. Off site, scattered locations
- If a single agency conducts property management and service provision, it is important to ensure that confidentiality is maintained and that coercion does not occur. PSH providers will assign individual staff to either property management or support service duties.
- PSH providers will adhere to the PSH guidelines for operating a PSH program as outlined in the CoC Interim Rule legislation issued by HUD
- PSH providers will ensure that Housing Quality standards are met prior to move-in and yearly thereafter
- Adherence to Housing First Principles
  a. Continued housing is not dependent on participation in services
  b. Consumers are moved into housing directly from the street/shelter without preconditions of treatment acceptance or compliance

c. Harm reduction approach rather than mandating abstinence
d. Residents have leases and tenant protection under the law
e. Can be implemented in either project based or scattered site model

- PSH providers will adhere to eligibility requirements with correct and accurate documentation confirming disability and homeless status on file
- PSH consumers will not pay more than 30 percent of income toward their rent as outlined in HUD guidelines
- PSH consumers will be educated by CoC and PSH programs on how to gain access to the appropriate PSH program
- At a minimum PSH programs use community-wide standard performance measures established through the CoC among their core program outcomes
- PSH programs will have a goal to "graduate" clients as they are ready and able to safe, affordable and appropriate permanent housing
- Consumer evaluation of PSH services must be conducted annually to ensure quality of services.

St. Louis City CoC Best Practices
Approved 03/17/2016

Rapid Rehousing Programs

Rapid rehousing (RRH) is an intervention that rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services. Rapid rehousing programs help families and individuals living on the streets or in emergency shelters solve the practical and immediate challenges to obtaining permanent housing while reducing the amount of time they experience homelessness, avoiding a near-term return to homelessness, and linking to community resources that enable them to achieve housing stability in the long-term.

Access to Rapid Rehousing:

- RRH can be accessed by anyone in Saint Louis who is experiencing homelessness- men, women, and children regardless of residential origin.
- Individuals and families accessing RRH are seeking permanent housing solutions.
- Referrals to RRH are made solely from Front Door providers. RRH providers are not to accept any referrals from other sources.
- The VI-SPDAT will be the standardized assessment tool by which a consumer will be approved to receive RRH services. RRH is accessed by individuals/families that have a medium acuity level.
- RRH programs will not require consumer sobriety or income for entry and access to services.

Rapid Rehousing Services:

- Housing focused case management services are offered 24 hours a day; if not possible, partnerships should be in place for necessary referrals. Resource referrals should include, but are not limited to vocational, medical, mental health, substance abuse, and benefits assistance (i.e. food stamps, SSI).
- RRH providers offer crisis services for circumstances needing immediate attention (medical, familial, mental health, etc.).
- RRH providers provide person-centered services that are holistic in nature, working as a team with client to provide practical assistance, emotional support and teaching life skills; services are flexible, voluntary and recovery-focused.
- Length of services is up to one year, using the CoC target benchmarks as a guide.
- RRH programs will offer reasonable accommodations for individuals with disabilities.
- Transgender clients are able to receive RRH services based on the gender they identify with.
- Intake processes should address all program policies. Hard copies must be given to each consumer.
- RRH tenants have freedom to choose the services they need and housing matches consumer preferences.
- RRH providers focus on services and supports that will help consumers be successful and satisfied in housing rather than on symptom reduction.
- RRH services should include but not limited to: outreach and engagement, ensuring client choice in housing, assisting to find and secure housing, help with apartment set-up, move in and getting utilities turned on client's name, ongoing community support services directed by yearly assessment and treatment planning, mediating issues between client and landlord and working closely with landlord to avoid any evictions.
- RRH providers need to be knowledgeable of both the rights and responsibilities of both the tenants and landlords.
- PSH providers need to be knowledgeable of both the rights and responsibilities of both the tenants and landlords

Rapid Rehousing Operations:

- HMIS compliance
  d. All programs should be trained and aware of the HMIS standards and enter data accordingly
  e. All programs will enter data into HMIS accurately and in a timely manner
  f. Ensure confidentiality of all consumer data entered by obtaining informed consent
- If a single agency conducts property management and service provision, it is important to ensure that confidentiality is maintained and that coercion does not occur. RRH providers will assign individual staff to either property management or support service duties.
- Adherence to Housing First Principles
  f. Continued housing is not dependent on participation in services
  g. Consumers are moved into housing directly from the street/shelter without preconditions of treatment acceptance or compliance
  h. Harm reduction approach rather than mandating abstinence
  i. Residents have leases and tenant protection under the law

j. Can be implemented in either project based or scattered site model
- At a minimum RRH programs use community-wide standard performance measures established through the CoC among their core program outcomes
- Consumer evaluation of RRH services must be conducted annually to ensure quality of services.

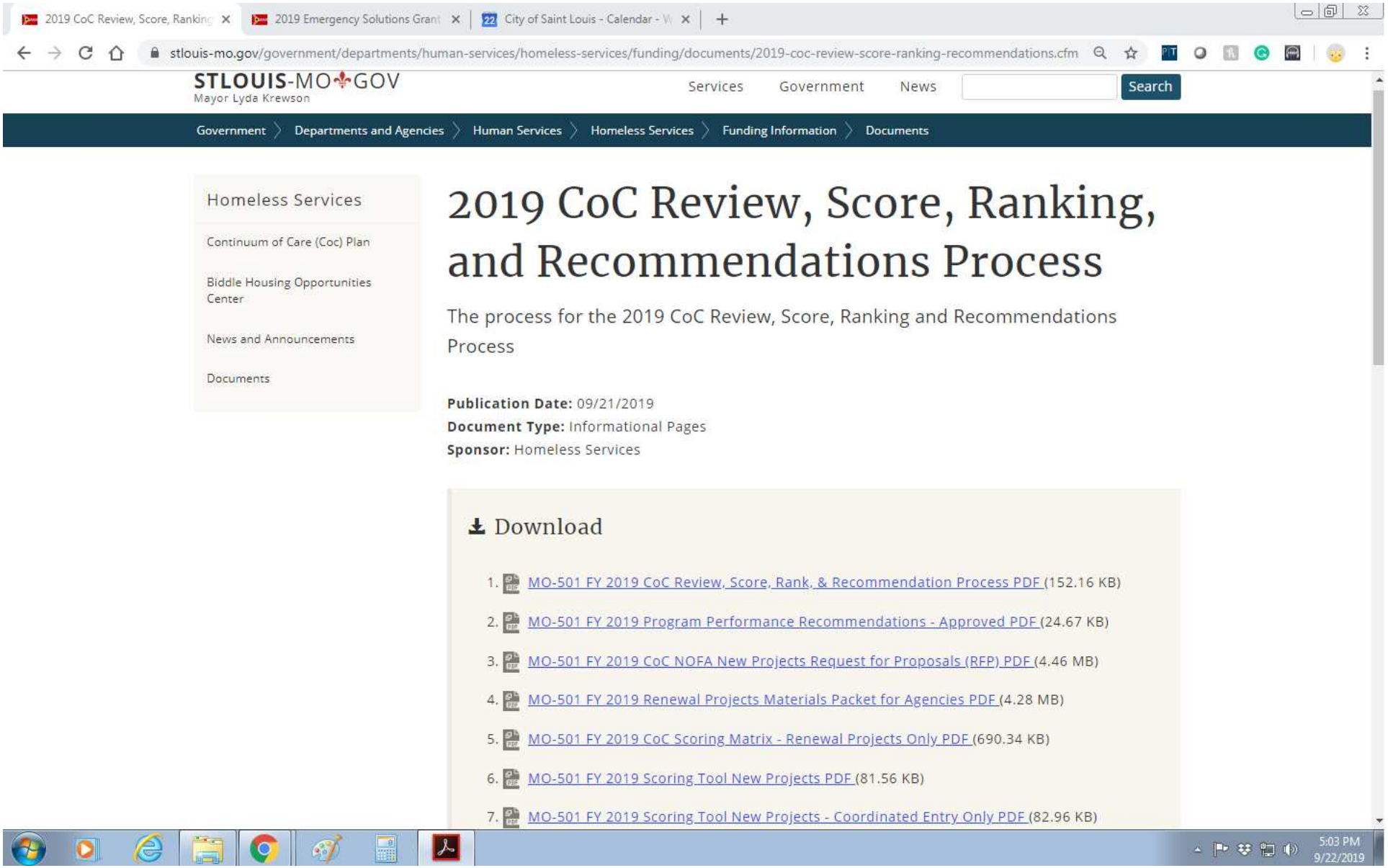
Domestic Violence Programs

Domestic Violence Programs (DV) are programs whose primary mission is to provide direct services to victims of domestic violence. This includes emergency domestic violence shelters, non-residential programs, domestic violence transitional housing programs, dual domestic violence and sexual assault programs, and related advocacy and supportive services and programs.

Access to Domestic Violence Programs:
- DV providers will comply with the general best practices for ES providers, with the following exception. DV providers will not solely accept referrals from the front doors. Each DV provider will operate as their own front door and have the ability to receive self-referrals and referrals from other sources as well.
- DV providers should comply with the applicable best practices of the Missouri Coalition Against Domestic and Sexual Violence.

Domestic Violence Services:
- DV providers' highest priority is the safety and rights of the survivor.
- Case management, crisis intervention, counseling and other supportive services focus on the provision of information, advocacy, safety planning, empowerment and support to reinforce the individual's autonomy, self-determination and safety.
- DV providers will have policies and procedures that safeguard the confidentiality and safety of survivors.
- DV services should comply with the applicable best practices of the Missouri Coalition Against Domestic and Sexual Violence.

Domestic Violence Operations:
- DV providers must ensure the confidentiality of any individuals seeking or receiving services.
- DV providers are not required to enter data into HMIS.
- When placing a survivor on the housing waiting list, DV providers will use a unique identifier, rather than the survivor's name or other identifying information.
- Quality assurance measures must be conducted regularly to ensure quality of services.
- DV operations should comply with the applicable best practices of the Missouri Coalition Against Domestic and Sexual Violence.


2019 CoC Review, Score, Ranking
2019 Emergency Solutions Grant
City of Saint Louis - Calendar -
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Homeless Services
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Documents
Homeless Services
Continuum of Care (Coc) Plan
Biddle Housing Opportunities Center
News and Announcements
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2019 CoC Review, Score, Ranking, and Recommendations Process
The process for the 2019 CoC Review, Score, Ranking and Recommendations Process
Publication Date: 09/21/2019
Document Type: Informational Pages
Sponsor: Homeless Services
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1. MO-501 FY 2019 CoC Review, Score, Rank, & Recommendation Process PDF (152.16 KB)
2. MO-501 FY 2019 Program Performance Recommendations - Approved PDF (24.67 KB)
3. MO-501 FY 2019 CoC NOFA New Projects Request for Proposals (RFP) PDF (4.46 MB)
4. MO-501 FY 2019 Renewal Projects Materials Packet for Agencies PDF (4.28 MB)
5. MO-501 FY 2019 CoC Scoring Matrix - Renewal Projects Only PDF (690.34 KB)
6. MO-501 FY 2019 Scoring Tool New Projects PDF (81.56 KB)
7. MO-501 FY 2019 Scoring Tool New Projects - Coordinated Entry Only PDF (82.96 KB)
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2019 Continuum of Care Competition
CoC Program Performance Committee (aka Rank & Review)
Review, Score, Ranking and Recommendations Process

Rank & Review Committee Project Evaluation

The St. Louis City Continuum of Care's Program Performance Committee (aka Rank & Review) exists to advance our CoC's mission and goals to prevent homelessness whenever possible, to reduce the duration and impact of homelessness on our unhoused neighbors and to reduce returns to homelessness by objectively evaluating the effectiveness of existing CoC funded projects.

Program Performance's annual evaluation informs committee recommendations to CoC leadership as to how our limited CoC funding can best be used to reduce the impacts of homelessness on our community. Program Performance's work includes the evaluation, scoring and ranking of renewal Projects, the identification of CoC funding recommended for reallocation, as well as the evaluation, scoring and ranking of new and bonus Project applications. Program Performance strives to arrive at data driven, strategic funding recommendations that are predicated on each project's positive and lasting impacts on the households they serve while also positively contributing to improved CoC System-Wide Performance.

Reallocation of CoC Funding

Program Performance's evaluation process also must identify under-performing programs and/or programs that are in whole or in part are not addressing our community's most pressing needs and if appropriate, recommend the reallocation of funding to new projects.

Program Performance reviews all renewal projects for performance outcomes to ensure they are high performing projects, with an eye toward reallocating funding away from any projects that: are not well-performing as demonstrated by HMIS data; do not expend all their CoC grant funding; or that no longer fill a critical gap in the Continuum and would be better allocated to a new Project seeking to fill such a gap.

Following the FY2018 CoC NOFA season, in order to ensure lower performing projects were given ample support and opportunity to implement programmatic changes prior to issuance of recommendation of funding reallocation, the Committee provided various supports to assist with program performance improvements and to prepare CoC partners for the Committee's data driven decision-making processes for FY2019, including:

- ☐ Met with all Projects seeking feedback on programmatic areas upon which to focus to improve performance outcomes;
- ☐ Worked with our CoCs Systems Performance Committee to identify our Continuum's most pressing unmet needs in the event that funding is identified for reallocation;
- ☐ Worked with our Collaborative Applicant / Monitoring Agent to better align Program Compliance Monitoring with our CoC's areas of performance focus, including HUD Program Performance Measures, evidence based best-practices and alignment with national and local CoC priorities and policies. These efforts seek to ensure that the Committee has the most comprehensive yet objective Project information to inform the Rank and Review process while also offering Programs the opportunity to identify and correct performance issues and ensure their positive impact on our CoC's system-wide performance.
- ☐ Reviewed monthly spend down reports for all Projects and implemented practices for alerting the CoC Board and all Projects struggling to spend down at a rate that risked leaving more than 5% of the Project award unspent and then assisted in developing strategies for ensuring all funding was made available to households in need.

For FY2019, renewal projects shall be considered for a partial or total reallocation of funding if the project:

- ☐ Scores among the lowest performers, with a focus on projects that also scored low in this regard in 2018.
- ☐ Failed to spend more than 10% of their CoC funding award at the conclusion of its last completed contract year.
- ☐ The Project is in whole or part identified as no longer filling a critical unmet gap in the Continuum.

In the event funding reallocations are identified, the Committee shall strive to allocate said funding to new project applicants that fill a critical gap in our Continuum for an identified priority population with a particular focus on our most underserved populations as identified by our System Performance data and System Performance committee recommendations.

Project Scoring

Program Performance uses objective data-driven tools to evaluate and score all renewal and new project applications. The scoring tools were designed and re-designed to identify our CoC's highest to lowest performing projects through data and project information to determine the project's efficiencies and effectiveness. Scoring areas focus on key systems performance measures and CoC priorities, including:

- ☐ Positive Housing Outcomes / Returns to Homelessness;
- ☐ Income Performance Measures;
- ☐ Bed Utilization;
- ☐ Severity of Needs Served by the Project;
- ☐ Commitment to Coordinated Entry Policies and Procedures;
- ☐ A Demonstrated Commitment to Housing First Practices;
- ☐ Spend down rate;
- ☐ Level of involvement/investment in our CoC;
- ☐ Past contract year compliance monitoring results.
- ☐

In an effort to be objective and data driven in our Scoring and Ranking process, the Committee relies heavily on data collected by Projects within our HMIS System. Our community partners serving Domestic Violence (DV) survivors are prohibited from entering data in HMIS. These partners submitting renewal or new Project applications will be evaluated based upon the data generated by comparable databases used by the Applicant.

In addition, our CoC and its DV Services Partners have developed data sharing systems for the purposes of ensuring that DV survivors have equal access to housing resources made available through our local Coordinated Entry System. As a result, many of our CoC funded Projects are serving DV survivors referred via Coordinated Entry. When DV histories are disclosed by households served, that information is recorded in HMIS by the CoC Project and aggregate data on the numbers of DV survivors served by a Project is considered when evaluating the extent to which a Project is serving this Priority Population.

All applications are scored by Committee members who have no relationship to the pool of Project applications. All applications are scored independently by at least 2 committee members and then those scores are averaged to determine the final score. If questions or concerns prevent completion of 2 scoring reviews for any application, the questions or

concerns will be presented by the reviewers to a review committee made up of Program Performance Committee members and/Executive Board members who will make a final determination on the matter and final scores will be determined accordingly.

The evaluation and scoring tools used are attached. The score categories demonstrate our CoC's commitment to objective data-driven decisions.

Project Ranking

Using Housing Inventory Chart data, PIT findings, system performance measure reports, the priority populations established by the CoC, Hearth Act requirements and related systems and program implementation guidance from HUD, the Program Performance Committee developed scoring and priority ranking criteria for renewal and new projects.

All renewal projects will be initially ranked in order based on the score awarded by the Committee in accordance with evaluation tools and program performance data as tracked in HMIS with a focus on the following areas:

Lower scoring renewal projects filling a critical systems gap will be given further consideration when determining their placement in the rank and the assignment of Tier One verses Tier Two status. Renewal projects, that continue to fill a critical need in the CoC may be prioritized above new projects to be funded with reallocated funding.

All directives and guidance published by HUD in connection with the FY2019 CoC Funding Competition may be considered in determining final Project Rankings.

Projects leaving more than 10% of Project funding unspent at the conclusion of their last full contract year may be placed at the bottom of Tier One or in Tier Two.

First year projects that were not under contract as of June 30, 2019 and thus had no project data to analyze will be placed towards the bottom of Tier One.

Our CoC funded HMIS contract and Coordinated Entry contract will be placed at the bottom of Tier One, in recognition of our system-wide reliance on these contracts.

In the event there is an opportunity under the NOFA to consolidate Projects, Applicants interested in submitting a consolidated Project application must indicate so in writing when submitting their Project information to the Committee. Each Project slated for consolidation will be scored individually and its Ranking will be established in accordance with that score and other relevant CoC policies. In addition, the mean (average) score for the Projects to be consolidated will be determined to that score will be used to rank the consolidated Project.

In addition to the above, Program Performance may consider the following for renewal, new and bonus project rankings to arrive at the final overall ranking (in no particular order of emphasis):

- ☐ Unique gap/target population served by project;
- ☐ Level of negative impact to Continuum if project were not funded (or funding was reduced); capacity among other

CoC Project's to ensure continuity of supports to those served by the project to be cut, in whole or part;

- ☐ Expertise and capacity of project applicant and any subrecipient;
- ☐ Severity of needs and vulnerabilities experienced by project participant.

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2019 Scoring Tool for CoC Renewal Projects With Contracts

Project Name:	**Agency:**	
Grant #:	**Reviewer:**	
Housing Component: ❑ **Permanent Supportive Housing** ❑ **Rapid Re-housing** ❑ **Transitional Housing for Youth** ❑ **Other**	**Project Self Score:**	**R&R Initial Score:**
	R&R Final Score:	

Refer to your Program's APR data for 5/1/2018 through 4/30/2019 (or your Project's start date through 4/30/2019 for first year contracts) and your completed Project Cover Sheet when self-scoring. Please note that there are 233 total available points.

A. General Information: 10 points available overall (for A.1)	**Points Available/Method of Measurement**	**Self - Score**	**R&R Initial Score**	**R&R Final Score**
1. All required documents submitted <u>and</u> submitted on time (6/17/19 is the deadline): ☐ The ICA HMIS Project Performance Report used to complete your Cover Sheet ☐ The Project APR for date range 5/1/18 through 4/30/19 or from the Project start to 4/30/19 if a first year Project. ☐ ICA HMIS Data Quality Report Card as of 4/30/19 ☐ 2019 CoC Assessment of Community Involvement Form ☐ 2019 CoC Monitoring Agent Certification ☐ A COMPLETE 2019 Cover Sheet for CoC Renewal Projects with Contracts, with attached Narrative, if applicable ☐ A SELF-SCORED 2019 CoC Scoring Matrix for Renewal Contracts (this document) ☐ Housing First Standards self-assessment	Yes = 10 points No = 0 points			

B. Alignment with Priority Populations, Coordinated Entry (CE) and Housing First: 71 points available (for B-2 thru B-5)	Points Available/Method of Measurement	Self - Score	R&R Initial Score	R&R Final Score
2. **Project serves a priority population (Chronic, Vets, Youth 18-24, Families with Children, DV History, Medically Fragile (3+ Conditions at Start).** Up to 18 points possible. *Source: Cover Sheet; APR; ICA Program Performance Report tracking Project Household characteristics data for 5/1/18 through 4/30/19.*	For all Non-Youth Projects (RRH/PSH): For each of the 6 priority populations, if 25% or more units/beds were occupied by priority population households, you receive 3 points (up to 18 points if you served all 6 populations) For all Youth Projects (PSH/THP): For each of the priority populations, if 15% or more units/beds were occupied by households indicating a priority population status, you receive 3 points (up to 18 points if you served all 6 populations)			
3. **Demonstrated commitment to Coordinated Entry system as evidenced by percentage of entries from CE referral.** Up to 18 points possible. *Source: Cover Sheet; ICA Metric 11 - Project Entries through CE Report,* 5/1/18 through 4/30/19	100% = 18 points 90% to 99% = 15 points 80% to 90% = 10 points 79% or below = 0 points			
4. **Demonstrated commitment to Coordinated Entry system as evidenced by rate of participation in Weekly Housing Match Meetings.** Up to 10 points possible. *Source: Cover Sheet; Applicant Assessment of Community Involvement from CoC Exec Board.*	80-100% = 10 points 70-79% = 5 points 69% or below = 0 points			
5. **Demonstrated commitment to Housing First principles and policies.** Up to 25 points possible. *Source: Cover Sheet; HUD Housing First tool*	90-100% = 25 points 80-89.9% = 20 points 70-79.9% = 10 points 60-69.9% = 5 points 59% and below = 0 points			

C. Program Performance Measures: 70 points available (for C-6 thru C-8)	Points Available/Method of Measurement	Self - Score	R&R Initial Score	R&R Final Score
6. **Housing Performance Measures** (specific to type of housing component- TH, PH-RRH or PH-PSH). 25 Points available *Source: Cover Sheet, ICA Matrix 7- Permanent Housing Placement / Retention for PSH; Permanent Housing Placement for TH and RRH.*	**Transitional & Permanent Housing for Youth** 75-100% = 25 points 60-74% = 15 points 40-59% = 8 points 39% or below = 0 points **Permanent Supportive Housing & Rapid Re-Housing for Adult Head of Households** 90-100% = 25 points 80-89% = 15 points 60-79% = 8 points 59% or below = 0 points			
7. **Total Income Performance Measures** specific to type of housing: Transitional Housing (TH), Permanent Supported Housing / Rapid Re-housing (PH-RRH) or Permanent Housing. Provide combined data for stayers and leavers. 25 points available *Source: Cover Sheet, APR Report*	**Youth Projects (PSH & TH)**: Increase or maintain Income (All Sources) 45 - 100% = 25 points 30 - 44% = 18 points 20 - 29% = 12 points 10 – 20 % = 7 points 9% or below = 0 points **Permanent Housing (PSH & RRH): Increase or Maintain Income (All Sources)** 65 - 100% = 25 points 50 - 64% = 18 points 40 - 49% = 12 points 35 - 39% = 7 points 34% or below = 0 points			
8. **Bed Rate Utilization.** Up to 20 points available *Source: APR report "Number of Households Served"*	More than 100% = 20 points 90% to 99.9% = 15 points 80% to 89.9% = 10 Points 79.9% or less = 0 Points			

D. Fiscal Practices: 35 points available (D-9)	Points Available/Method of Measurement	Self - Score	R&R Initial Score	R&R Final Score
9. **Reasonable expenditure of HUD funds (Project Spenddown of CoC Funds)**. Up to 35 points available *Source: Cover Sheet, Project Applicant Compliance Summary from Project Monitoring Agent*	2% or less unspent funds = 35 points 2.1 to 5% unspent funds = 18 points 6% or more unspent funds = 0 points			
E. CoC/Community Involvement & Program Compliance 47 points available (for E-10 thru E-16)	**Points Available/Method of Measurement**	**Self - Score**	**R&R Initial Score**	**R&R Final Score**
10. **Decision maker attendance at CoC Membership Mtgs**. Up to 4 points available *Source: Cover Sheet, Applicant Assessment of Community Involvement from CoC Exec Board.*	75-100% Meeting attendance = 4 points			
11. **A Project Decision maker(s) is an active member of at least one CoC committee.** Up to 2 points. *Source: Cover Sheet, Applicant Assessment of Community Involvement from CoC Exec Board*	A Project Decision Maker is an active member of at least one CoC Committee or sub-committee = 2 points.			
12. **A Project Decision maker(s) plays leadership role in at least one CoC Committee or sub-Committee as Committee Chair, Co-Chair or Vice-Chair, or is an at large member of the CoC board**. Up to 4 points. *Source: Cover Sheet, Applicant Assessment of Community Involvement Certification from CoC Executive Board*	A Project Decision Maker is acting as Chair, Co-Chair or Vice-Chair for at least one CoC Committee = 4 points.			
13. **Project's HMIS Data Quality.** Up to 15 points available *Source: Cover Sheet, HMIS Data Quality Report Card*	A = 15 points B = 8 points C or below = 0 points			

14. **Project's HUD / DHS / CoC Contract Compliance Monitoring Outcomes**. Up to 10 points available. *Source: Cover Sheet, Project Applicant Compliance Summary from Project Monitoring Agent*	All project monitoring findings were corrected within 30 days of notice of finding when last monitored = 10 points			
15. **Project's HUD / DHS / CoC Contract Fiscal Compliance Monitoring Outcomes**. Up to 10 points available. *Source: Cover Sheet, Project Applicant Compliance Summary from Project Monitoring Agent*	At least 80% of Project's monthly billings were submitted on-time and approved as initially submitted = 10 points			
16. **Participation in Point-in-Time Count** *Source: Roster of PIT participation*	Agency participated in PIT: 2 Agency did not participate in PIT: 0			
FY 2019 test questions (not used in final score)	**Points Available/Method of Measurement**	**Self - Score**	**R&R Initial Score**	**R&R Final Score**
17. **HMIS Data Entry Timeliness**. Up to 5 points available *Source: ICA report, project entries entered in 24 hours divided by total project entries*	• 70-100% of entries entered 0-1 day = 5 points • 50-69% of entries entered within 0-1 day = 3 points • Less than 49% of entries entered within 0-1 day = 0 points			
18. **Project Cost Effectiveness**. Up to 20 points available *Source: 2018 GIW (total CoC funding award for project) and ICA Metric 7; Cover sheet*	Project cost per positive outcome: • Less than average cost for comparable project=20 points • .1%-5% more than average comparable= 10 points • 6-10% more than average cost comparable= 5 points • 10%+ more than average cost comparable= 0 points			

I,_____(print name), in my capacity as the most senior executive for the Agency administering the subject CoC Program contract, hereby certify that I have reviewed all final documents prepared for submission to the Program Performance Committee and used those documents to complete the above self-scoring exercise.

By: _____

_____
Title

_____
Date

2019 Scoring tool new project applications – Permanent Supportive Housing, Rapid Rehousing, or Transitional-Rapid Rehousing & Domestic Violence specific projects

Requirements:

1. For all projects: Is at least 25% of the budget being matched, excluding leasing (y/n)
2. For expansion projects: are they in the top 10 from 2018? (y/n)

A. Project Description, Scope, and Relevance/Statement of Priorities (35 points/40 points DV only):
To what degree do you agree with the following statements:

1. The description addresses the entire scope of the project, is comprehensive and relevant to meeting the needs of the Client Population to be served, and demonstrates understanding and commitment to adhering to CoC Program Standards established for the project type.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

2. The applicant fully describes the evidence base for the efficacy of the program model.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

3. The applicant describes adherence to Housing First principles/approach.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

4. Applicant describes coordinated Entry process/reaching people with barriers to assistance
    i. Describes extensive activities the program will utilize to overcome barriers to assistance for the clients
    ii. CE Referral Process describes a “warm hand off” (the referring agency reaching out to the agency receiving the referral) in referring client to the appropriate housing or services

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

5. For DV only – Applicant demonstrates trauma-informed, victim-centered approaches.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

6. Applicant describes project milestones address:
    a. Staffing - When new staff will be hired or when other project expenses begin
    b. Enrollment - When participant enrollment in the project will begin
    c. Housing/Supportive Services - When participants will begin to occupy leased units or structures and when supportive services will begin
    d. Reach Capacity - When it is projected that leased or rental units or structures and supportive services will near 100% capacity
    e. Property Development - If applicable, proposed development activities and responsibilities associated with developing, operating and maintaining the property are described

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

7. Applicant describes requirements for living in a structure/unit/locality
    a. Addresses whether or not participants will be required to live in a particular structure, unit or locality at some point during their participation—suitable for the population described
    b. Description of the type of housing to be provided is suitable for the population described and indicates whether more than 16 persons will live in one structure

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

8. Number of beds provided - Indicate the maximum number of units and beds available for the proposed project [Joint TH-RRH projects responding to this criteria designate the number of units and beds for each component separately, for TH the number of units and beds includes both CoC funded and non-funded reflecting the project's full TH capacity and designates sources of non-CoC funding (e.g., ESG, VASH, etc.)]

B. Client Population (20 points)

1. Applicant clearly identifies and describes the characteristics and needs of the clients the proposed project is intended to serve
    i. NOTE: PSH projects must state whether the project will be dedicated 100% to Chronic homeless or whether the project will target DedicatedPlus

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

2. Priority Population – Population of focus for the project includes a priority population below (1 point for each priority population to be served for up to 5 points)
    1. Chronic homeless
    2. Veterans
    3. Youth under age 25
    4. Domestic Violence

5. Medically fragile

3. Number to be Served _____.
   Applicant provided estimates of the numbers of each of the populations to be served in Exhibit B and the subpopulations to be served in Exhibit C. To be used in final ranking.

C. Case Management and Services Planning (10 points total, 2 points for each criteria listed) - Applicant's project as described demonstrates:

1. Service Plans:
   i. Are based on individualized assessments. It is clear from the response how individual plans will be developed and implemented.
   ii. Services provided are personalized, address strengths/needs of each participant. It is clear from the response how needs will be identified.

   0 2
   No Yes

2. Case Management Services:
   i. Match services to specific identified needs
   ii. Explains how case management facilitates progress toward housing stability and independence

   0 2
   No Yes

3. Program Evaluation - Response indicates how program/evaluation/participant tracking will occur in conjunction with case management and service planning and includes:
   i. Type of tool used (HMIS or other)
   ii. Describes how participants' progress toward individualized goals is tracked through the progression of services
   iii. Evaluates the effectiveness of the services delivered and effectiveness of the project in achieving program goals
   iv. Reports data on total number served, client characteristics, use of services, and expenditures

   0 2
   No Yes

4. Obtaining Housing/Remaining Housed - Applicant describes how participants will be assisted to obtain and remain in permanent housing.
   i. Does the applicant offer detail about how the project will offer long-term housing case management; identify and work towards client's long-term housing goals that will increase housing stability and independence; revisit and adjust as needed
   ii. Does the applicant offer detail about how they will intervene in the event a client's housing is at risk? Strategies for mediating between client and landlord to achieve a mutually acceptable plan to avoid eviction?
   iii. Does the applicant offer appropriate strategies to avoid returns to homelessness in the event a client/tenant must move; re-housing clients when their current housing

becomes unworkable; identifying and securing better or right fit housing (e.g., if needs could be better met in a different PSH model like moving from scattered site rental to housing with on-site supports)?

0	2
No	Yes

5. Supportive Services:
    i. Describes specific plans to coordinate with other mainstream health, social services, and employment programs for which participants may be eligible
    ii. Provides supportive services information in Exhibit A
    iii. Identifies whether or not the project includes:
        1. Transportation assistance
        2. Regular follow-ups to ensure mainstream benefits are received/renewed
        3. Access to SSI/Social Security Disability TA provided by applicants or partner agency
        4. Whether staff providing TA have received SOAR training in past 24 months

0	2
No	Yes

D. CoC Goals, Priorities & Participation (10 points)

1. To what degree do you agree to the following statement: Applicant states how the project will improve upon what the CoC is currently doing in the community.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

2. Participation in CoC events (5 points – must meet both criteria to receive)
    i. Applicant is a member of the CoC (see CoC roster)
    ii. Applicant participated in at least 50% of the general meetings from June 2018 – July 2019 (see CoC general meeting participation and check dates for 2018/2019)

0	5
No	Yes

E. Applicant Experience & Capacity (20 points, each criteria worth 4 points)

1. Knowledge/Capacity/Track Record
    i. Response demonstrates extensive knowledge of the services provided as well as the capacity to implement the project as proposed
    ii. Response describes a history of assessing needs and providing services to low-income homeless, formerly homeless or those at-risk of homelessness

0	4
No	Yes

2. Demonstrated Impact - Applicant has provided outcome data from similar projects demonstrating the impact of services provided.

0	4
No	Yes

3. Partnerships - Applicant's response describes working relationships (i.e., partnerships) with other organizations in the community ensuring a network of services to meet participant needs.

0	4
No	Yes

4. Prior Sub-Recipient Experience/Leveraged Funding
    i. Describes their experience as a federal sub-recipient utilizing federal funds and performing proposed activities given funding and time limitations
    ii. Describes their experience in leveraging other Federal, State, local and private funds

0	4
No	Yes

5. Operations - Applicant describes its organizational and management structure, evidence of internal/external coordination, as well as an adequate financial accounting system.

0	4
No	Yes

F. HUD Experience and Knowledge (5 points)

1. To what degree do you agree with the following statement: Applicant demonstrated experience and knowledge implementing other CoC grants and described how this experience/knowledge will lead to positive outcomes for the proposed project.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

G. Communication and Reporting (5 points)

1. Communication – Applicant described how it will ensure communication with DHS, communication or involvement monthly with the CoC.

0	2.5
No	Yes

2. Demonstrated involvement with Coordinated Entry and addressed how communication with CE will be ensured.

0	2.5

No Yes

H. Timeline (see detailed budgets exhibits E-H) (5 points)

1. Applicant provided a detailed implementation timeline identifying: 1) assignments, 2) tasks, and 3) activities to achieve the proposed project's stated outcomes.

   0 2.5
   No Yes

2. Timeline provided is indicative of the applicant's ability to spend down all funds within the timeframe proposed and in an appropriate manner.

   0 2.5
   No Yes

I. Budget and Spending Capacity (see detailed budgets exhibits E-H) (Yes response = 2.5 points, total possible 10 points)

1. Applicant specified the length of the proposed project not to exceed 18-months (NOTE: Project funding is only available for 12 months).

   0 2.5
   No Yes

2. Justifications are provided for each budget line item requested (e.g., Quantity and Descriptions provided).

   0 2.5
   No Yes

3. Costs appear reasonable for the scope and duration of services to be provided, as well as the number of persons to be served and proposed budget includes only eligible activities for project type (see chart pg. 14 NOFA).

   0 2.5
   No Yes

4. Projects requesting leasing and rental assistance used and did not exceed FY18 Fair Market Rent (FMR) rates.

   0 2.5
   No Yes

5. Percentage of budget going towards units (to be used in final rank): _____.

6. Percentage of budget going towards supportive services (to be used in final rank): _____

J. HMIS Utilization (5 points – must include required documentation to receive points)

1. Applicant's response indicates adherence to the following HMIS requirements and Applicant provided required letter from HMIS Lead confirming their status as an active HMIS user OR applicants providing legal services or services to victims of domestic violence using a comparable HMIS system provided a letter from the HMIS Lead confirming their system can generate the Annual Performance Report (APR).
    i. Enter data into HMIS in accordance with HUD standards for participation, data collection and reporting requirements
    ii. Meet required CoC data timeliness standards
    iii. Enter required data elements
    iv. Update client's status at intake and discharge and at a minimum at least annually

0	5
No	Yes

K. Match (5 points – must include required documentation to receive points)

1. Response provided states sources to be used for required 25% match and details the amount of match to be provided by each source and applicant provided the required dated written letter documenting each match source described.

0	5
No	Yes

L. MWBE and/or DBE (5 points – must include required documentation to receive points)

1. Applicant stated its involvement with Minority and Women Business Enterprise(s) (MWBE) and/or Disadvantaged Business Enterprise (DBE) participation and provided evidence/documentation to substantiate this participation.

0	5
No	Yes

M. Claims for Reimbursement (5 points)

1. Applicant describes plans to comply with HSD reimbursement policy and describes policies to ensure adherence to required billing timeline.

0	2.5
No	Yes

2. Applicant identifies individual in charge of billing.

0	2.5
No	Yes

N. Required Attachments (5 points - receives full points if all attachments are provided)

1. Evidence of 501 (c) 3 status (Y/N)
2. Copy of System for Award Management (SAM) Report (Y/N)
3. HMIS Participation Letter (see section 12 – do not include points here)
4. Organizational Chart (Y/N)

5. Current List of the Board of Directors (Y/N)
6. Federal Form 990 (Y/N)
7. Job Descriptions/Resumes (for key personnel involved in the project) (Y/N)
8. Agency Budget (Y/N)
9. Recent A133 or most recent audit (Y/N)
10. Recent Income Statement (Y/N)
11. Balance Sheet for the last three years(Y/N)
12. Recent statement of Cash Flows (Y/N)
13. Letter of support from the Alderperson (Y/N)

0	5
No	Yes

Coordinated Entry

Requirements:
1. For all projects: Is at least 25% of the budget being matched, excluding leasing (y/n)

A. Project Description, Scope, and Relevance/Statement of Priorities (35 points/40 points DV only):

To what degree do you agree with the following statements:

1. Scope & Relevance - Description addresses the entire scope of the project, is comprehensive and relevant to meeting the needs of the Client Population to be served, and demonstrates understanding and commitment to adhering to CoC Program Standards and policies established for our Coordinated Entry System.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

2. Evidence Base - The applicant fully describes the evidence base for the efficacy of community-wide implementation of a Coordinated Entry System.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

3. Housing First / Addressing Partner Engagement - The applicant describes how, as our Coordinated Entry Lead Agency, it will adherence to Housing First principles/approach and how it will identify and address concerns regarding Agency partners who decline or otherwise struggle to effectively engage and enroll their CE referred households (i.e. concerns that an Agency is struggling to comply with Housing First principles/approach)

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

4. Gaps / Barriers / Staffing - Applicant identifies and fully describes:

    a. Known systems gaps and barriers and offers effective program modifications in response.
    b. How each of the required staff positions will work together and with community partners to carry out their individual and collective duties as the CE lead.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

5. Trauma-Informed / Client-Centered - Applicant demonstrates trauma-informed, client-centered approaches (for example, how are services delivered in a trauma-informed way; how will clients be informed of their right to accept / reject housing and service offered / request an alternative referral that meets their needs; how on-going communications be maintained with the client so they have access to information about what to expect / where they stand in the process).

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

6. Milestones - Applicant describes project milestones that address:

    a. Staffing - When new staff will be hired or when other project expenses begin
    b. Enrollment - When participant enrollment in the project will begin
    c. Referrals - When participants will begin to be referred to participating CE partner organizations to receive housing services

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

7. Front Door - Applicant fully describes how it will operate an accessible physical Front Door to our CE system that also accommodates the needs of the diverse households served by addressing:

    a. How it will offer a physical CE Front Door(s) that is accessible to consumers who seek services in-person and via phone, email etc.
    b. Services available for those who need reasonable accommodations to access the Front Door (such as mobile outreach)
    c. How will it be accessible to consumers who work during normal business hours
    d. How will it be accessible to consumers coming from all areas of St. Louis City and County

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

B. Client Population (10 points)

1. Client Characteristics - Applicant clearly identifies and describes the characteristics and needs of those seeking Coordinated Entry services; description should reflect the Applicant's understanding of the characteristics of households typically qualifying for (a) diversion resources, or (2) emergency shelter, or (3) rapid rehousing and/or (4) permanent supported housing.

2	4	6	8	10

Strongly disagree	Disagree	Neither	Agree	Strongly agree

C. Case Management and Services Planning (20 points total) - Applicant's project as described demonstrates:

1. Overcome Barriers - Applicant fully describes extensive activities the program will utilize to overcome barriers to assistance for the clients:

    a. How it will outreach and engage those not directly requesting CE services by showing up at or directly contacting the front door

0	2
No	Yes

    b. How it will maintain contact with and routinely re-assess clients' acuity of need, so they remain active on the Prioritization List (PL) and their placement on the PL is reflective of current / changing needs and circumstances

0	2
No	Yes

    c. How project staff will participate in identifying housing options, eliminating common housing barriers while clients wait for a housing referral to expedite the referral to housing process

    02NoYes

2. Integration - Applicant fully describes the need for and means by which the project will achieve integration with other service providers:

    a. Plan for coordinating and integrating clients into additional services seems appropriate and achievable

0	2
No	Yes

    b. How project staff will communicate and collaborate with Agency partners providing services to households who are also enrolled in CE, to ensure coordination of supports and services to expedite housing placement

0	2
No	Yes

    c. Scope of direct case management to be provided to clients <u>NOT</u> served by other community partners until housing is achieved

0 2
No Yes

d. Plan for linking clients to needed short-term or long-term supports once client is housed, to the extent such services are needed and / or desired and the CE Project does not provide such on-going services to ensure long-term housing stability (How is the warm hand off to client's new services provider(s) made?).

0 2
No Yes

3. Program Evaluation - Response indicates how program / evaluation / participant tracking will occur in conjunction with case management and service planning and includes:

   a. Type of tool used (HMIS or other)
   b. How participants' progress toward individualized goals is tracked through the progression of services
   c. How the effectiveness of the services delivered and effectiveness of the project in achieving program goals is evaluated
      i. Reports data on total number served, client characteristics, use of services, and expenditures

0 2
No Yes

4. Obtaining Housing/Remaining Housed - Applicant describes how participants will be assisted to obtain and remain in permanent housing.
   i. Does the applicant offer detail about how the project will offer long-term housing case management; identify and work towards client's long-term housing goals that will increase housing stability and independence; revisit and adjust as needed
   ii. Does the applicant offer appropriate strategies to avoid returns to homelessness in the event a client/tenant must move; identifying and securing better or right fit housing; uses the acuity review process to better align client with housing that will best meet their needs per assessments?

0 2
No Yes

5. Supportive Services Required by Program Standards:
   i. Describes specific plans to coordinate with other mainstream health, social services, and employment programs for which participants may be eligible
   ii. Provides supportive services information in Exhibit A
   iii. Identifies whether or not the project includes:
      1. Transportation assistance
      2. Regular follow-ups to ensure mainstream benefits are received/renewed
      3. Access to SSI/Social Security Disability TA provided by applicants or partner agency

4. Whether staff providing TA have received SOAR training in past 24 months
5. Clinically licensed team member who can access and verify disability status, if alternative verification such as statement from the client's treating physician or a SSI/SSDI benefits letter is not available.

0	2
No	Yes

D. CoC Goals, Priorities & Participation (10 points)

1. To what degree do you agree to the following statement: Applicant states how the project will improve upon what the CoC is currently doing in the community.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

2. Participation in CoC events (5 points – must meet both criteria to receive)
   i. Applicant is a member of the CoC
   ii. Applicant participated in at least 50% of the general meetings from June 2018 – July 2019

0	5
No	Yes

E. Applicant Experience & Capacity (20 points, each criteria worth 4 points)

1. Knowledge/Capacity/Track Record
   i. Response demonstrates extensive knowledge of the services provided as well as the capacity to implement the project as proposed
   ii. Response describes a history of assessing needs and providing services to low-income homeless, formerly homeless or those at-risk of homelessness

0	4
No	Yes

2. Demonstrated Impact - Applicant has provided outcome data from similar projects demonstrating the impact of services provided.

0	4
No	Yes

3. Partnerships - Applicant's response describes working relationships (i.e., partnerships) with other organizations in the community ensuring a network of services to meet participant needs.

0	4
No	Yes

4. Prior Sub-Recipient Experience/Leveraged Funding

i. Describes their experience as a federal sub-recipient utilizing federal funds and performing proposed activities given funding and time limitations
ii. Describes their experience in leveraging other Federal, State, local and private funds

0	4
No	Yes

5. Operations - Applicant describes its organizational and management structure, evidence of internal/external coordination, as well as an adequate financial accounting system.

0	4
No	Yes

F. HUD Experience and Knowledge (5 points)

1. To what degree do you agree with the following statement: Applicant demonstrated experience and knowledge implementing other CoC grants and described how this experience/knowledge will lead to positive outcomes for the proposed project.

1	2	3	4	5
Strongly disagree	Disagree	Neither	Agree	Strongly agree

G. Communication and Reporting (5 points)

1. Communication – Applicant described how it will ensure communication with DHS, communication or involvement monthly with the CoC.

0	2.5
No	Yes

2. Demonstrated involvement with CoC leadership and addressed how Partner Agency adherence to CE policy will be ensured.

0	2.5
No	Yes

H. Timeline (see detailed budgets exhibits E-H) (5 points)

1. Applicant provided a detailed implementation timeline identifying: 1) assignments, 2) tasks, and 3) activities to achieve the proposed project's stated outcomes.

0	2.5
No	Yes

2. Timeline provided is indicative of the applicant's ability to spend down all funds within the timeframe proposed and in an appropriate manner.

0	2.5
No	Yes

I. Budget and Spending Capacity (see detailed budgets exhibits E-H) (Yes response = 2.5 points, total possible 10 points)

1. Applicant specified the length of the proposed project not to exceed 18-months (NOTE: Project funding is only available for 12 months).

0	2.5
No	Yes

2. Justifications are provided for each budget line item requested (e.g., Quantity and Descriptions provided).

0	2.5
No	Yes

3. Costs appear reasonable for the scope and duration of services to be provided, as well as the number of persons to be served and proposed budget includes only eligible activities for project type (see chart pg. 14 NOFA).

0	2.5
No	Yes

4. Percentage of budget going towards direct services costs (to be used in final rank): _____.

5. Percentage of budget going towards staffing supportive services (to be used in final rank): _____

J. HMIS Utilization (5 points – must include required documentation to receive points)

1. Applicant's response indicates adherence to the following HMIS requirements and Applicant provided required letter from HMIS Lead confirming their status as an active HMIS user OR applicants providing legal services or services to victims of domestic violence using a comparable HMIS system provided a letter from the HMIS Lead confirming their system can generate the Annual Performance Report (APR).
    i. Enter data into HMIS in accordance with HUD standards for participation, data collection and reporting requirements
    ii. Meet required CoC data timeliness standards
    iii. Enter required data elements
    iv. Update client's status at intake and discharge and at a minimum at least annually

0	5
No	Yes

K. Match (5 points – must include required documentation to receive points)

1. Response provided states sources to be used for required 25% match and details the amount of match to be provided by each source and applicant provided the required dated written letter documenting each match source described.

0	5
No	Yes

L. MWBE and/or DBE (5 points – must include required documentation to receive points)

1. Applicant stated its involvement with Minority and Women Business Enterprise(s) (MWBE) and/or Disadvantaged Business Enterprise (DBE) participation and provided evidence/documentation to substantiate this participation.

0	5
No	Yes

M. Claims for Reimbursement (5 points)

1. Applicant describes plans to comply with HSD reimbursement policy and describes policies to ensure adherence to required billing timeline.

0	2.5
No	Yes

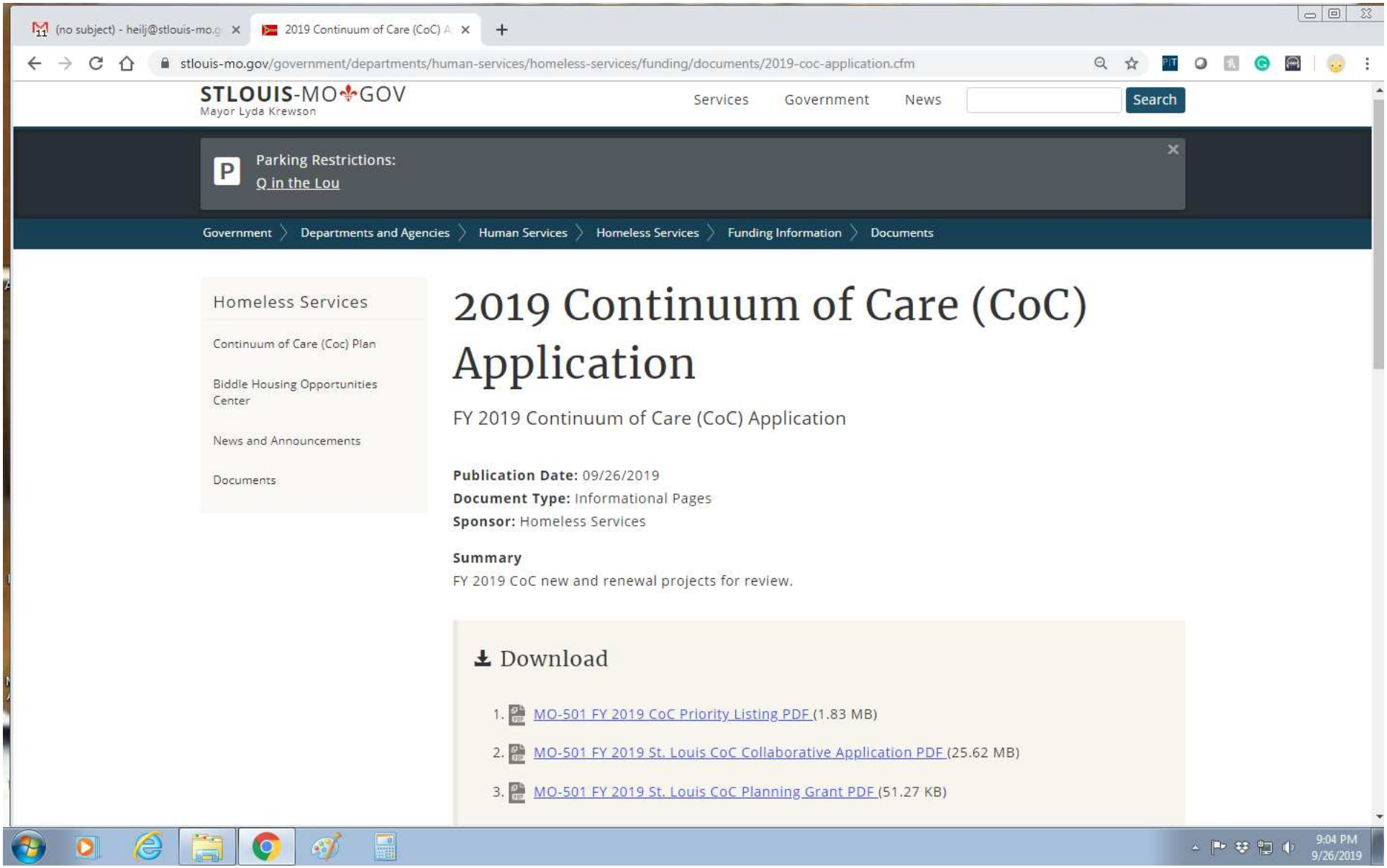
2. Applicant identifies individual in charge of billing.

0	2.5
No	Yes

N. Required Attachments (5 points - receives full points if all attachments are provided)

1. Evidence of 501 (c) 3 status (Y/N)
2. Copy of System for Award Management (SAM) Report (Y/N)
3. HMIS Participation Letter (see section 12 – do not include points here)
4. Organizational Chart (Y/N)
5. Current List of the Board of Directors (Y/N)
6. Federal Form 990 (Y/N)
7. Job Descriptions/Resumes (for key personnel involved in the project) (Y/N)
8. Agency Budget (Y/N)
9. Recent A133 or most recent audit (Y/N)
10. Recent Income Statement (Y/N)
11. Balance Sheet for the last three years(Y/N)
12. Recent statement of Cash Flows (Y/N)
13. Letter of support from the Alderperson (Y/N)

0	5
No	Yes


(no subject) - heilj@stlouis-mo.g
2019 Continuum of Care (CoC) A
stlouis-mo.gov/government/departments/human-services/homeless-services/funding/documents/2019-coc-application.cfm
STLOUIS-MO GOV
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Homeless Services
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Documents
Homeless Services
Continuum of Care (Coc) Plan
Biddle Housing Opportunities Center
News and Announcements
Documents
2019 Continuum of Care (CoC) Application
FY 2019 Continuum of Care (CoC) Application
Publication Date: 09/26/2019
Document Type: Informational Pages
Sponsor: Homeless Services
Summary
FY 2019 CoC new and renewal projects for review.
Download
1. MO-501 FY 2019 CoC Priority Listing PDF (1.83 MB)
2. MO-501 FY 2019 St. Louis CoC Collaborative Application PDF (25.62 MB)
3. MO-501 FY 2019 St. Louis CoC Planning Grant PDF (51.27 KB)
9:04 PM
9/26/2019

Racial Equity Tool

Start Date: 1/1/2018 End Date: 12/31/2018

1-Who Experiences Homelessness?

Enter the unduplicated total number of people in HMIS for each racial and ethnic group below

White	African American	Native American	All Other Races	Total
1625	6813	38	380	*8856*
18%	77%	0%	4%	

Hispanic	Not Hispanic	Total
193	8711	*8904*
2%	98%	

2-Who Gets into Crisis Housing?

Enter the total number of each group entering ***Emergency Shelter***

White	African American	Native American	All Other Races	Total
672	2412	16	136	*3236*
21%	75%	0%	4%	

Hispanic	Not Hispanic	Total
75	3179	*3254*
2%	98%	

Enter the total number of each group entering ***Transitional Housing***

White	African American	Native American	All Other Races	Total
152	334	1	22	*509*
30%	66%	0%	4%	

Hispanic	Not Hispanic	Total
14	499	*513*
3%	97%	

3-Who Gets into Permanent Housing?

Enter the total number of exits to Permanent Housing from all project types by group

White	African American	Native American	All Other Races	Total
442	2391	13	116	*2962*
15%	81%	0%	4%	

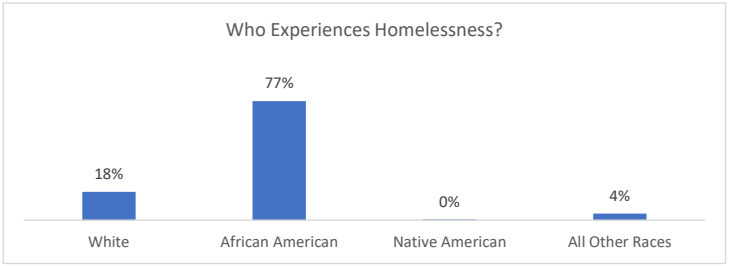
Hispanic	Not Hispanic	Total
75	2886	*2961*
3%	97%	

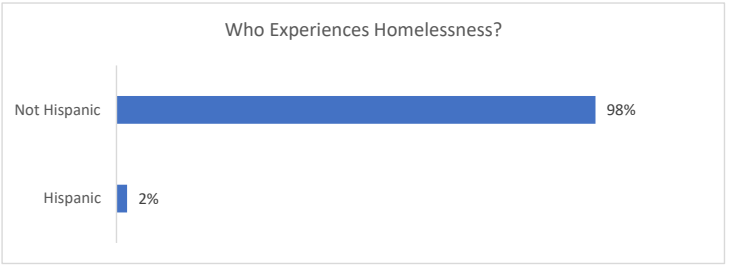
4-Who Returns to Homelessness?

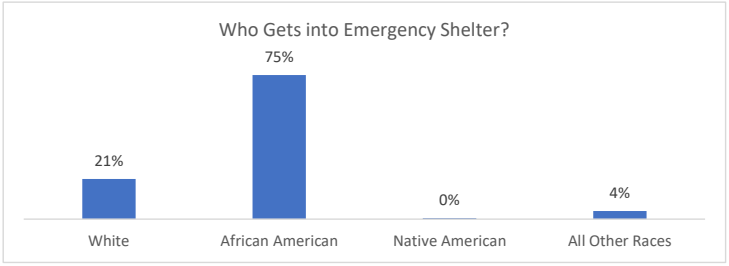
Enter the total number of returns to homelessness by race below

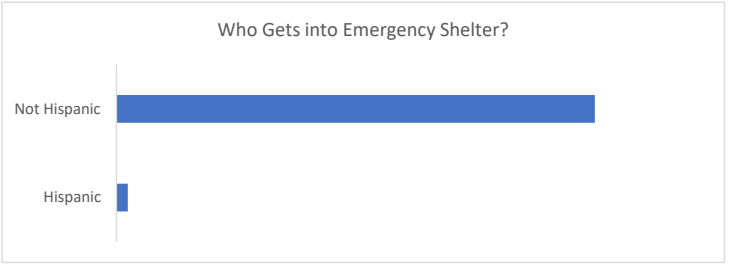
White	African American	Native American	All Other Races	Total
27	85	0	4	*116*
23%	73%	0%	3%	

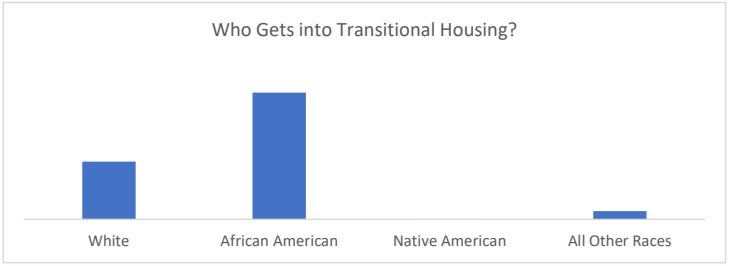
Hispanic	Not Hispanic	Total
4	112	*116*
3%	97%	

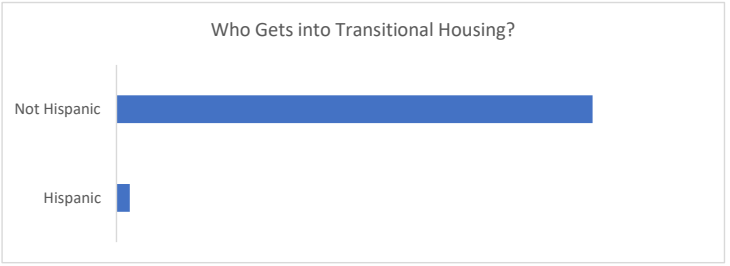

Who Experiences Homelessness?
18%
77%
0%
4%
White
African American
Native American
All Other Races

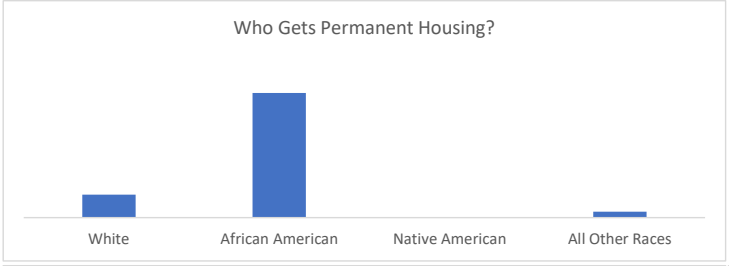

Who Experiences Homelessness?
Not Hispanic
98%
Hispanic
2%

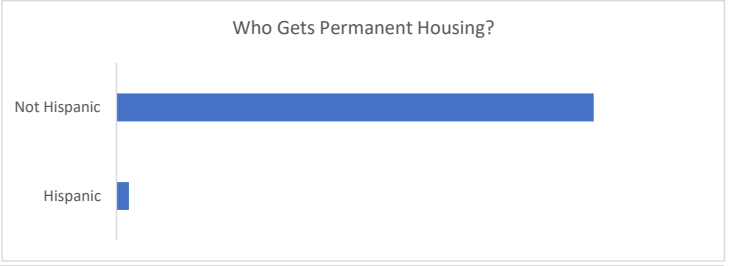

Who Gets into Emergency Shelter?
21%
75%
0%
4%
White
African American
Native American
All Other Races

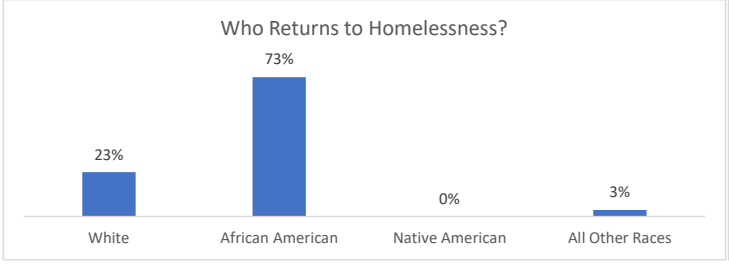

Who Gets into Emergency Shelter?
Not Hispanic
Hispanic

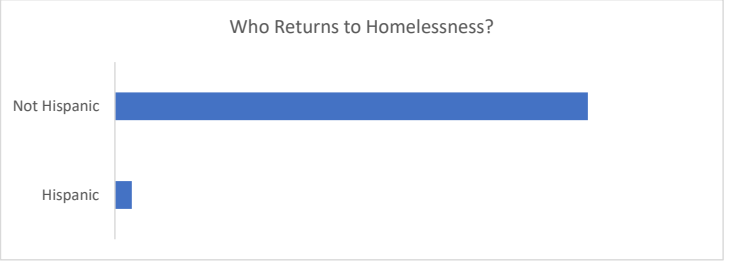

Who Gets into Transitional Housing?
White
African American
Native American
All Other Races


Who Gets into Transitional Housing?
Not Hispanic
Hispanic


Who Gets Permanent Housing?
White
African American
Native American
All Other Races


Who Gets Permanent Housing?
Not Hispanic
Hispanic


Who Returns to Homelessness?
23%
73%
0%
3%
White
African American
Native American
All Other Races


Who Returns to Homelessness?
Not Hispanic
Hispanic

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Continuum of Care
Making moves that #endhomelessness

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CE
Pat Plumley

11 September 2019

Pat Plumley
Chief Program Officer
Doorways
4285 Maryland Ave.
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

Dear Pat Plumley,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Doorways Delmar was accepted and scored in tier 1. The program ranked 8 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Attachment

Saint Louis City
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Making moves that #endhomelessness

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Pat Plumley

11 September 2019

Jonathan Belcher
Sr. Director of Permanent Supportive Housing
St. Patrick Center
800 N. Tucker
St. Louis, MO 63101

RE: FY2019 CoC Funding Application

Dear Jonathan Belcher,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for SPC Project Protect was accepted and scored in tier 1. The program ranked 9 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

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Janie Oliphant, Chair
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11 September 2019

Judy Johnson
Affordable Housing Consultant
Missouri Department of Mental Health
1706 E. Elm
Jefferson City, MO 65102

RE: FY2019 CoC Funding Application

Dear Judy Johnson,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for DMH - SCQ was accepted and scored in tier 1. The program ranked 10 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

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Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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11 September 2019

Pat Plumley
Chief Program Officer
Doorways
4285 Maryland Ave.
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

Dear Pat Plumley,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Doorways Maryland was accepted and scored in tier 1. The program ranked 11 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

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Program Performance Committee
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Pat Plumley

11 September 2019

Regina Cavanaugh
Housing Case manager Supervisor
3001 Arsenal Street
St. Louis, MO 63118

RE: FY2019 CoC Funding Application

Dear Regina Cavanaugh,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Horizon Housing was accepted and scored in tier 1. The program ranked 12 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

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11 September 2019

Judy Johnson
Affordable Housing Consultant
Missouri Department of Mental Health
1706 E. Elm
Jefferson City, MO 65102

RE: FY2019 CoC Funding Application

Dear Judy Johnson,

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Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for DMH - SZP was accepted and scored in tier 1. The program ranked 13 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

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Program Performance Committee
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Pat Plumley

11 September 2019

Pat Plumley
Chief Program Officer
Doorways
4285 Maryland Ave.
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

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Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Doorways Jumpstart was accepted and scored in tier 1. The program ranked 14 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

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Janie Oliphant
Janie Oliphant, Chair
Program Performance Committee
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CE
Pat Plumley

11 September 2019

Jess Cox
Senior Manager of Rapid Rehousing
St. Patrick Center
800 N. Tucker
St. Louis, MO 63101

RE: FY2019 CoC Funding Application

Dear Jess Cox,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for SPC Home Again was accepted and scored in tier 1. The program ranked 15 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Attachment

Saint Louis City
Continuum of Care
Making moves that #endhomelessness

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CE
Pat Plumley

11 September 2019

Jonathan Belcher
Sr. Director of Permanent Supportive Housing
St. Patrick Center
800 N. Tucker
St. Louis, MO 63101

RE: FY2019 CoC Funding Application

Dear Jonathan Belcher,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for SPC Rosati PSH was accepted and scored in tier 1. The program ranked 16 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Kathy Conners
Executive Director
Gateway 180
1000 N. 19th Street
St. Louis, MO 63106

RE: FY2019 CoC Funding Application

Dear Kathy Conners,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Gateway 180 Rapid Rehousing was accepted and scored in tier 1. The program ranked 17 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Nicole Hughes
Director of Program Operations
YWCA Metro St. Louis
3820 West Pine Blvd
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

Dear Nicole Hughes,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for YWCA PSH was accepted and scored in tier 1. The program ranked 18 out of 31 for both renewal and new projects. Your proposal was recommended to receive 82.35% of renewal funding. As discussed with your agency previously, a portion of the project's funding was reallocated because it met two of the criteria for reallocation: underspending by 10% or more and overall low performance compared to other projects.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Felicia Spratt
Residential Program Manager
Places for People
4130 Lindell Blvd.
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

Dear Felicia Spratt,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Places for People Housing for the Future of Families was accepted and scored in tier 1. The program ranked 19 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Julia Treece
Director of Programs
Covenant House Missouri
2727 N Kingshighway
St. Louis, MO 63113

RE: FY2019 CoC Funding Application

Dear Julia Treece,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for Covenant House Transitional Living Program was accepted and scored in tier 1. The program ranked 20 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant
Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Shanna Nieweg
Executive Director
Horizon Housing
3001 Arsenal Street
St. Louis, MO 63118

RE: FY2019 CoC Funding

Dear Shanna Nieweg,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Horizon Housing's application, Horizon West submitted for bonus PSH/reallocated funds, was received and reviewed. After careful consideration, we recommended that Horizon Housing receive 100% of the requested funding to create Horizon West. Your project was placed in Tier 1. Horizon Housing submitted a strong proposal and leveraged additional funds to add more beds to the continuum.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumlev

11 September 2019

Josh Jennemann
Youth Coordinated Entry Manager
Youth in Need
2015 S. big Bend blvd
St. Louis, MO 63117

RE: FY2019 CoC Funding

Dear Josh Jennemann,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Because the Youth in Need RRH was not under contract at the time of the renewal project evaluations, your project was placed towards the bottom of Tier 1 and funded at 100%, per the CoC's Rank and Review Policy available on Basecamp. During the next funding cycle, your project will be evaluated with the other renewal projects. If you would like to learn more about that process, please contact me.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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CE
Pat Plumley

11 September 2019

Tina Patterson
CEO
Homefull
33 W. 1st Street, Ste. 100
Dayton, OH 45402

RE: FY2019 CoC Funding

Dear Tina Patterson,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Because the Homefull RRH was not under contract at the time of the renewal project evaluations, your project was placed towards the bottom of Tier 1 and funded at 100%, per the CoC's Rank and Review Policy available on Basecamp. During the next funding cycle, your project will be evaluated with the other renewal projects. If you would like to learn more about that process, please contact me.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant
Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumlev

11 September 2019

Nicole Hughes
Director of Program Operations
YWCA Metro St. Louis
3820 West Pine Blvd
St. Louis, MO 63108

RE: FY2019 CoC Funding

Dear Nicole Hughes,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Because the YWCA RRH DV was not under contract at the time of the renewal project evaluations, your project was placed towards the bottom of Tier 1 and funded at 100%, per the CoC's Rank and Review Policy available on Basecamp. During the next funding cycle, your project will be evaluated with the other renewal projects. If you would like to learn more about that process, please contact me.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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CE
Pat Plumley

11 September 2019

Nancy Yohe
Chief Program Officer
St. Patrick Center
800 N. Tucker
St. Louis, MO 63101

RE: FY2019 CoC Funding

Dear Nancy Yohe,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

St. Patrick Center's application, SPC Coordinated Entry (new) submitted for Coordinated Entry, was received and reviewed. After careful consideration, we recommended that St. Patrick Center receive 82.96% (or $452,187) of the requested funding to create SPC Coordinated Entry (new). Your project was placed in Tier 1. St. Patrick Center scored higher than the other projects reviewed, however the committee needed to meet the tier 1 fund cap amount, so the full funding request was not recommended. Per the Rank and Review Policy, the Coordinated Entry project was placed towards the bottom of Tier 1.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant
Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Sandy Wilson
HMIS Project Director
ICA
2415 Hyde Park Drive
Jefferson City, MO 65109

RE: FY2019 CoC Funding

Dear Sandy Wilson,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

As you know funding for our HMIS lead is automatically placed in Tier 1 recommendations for funding. As well, the committee is recommending funding to ICA in the full amount of the renewal.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
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Pat Plumley

11 September 2019

Beverly Austin
Housing Manager
St. Patrick Center
800 N. Tucker
St. Louis, MO 63101

RE: FY2019 CoC Funding Application

Dear Beverly Austin,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for SPC project live was accepted and scored in tier 2. The program ranked 27 out of 31 for both renewal and new projects. Your proposal was recommended to receive 100.00% of renewal funding.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Pat Plumley

11 September 2019

Rosalie Seiler
Director of Housing and Community Services
Queen of Peace Center
325 N Newstead
St. Louis, MO 63108

RE: FY2019 CoC Funding Application

Dear Rosalie Seiler,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's evaluation of your renewal application. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Attached is a summary of your program's final score prepared by the Program Performance Committee. The renewal application for QoP Our Lady of Perpetual Help was accepted and scored in tier 2. The program ranked 28 out of 31 for both renewal and new projects. Your proposal was recommended to receive 86.40% of renewal funding. As discussed with your agency previously, a portion of the project's funding was reallocated because it met two of the criteria for reallocation: underspending by 10% or more and overall low performance compared to other projects.

Please know that the CoC takes significant measures to ensure that the rank and review process is equitable and will lead to the best possible outcomes for our continuum. For further description of the CoC's process, please review the CoC's Rank and Review Policy available on Basecamp.

The Program Performance Committee would be happy to meet to discuss the scoring and rank with your agency or project lead to discuss areas of strength and opportunities for improvement. You will receive more information in the near future.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

Attachment

Saint Louis City
Continuum of Care
Making moves that #endhomelessness

CoC Board of Directors

Chair
Tammy Laws

Vice Chair
Cynthia Duffe

Secretary
Shanna Nieweg

At Large Members
Anthony D' Agostino
Christine Estrada
Sylvia Jackson
Josh Jennemann
Angela Schultz
Virginia Shelton

City of St. Louis
Amy Bickford * *ex-officio*

Committee Chairs

Advocacy
Jacki Langum

Governance & Membership
Laura Toledo

System Performance
Kim Warden

Program Performance
Janie Oliphant

Service Delivery
Taylor McCabe

HMIS
Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

Pat Plumley
Chief Program Officer
Doorways
4285 Maryland Ave.
St. Louis, MO 63108

RE: FY2019 CoC Funding

Dear Pat Plumley,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Doorways' application, Doorways Jumpstart (expansion) submitted for bonus PSH/reallocated funds, was received and reviewed. After careful consideration, we recommended that Doorways receive 100% of the requested funding to create Doorways Jumpstart (expansion). Your project was placed in Tier 2.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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HMIS
Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

Laura Toledo
Executive Director
Center for Women in Transition
7716 S. Broadway
St. Louis, MO 63111

RE: FY2019 CoC Funding

Dear Laura Toledo,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Center for Women in Transition's application, CWIT Housing For Success submitted for bonus PSH/reallocated funds, was received and reviewed. After careful consideration, we recommended that Center for Women in Transition receive 25.67% of the requested funding to create CWIT Housing For Success. Your project was placed in Tier 2. While the project scored very high on the committee's scoring tool, it was prohibitively expensive to fully fund and did not leverage the same percentage of dollars compared to another new project.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

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Taylor McCabe

HMIS
Taedra Rutlin-Tobias

CE
Pat Plumley

11 September 2019

Stacey Krieg
Director of Development & Advancement
Women's Safe House

RE: FY2019 CoC Funding

Dear Stacey Krieg,

I am writing on behalf of the City of St. Louis Continuum of Care Program Performance Committee to inform you of the committee's final rank and review. Further, this letter memorializes the final rank recommendations presented to and ratified by the CoC Board of Directors on Tuesday, September 3, 2019 and then by the City of St. Louis' PSA Committee on Thursday, September 5, 2019.

Women's Safe House's application, Safe at Home RRH submitted for DV Bonus funds, was received and reviewed. After careful consideration, we recommended that Women's Safe House receive 100% of the requested funding to create Safe at Home RRH. Your project was placed in Tier 2.

If you would like to learn more about the CoC's rank and review process, please review the Rank and Review Policy available on Basecamp.

If you wish to appeal any of the rank recommendations ratified by the CoC Board of Directors, please indicate so in an email to Tammy Laws (tammylaws70@gmail.com) and Amy Bickford (bickforda@stlouis-mo.gov) per the FY2019 NOFA (FR-6300-N-25, p. 75-79) guidelines no later than 5pm on September 13, 2019.

Sincerely,

Janie Oliphant

Janie Oliphant, Chair
Program Performance Committee
St. Louis City Continuum of Care

CoC Governance Charter

City of St. Louis Continuum of Care for Ending Homelessness Governance Charter

ARTICLE I: Name and Geographic Area

The name of the organization shall be the City of St. Louis Continuum of Care for Ending Homelessness, hereinafter referred to as ("STLCOC"). It will serve the City of St. Louis, Missouri.

ARTICLE II: Mission and Responsibilities

Section 1: Mission

A Continuum of Care is a community's plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. It includes action steps to end homelessness and prevent a return to homelessness.

STLCOC is a broad based partnership to prevent people within the community from becoming homeless and to find ways to end homelessness. Through interagency collaboration coordination and collaboration, STLCOC will provide homeless people with effective services, and help them obtain affordable housing. STLCOC shall serve in a collaborative capacity to the Division of Homeless Services of the Department of Human Services ("DHS") of the City of St. Louis (the "Collaborative Applicant").

Section 2: Responsibilities

STLCOC will fulfill the responsibilities assigned to continuums of care under Title 24, Part 578 of the Code of Federal Regulations, as they may be amended or supplemented from time to time, and will satisfy all other legal requirements necessary to secure maximum funding under relevant state and federal programs to end homelessness. STLCOC will develop, follow, and annually update a governance charter that includes all procedures and policies needed to comply with both subsection B of Title 24, Part 578 of the Code of Federal Regulations and with HUD's HMIS requirements. [578.7(a) (5)]

ARTICLE III: Membership

Section 1: Qualifications

a. **Generally:** Membership in STLCOC is open to any nonprofit, for profit, individual, or governmental entity that is committed to ending homelessness or assisting people who are homeless or at risk of becoming homeless. STLCOC will conduct an annual, public invitation to new members at the beginning of each year. Membership information will be distributed broadly across the community including through various media outlets. [578.7(a) (2)]

b. **Nonprofit, For Profit, and Faith Based Entities:** Every private nonprofit, for-profit, and faith-based member organization operating as a distinct entity shall be entitled to be a member. For example, separately incorporated Catholic Charities organizations such as Queen of Peace Center, St. Patrick Center, and Saint Martha's Hall may have separate memberships in the STLCOC even if they operate under the Catholic Charities umbrella. However, an organization that has multiple corporate entities but operates as a single organization (for example, a nonprofit that creates a corporation to own a building where services are delivered) would be treated as one organization and would be entitled to one membership.

c. **Local, State, and Federal Government Entities:** Each department of a local, state, or federal government entity shall be entitled to be a member. However, subdivisions or programs within the same department cannot have separate memberships.

d. **Individuals as Members:** Individual persons may attend meetings, participate in discussions and serve on committees, regardless of membership status. Individuals can also be members, except that individual voting membership is not available to individuals who are affiliated with an organization that is already a STLCOC member. An individual is considered *affiliated* with an organization if he/she is employed by, on the board of directors of, or a member of the organization or entity. A current or formerly homeless individual receiving services from a member organization or entity shall not be considered to be affiliated with that organization or entity, and may become a STLCOC member.

Section 2: Approval of Members
Applications for membership shall be submitted to the Governance and Membership Committee for review and are subject to approval by a majority vote of the Board of Directors.

Section 3: Withdrawal of Members
A member may withdraw from STLCOC at any time by submitting a letter of withdrawal to the Governance and Membership Committee and presented to the Board of Directors.

Section 4: Removal of Members
Any member may be removed from STLCOC by a two-thirds majority of the Board of Directors. Removal is effective only if it occurs at a meeting called for that purpose. Removal requests will be submitted to the Governance and Membership Committee, and then presented to the Board of Directors. Notice must be sent to all Board of Directors members stating that the proposed removal is a purpose of the meeting. A representative of the organization or individual recommended for removal shall have the opportunity to speak on their behalf prior to a vote of the Board of Directors. The Board of Directors may deliberate without the representative of the

organization or the individual member recommended for removal present prior to the vote of the Board of Directors.

Section 5: Affiliate Membership

Any otherwise qualified entity or individual may elect to join as an Affiliate Member. Affiliate Members will have no voting rights, and will not be required to serve on a committee or satisfy meeting attendance requirements for active members set forth in Section 2 above to maintain the Affiliate Member status. However, Affiliate Members may be removed if they do not attend any general meetings in a calendar year. All other provisions of this Charter will apply to Affiliate Members.

ARTICLE IV: Officers

Section 1: Titles and Duties

STLCOC shall have the following officers: Chair, Vice Chair, and Secretary. The duties of each officer shall be as follows:

Chair

The Chair shall convene and preside at all meetings of the Board of Directors. The Chair shall serve as an ex-officio member of all committees, and shall perform such duties incident to the office of Chair.

Vice Chair

The Vice Chair shall preside at meetings of STLCOC in the absence of the Chair, and shall serve in the role of the Chair in case of the resignation or dismissal of the Chair until a new Chair is elected consistent with Section 6 of this Article. The Vice chair shall perform such duties incident to the office of Vice Chair and such other duties as may be assigned by the Board of Directors.

Secretary

The Secretary shall prepare meeting agendas in consultation with the Chair, notify members of all meetings, record and maintain all votes and the minutes of the meetings of STLCOC, distribute minutes of previous meetings, maintain a current membership roster and list of authorized delegates, and maintain the records of STLCOC. The Secretary shall perform such duties incident to the office of Secretary and such other duties as may be assigned by the Board of Directors.

Section 2: Qualifications

Any active voting member may serve as Chair, Vice Chair, or Secretary. However, no person may serve as an Officer of the STLCOC and as an officer in another continuum of care simultaneously, and no representative of any collaborative applicant may serve as an Officer of the STLCOC at the same time.

Section 3: Terms of Office
The Chair, Vice Chair, and Secretary will have staggered 2-year terms commencing January 2007. Persons in these offices may be re-elected to the same office; however, no person may serve in the same office for more than two consecutive full terms.

Section 4: Nomination and Election
In November of each year, the Governance and Membership Committee shall present to STLCOC a slate of candidates for the open offices of Chair, Vice Chair, and Secretary for the coming term. These officers shall be elected at a regularly scheduled meeting during December of the same year and take office on the first day of January immediately following their election. No person may be nominated unless such person has agreed to serve in the office if elected.

Section 5: Resignation
An officer may resign at any time by submitting a letter of resignation to the Board of Directors.

Section 6: Vacancies
Vacancies in the offices of Chair, Vice Chair or Secretary shall be filled by election from the membership.

ARTICLE V: Board of Directors
Section 1: Powers
The affairs of STLCOC shall be managed by or under the direction of its Board of Directors.

Section 2: Number and Qualifications
The Board of Directors shall be comprised of the Chair, Vice Chair, Secretary, the Chairs of each of the Standing Committees, and up to seven at-large members (the "Board Members"). The Collaborative Applicant shall be an Ex officio Board Member of the STLCOC without voting rights. Each STLCOC member organization may have more than one Board Member but shall have only one vote, except that a member organization may not have more than one representative serving as a Committee Chair. Also, the Consumer at-large Board Member shall retain the right to vote as a consumer representative even if another Board Member is affiliated with the same organization with which the Consumer at-large Board Member is affiliated.

Section 3: Terms of Office
At-large Board Members will serve one-year terms. Committee chairs will serve two-year terms effective January 1, 2018. Standing Committee chairs may represent the private or public sector. At-large Board Members and committee chairs shall be elected at a regularly scheduled meeting during December of the same year and take office on the first day of the month immediately

following their election. No person may serve on the Board more than two consecutive full terms.

Section 4: Nomination and Election of At-Large Members
In November of each year, the Governance and Membership Committee shall present a slate of candidates for the at-large positions of the Board of Directors for the coming term. One of the at-large positions of the Board of Directors shall be filled by a person who is experiencing or has experienced homelessness. The at-large positions shall be elected at a regularly scheduled general membership meeting during December of the same year and take office on the first day of the month immediately following their election.

Section 5: Selection of Representatives of Standing Committees
Candidates for the chairperson for each Standing Committee shall be nominated by the Governance and Membership Committee and then submitted to the Board of Directors for approval.

Section 6: Resignation
An officer may resign at any time by submitting a letter of resignation to the Board of Directors.

Section 7: Vacancies
Vacancies in at-large positions on the Board of Directors shall be filled by election from the membership. Vacancies in chairs of Standing Committees shall be filled by selection by the Governance and Membership Committee and the Board of Directors.

Section 8: Removal of Officers and Directors
The Chair, Vice Chair, Secretary or any member of the Board of Directors may be removed from office by a two-thirds majority of the remaining Board of Directors. Each Standing Committee may request removal of its representative from the Board of Directors by submitting a letter to the Chair of the Board of Directors. Removal is effective only if it occurs at a meeting called for that purpose. Notice must be sent to all Board of Directors members stating that the proposed removal is a purpose of the meeting. The person recommended for removal shall have the opportunity to speak on their behalf prior to a vote of the Board of Directors. The Board of Directors may deliberate without the person recommended for removal present prior to the vote.

ARTICLE VI: Meetings
Section 1: General Meetings
The STLCOC General Meetings will focus on STLCOC training and technical assistance for members. STLCOC will hold General Meetings of the full membership at least semi-annually. [578.7(a) (1)] STLCOC shall meet at least six times per year to conduct a General Meeting. At the beginning of each year the Board of Directors shall establish a schedule of dates and times

for regular General Meetings, and the Secretary shall distribute this schedule to all members. The Board of Directors shall determine the place for each meeting at least one month prior to the meeting. STLCOC may conduct any business at a regular General Meeting, whether or not such business is on the agenda. A published agenda will be provided for each General Meeting of the full membership. [578.7(a) (1)]

Section 2: Board of Directors Meetings
The Board of Directors shall meet at least six times per year. The Board of Directors shall determine the place for each meeting. The Board of Directors may conduct any business at a regular Board of Directors meeting, whether or not such business is on the agenda, except for the removal or officers or members of the Board of Directors. Board Members must attend at least 50% of all board meetings.

The Board of Directors meetings will focus on:

- Organizing an annual continuum of care planning process
- Collecting needs data and inventory system capacity
- Determining and prioritizing gaps in the continuum of care homeless system
- Developing short- and long-terms strategies with an action plan
- Implementing the action steps for the continuum of care plan

Section 3: Executive Session
The Board of Directors may meet in executive session to discuss confidential or sensitive matters. The Board shall report all decisions made at such meetings to the membership but shall not be required to report the discussions of factors leading to its decisions.

Section 4: Special Meetings
Special meetings of STLCOC or the Board of Directors may be called by the Chair or by one-third of the members of the Board of Directors. The person(s) calling the meeting shall state the purpose(s) for which the meeting is to be called. Business at any special meeting is limited to the purpose(s) for which the meeting is called, and no other business of any nature may be conducted.

Section 5: Notification of Meetings
The Secretary shall provide notification to all STLCOC members of all General and Board of Directors meetings, regular and special. Such notification must be given at least two business days prior to the meeting. Notification may be by letter, telephone, facsimile, electronic or personal communication. All members are responsible for following existing processes to receive notifications through electronic mail. The notification must clearly state the date, time

and place of the meeting. In the case of special meetings, the notification must additionally state the purpose(s) for which the meeting is being called. The Secretary shall provide the published agenda to the full membership within two business days prior to the meeting. [578.7(a) (1)]

Section 6: Quorum
The presence of a simple majority of the STLCOC members entitled to vote shall be a quorum and sufficient to conduct business at any general meeting of STLCOC. The presence of two-thirds of the Board of Directors shall be a quorum and sufficient to conduct business at any meeting of the Board of Directors.

Section 7: Action Without an In-Person Meeting
STLCOC members may participate in all regular or special meetings in-person or via video or teleconference, if available.

On the direction of the Board Chair, the STLCOC Board may take an action without a meeting if:

- The action is within the authority of the Board;
- Proper notice and time for discussion is provided; and
- The action is approved in writing by a minimum of 80% of Board members who are entitled to vote on the matter.

Any action taken without a meeting shall be ratified at the following Board meeting and reflected in the meeting minutes.

Section 8: Parliamentary Procedure
The latest revised edition of Robert's Rules of Order shall prevail at all meetings except where contrary to the governance charter or any standing rule.

ARTICLE VII: Voting Privileges and Delegates

a. **Generally:** Each member organization shall be entitled to an unlimited number of delegates, at least one of whom shall be a person functioning at the executive or managerial level, but the organization shall have only one vote. This applies to votes taken at Board, General, and committee meetings. Each individual member shall be entitled to one vote. New members will be entitled to a vote six months after the Board of Directors approves membership. Annually each member organization shall submit any updates to its membership, including changes in contact information, the names of its authorized delegates, and committee membership, to the Governance and Membership Committee. Only active members will have voting privileges. Active membership is determined by the member's attendance at General and committee meetings. To be considered an active member, members must be in attendance at 50% of General meetings, and 50% of at least one committee's meetings. Each

member must serve on at least one of the Standing STLCOC committees. Member organizations must be represented by an authorized delegate. If a member does not attend any general meetings during a calendar year, the member may be removed from the membership pursuant to Section 5 below. Members that have withdrawn or been removed may rejoin the STLCOC by submitting a new application, and will be considered for approval under Article III, Section 2. If approved, the member will be considered a new member.

b. **Voting Rules for Membership types**:

Nonprofit, For Profit, and Faith Based Entities

Every private nonprofit, for-profit, and faith-based member organization operating as a distinct entity shall be entitled to one vote. For example, separately incorporated Catholic Charities organizations such as Queen of Peace Center, St. Patrick Center, and Saint Martha's Hall may have separate memberships in the STLCOC and each would be entitled to a vote even if they operate under the Catholic Charities umbrella. However, an organization that has multiple corporate entities but operates as a single organization (for example, a nonprofit that creates a corporation to own a building where services are delivered) would be treated as one organization and would be entitled to one vote. If an individual is acting as the delegate for more than one STLCOC member organization, that individual shall be entitled to only one vote.

Local, State, and Federal Government Entities

Members from local, state, or federal government entities who represent different departments within the applicable level of government shall be entitled to one vote per department. However, subdivisions or programs within the same department will not receive individual voting rights.

Individuals

Individual members, including those who are currently or formerly homeless, are entitled to one vote, except that individuals who are affiliated (as defined in Article III.1.b) with an entity that is an STLCOC member are cannot be members and are not entitled to vote.

c. Board Chair

The Board Chair shall only vote on matters in the event of a tie.

d. Board Members who are not Active Members

Board Members who are not active voting STLCOC members may vote at Board meetings, but may not vote at General meetings or on committees.

e. Voting by Proxy

Any member unable to be present at the time of a vote may send a representative of the member's affiliated organization, department, or entity to vote by proxy. Members not affiliated with any organization, government, or other entity may designate a proxy of their choosing to vote on their behalf. The Chair of the STLCOC entity in which a member seeks a proxy vote must receive written notification prior to the meeting being called to order to approve any vote by proxy. Proxy voting rules apply to all STLCOC meetings including meetings of the full STLCOC, the Board, and committees or other subordinate entities.

ARTICLE VIII: STLCOC Designations and Responsibilities

Section 1: Designation

STLCOC designates the City of St. Louis as its collaborative applicant to submit the annual STLCOC Consolidated Application for funding on behalf of STLCOC. The Collaborative Applicant is the only entity that can apply for a grant for Continuum of Care planning funds on behalf of STLCOC. DHS staff will assist in the operation and management of the STLCOC and provide oversight and monitoring of the HMIS lead agency. The Collaborative Applicant will collaborate with the STLCOC and its Board in (a) the design and operation a collaborative, fair and transparent application process (b) the development of the City's Consolidated Plan and ESG allocation and reporting processes and (c) participating in regional and State groups meeting to coordinate efforts related to the STLCOC mission and Emergency Solutions Grant ("ESG") and STLCOC awards and other funding, real or potential. [578.7(b)(1); 578.7(b)(2)]

Section 2: Responsibilities

1. STLCOC will be responsible for establishing committees, as well as additional subcommittees or workgroups as needed. [578.7(a)(4)]
2. STLCOC will be responsible for adopting and following a written process to select a board to act on behalf of the STLCOC. This process must be reviewed, updated, and approved by the STL COC at least once every 5 years. [578.7(a)(3)]
3. In collaboration with recipient of Emergency Solutions Grants program funds in the area, STLCOC will establish and oversee the Front Door Assessment Process, a centralized or

coordinated system that will provide an initial, comprehensive assessment of individuals' and families' needs for housing and services. [578.7(a)(8)]

4. STLCOC will establish and oversee written standards for providing transitional housing assistance, rapid re-housing assistance, permanent supportive housing assistance, homelessness prevention assistance, rental assistance, and any other programs established for Continuum of Care assistance. Covering all STLCOC programs, these written standards will include policies and procedures for:
    a. Establishing eligibility criteria for individuals and families; [578.7(a)(9)]
    b. Prioritizing which eligible individuals and families will receive assistance; [578.7(a)(9)]
    c. Determining which type of assistance an individual or family will receive (especially pertaining to the choice between homelessness prevention and rapid re-housing assistance); [578.7(a)(9); 24 CFR 576.400(e)(3)(vi)]
    d. Articulating maximum amount, duration, and type of assistance as well as program participant responsibilities, such as what percentage or amount of rent each program participant must pay while receiving either homelessness prevention or rapid re-housing assistance; [578.7(a)(9); 24 CFR 576.400(e)(3)(vii); 24 CFR 576.400(e)(3)(ix); 24 CFR 576.400(e)(3)(ix)]
    e. Articulating minimum service expectations for every type of program in the homeless system, such as how long a particular program participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time. [578.7(a)(9); 24 CFR 576.400(e)(3)(viii)]
    f. Detailing how the system will address the needs of individuals and families fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from nonvictim service providers. [578.7(a)(8)]
5. STLCOC will establish system and program performance outcome targets for projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report the resulting evaluations of the project outcomes to HUD. [578.7(a)(6); 578.7(a)(7)]
6. STLCOC will consult with recipients and sub recipients to establish evaluation performance targets that are appropriate to each program, whether under ESG, STLCOC, and local funding. [578.7(a)(6)]
7. STLCOC will monitor recipient and sub recipient operations, evaluate outcomes, and take action against poor performers in consultation with recipients and sub recipients. [578.7(a)(6)]
8. STLCOC will consult with State and local government Emergency Solutions Grants program recipients and sub recipients within the Continuum's geographic area in order to discuss the plan for funding allocation. [578.7(c)(5)]
9. STLCOC will ensure coordination between each level of the homeless system and with mainstream resources for the implementation of a local housing and service system that

meets the needs of the homeless individuals (including unaccompanied youth) and families. This housing and service system will encompass (a) outreach, engagement, and assessment, (b) shelter, housing, and supportive services, and (c) prevention strategies. [578.7(c)(1)]

10. STLCOC will conduct an annual gaps analysis of the homeless needs and services available within the geographic area. [578.7(c)(3)]
11. STLCOC will conduct an annual Point-in-Time Count for homeless persons within the geographic area. Count homeless persons living somewhere not designed or ordinarily used as a sleeping accommodation for humans as "unsheltered." Count homeless persons living in emergency shelters or transitional housing as "sheltered." Also meet other requirements as they are established by HUD by notice. [578.7(c)(2)]
12. STLCOC will provide input required for local Consolidated Plan(s) and consult with Emergency Solutions Grants funding recipients to discuss allocation. [578.7(c)(4)(5)]
13. STLCOC will ensure the Homeless Management Information System (HMIS) is in compliance with HUD requirements, has appropriate plans for privacy, security and data quality, and has consistent participation by all STLCOC providers. [578.7(b)(3)(4)(5)]
14. STLCOC will establish annual funding priorities based on annual gaps analysis of the homeless needs and services available within the geographic area and on HUD priorities. [578.7(c)(3)]
15. STLCOC will conduct collaborative funding processes to select providers for STLCOC, ESG and local funding.
16. STLCOC will approve the local STLCOC application.
17. STLCOC will incorporate input from STLCOC into funding and program decisions.

ARTICLE IX: Committees

Section 1: Standing Committees and Duties

STLCOC shall have seven Standing Committees:

1. **System Performance Committee**
   The System Performance Committee conducts system gaps analysis, population prioritization, and recommendations for the Board of Directors and DHS to ensure adequate homeless and housing solutions. It also reviews System Performance Measures (SPM) prior to submission to HUD, and oversees Point-In-Time (PIT) counts, and reviews the Housing Inventory Count (HIC) prior to submission to HUD. The Committee shall establish a PIT Subcommittee, which will conduct the annual PIT count and ensure compliance with HUD guidelines.

2. **Program Performance Committee**
   The Program Performance Committee creates a formal, transparent process to rank and prioritize all new projects seeking support through the STLCOC or ESG funding, advises whether each project meets basic criteria, and ranks projects based on established criteria.

This committee also evaluates individual STLCOC and ESG program performance, and develops protocols for reallocating funding.

3. **Service Delivery Committee**
   The Service Delivery Committee creates policies, procedures, and standardized forms for STLCOC program operations, including coordinated entry. It also builds and implements a plan for regular trainings, including training on working with priority populations, ongoing coordinated entry training, housing navigation/case management training, and other homeless services best-practices.

4. **Advocacy Committee**
   The Advocacy Committee assures that homeless populations are represented fairly in STLCOC programs and priorities, and educates the public about issues pertaining to homelessness. The committee annually recommends to the STLCOC a set of positions to be adopted and issues to be studied by the STLCOC, and brings legislative issues to the Board. The committee shall establish a Consumer Council Subcommittee, which composed entirely of homeless and formerly homeless persons and will ensure that consumer voice is heard and considered in STLCOC programs and decision-making.

5. **Governance and Membership Committee**
   The Governance and Membership Committee shall present a slate of officers and members of the Board of Directors as provided in Article IV, Section 4, and Article V, Section 4. This committee shall also be charged with recruiting and retaining a wide range of organizations into membership and with recommending rules and procedures for STLCOC.

6. **Homeless Management Information System (HMIS) Committee**
   The HMIS Committee sets HMIS standards consistent with HUD Data Compliance requirements. It works with the Board of Directors, DHS, and the HMIS lead to develop and implement recommendations to improve client tracking, provider use, and coordinated entry implementation. The committee annually reviews and updates the HMIS policy and procedure manual, and ensures that the STLCOC is educated and informed about the contents of the manual. It analyzes utilization of HMIS and provides recommendations for increasing participation. The committee reviews data system vendors and recommends the choice of vendor.

7. **Coordinated Entry Committee**
   The Coordinated Entry Committee will conduct an annual review of the Coordinated Entry System, including the prioritization list, matching processes, acuity review, and Coordinated Entry policies and procedures, and provide recommendations to the Board for any changes; review monthly Coordinated Entry reports, determine critical data points, and report to the Board any issues identified to inform decision making; recommend and hold Coordinated

Entry trainings; ensure that all access points are adequately aligned with the Coordinated Entry process and make recommendations to the Board for new access points; work with the Advocacy Committee to solicit consumer feedback on Coordinated Entry, process and tools; and bring significant Coordinated Entry issues to the STLCOC Board of Directors in a timely manner.

Section 2: Selection and Terms

Except for the Consumer Council Subcommittee, any person may be recruited to serve on any Standing Committee or subcommittee by the Board of Directors, or by the committee or committee members. Committee membership may be drawn from the community at large, not only from those associated with STLCOC. Each committee may select the vice-chair, and the Board of Directors may assign Board Members to the committees.

Section 3: Subcommittees

Each committee may as it determines necessary divide into subcommittees, task forces and focus groups. However, each Standing Committee shall have only one representative on the Board of Directors.

Section 4: Ad Hoc Committees

The Board of Directors may from time to time appoint and approve the appointment of such ad hoc committees as may be needed. The Board of Directors shall determine the responsibilities, selection and terms of such committees.

ARTICLE X: Amendments

Section 1: Amendments

This governance charter may be amended or repealed by a two-thirds majority of members present and voting at any meeting of STLCOC, provided that the amended or replacement governance charter shall have been presented in their final form and discussed at the preceding meeting of STLCOC. Notification for such meeting shall clearly state that amendment(s) to or repeal of the governance charter is being considered.

ARTICLE XI: Board of Directors Code of Conduct, Conflicts of Interest and Recusal Process [578.7(a) (5)]

Section 1: Code of Conduct

STLCOC board members must exercise care when acting on behalf of STLCOC. These individuals must complete the work they have agreed to undertake in a timely manner. In addition, they must attend Board meetings and be prepared to discuss matters presented for their deliberation. Absence without notice or explanation for three meetings within a calendar year or repeated failure to complete work assignments will be grounds for removal from the Board.

Repeated failure to participate thoughtfully and respectfully in discussions or persistent disruptive or obstructive conduct during meetings will be grounds for removal.

Section 2: Conflicts of Interest and Recusal Process

STLCOC board members must abide by the following rules in order to avoid conflicts of interest and promote public confidence in the integrity of STLCOC and its processes. Failure to honor these rules will be grounds for removal from the board and any of its committees.

1. Members may not participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefit to:
    a. Any organization that they or a member of their immediate family represents; or
    b. Any organization from which they or a member of their immediate family derives income or anything of value.
2. Whenever STLCOC board members or any of their immediate family members have a financial interest or any other personal interest in a matter coming before the Board of Directors or one of its committees, they must:
    a. Fully disclose the nature of the interest; and
    b. Withdraw from discussing, lobbying and voting on the matter.

Section 3: Procedures

At the beginning of every Board of Directors Meeting, the facilitator must ask if there are any conflicts of interest or potential conflicts of interest that need to be disclosed before the business included in the meeting's agenda is discussed. Any matter in which STLCOC board members have an actual or potential conflict of interest will be decided only by a vote of disinterested individuals. The minutes of any meeting at which such a vote is conducted must reflect the disclosure of interested directors' actual or potential conflicts of interest and their recusal from participation in the decision. STLCOC board members must sign a conflict of interest form annually, affirming that they have reviewed the conflict of interest policy and disclosing any conflicts of interest they face or are likely to face in fulfilling their duties as board members.

CERTIFICATION OF RATIFICATION

This is to certify that the City of St. Louis Continuum of Care for Ending Homelessness did formally ratify and adopt this governance charter on the date specified below:

Date Ratified:

Executed at St. Louis, Missouri, this 15th day of August 2019.

By:

Tammy Laws
CoC, Chair

Shanna Niewoś
CoC, Secretary

HMIS Policy & Procedures

Homeless management information system

policy and procedures manual

This policy and procedure manual is developed in collaboration between the joint Saint Louis City and Saint Louis County HMIS Committee and the HMIS Lead Agency for the Saint Louis City Continuum of Care and Saint Louis County Continuum of Care. It is authorized by the Executive Committee of both the Saint Louis City Continuum of Care and Saint Louis County Continuum of Care. All policies and procedures apply to both Continua of Care.

HMIS governance charter

Introduction

The purpose of the HMIS is to support the delivery of homeless and housing services, including homeless prevention, in the St. Louis City and St. Louis County communities. The HMIS should be used primarily to collect and track information related to serving people in housing crises, as well as planning for the elimination of homelessness. On a case-by-case basis, the HMIS Committee will consider other uses of the database.

Key Support Roles & Responsibilities

Collaborative Applicant

The Continuum of Care Collaborative Applicant:

- Ensures fiscal and programmatic compliance with all HUD rules and regulations
- Encourages and facilitates participation in HMIS data collection
- Reviews project level HMIS reports in an effort to aid in HUD funded project performance and system evaluations, as related to HUD community reporting
- Collaborates with the Continuum of Care to select, approve and execute annual contract(s) with HMIS Lead and/or HMIS Vendor

HMIS Lead

The HMIS Lead for Saint Louis City Continuum of Care and Saint Louis County Continuum of Care:

- Ensures the operation of and consistent participation by recipients of funding requiring use of the HMIS system
- Develops written policies and procedures for all HMIS Partner Agencies, which at a minimum includes: a security plan, data quality plan, and privacy plan for approval by each Continua of Care.
- Executes an HMIS participation agreement with each HMIS Partner Agencies
- Executes an HMIS collaborative agreement with the Continuum of Care; this agreement defines performance standards for HMIS system maintenance, training, user support, report requirements, and analytical support
- Monitors compliance of all HMIS Partner Agencies

- Provides an unduplicated count of clients served and analyses of unduplicated counts to the Continuum of Care on an interval determined by each Continua of Care, and upon request by each Continua of Care or funders
- Responsible for producing all Continuum of Care wide HUD reports generated from the HMIS and the annual Sheltered Point in Time Count and Housing Inventory Count
- Ensures that the HMIS Vendor and software is currently in compliance with HMIS standards
- Serves at the primary contact between Partner Agencies and the HMIS vendor
- Serves as the applicant to HUD for grant funds for HMIS Activities of the Continuum of Care's geographic area, as directed by the Continuum, and if selected for an award by HUD, enter into a grant agreement with HUD to carry out the HUD-approved activities

Saint Louis City Continuum of Care/Saint Louis County Continuum of Care

- Each Continuum of Care is responsible for selecting one HMIS software system . The Continuum of Care may choose to participate in HMIS with other local Continuum of Care so long as one HMIS vendor and Lead are agreed upon and there is joint governance.
- Responsible for reviewing, revising, and approving all policy, procedures, and privacy/security/data quality plans developed by HMIS Lead; final approval of policies and procedures is the responsibility of the Executive Board of each Continua of Care. Each Continuum of Care is responsible for implementing all approved and/or revised policies and procedures within six months of approval
- Ensures consistent participation of recipients and subrecipients in the HMIS
- Develops a governance charter and documents all assignments and designations consistent with the governance charter.
- Executes an HMIS Memorandum of Understanding with the HMIS Lead; this agreement defines performance standards for HMIS system maintenance, training, user support, report requirements, and analytical support
- Ensures the HMIS is administered in compliance with requirements prescribed by HUD

HMIS Committee

- Responsible for recommending HMIS software system and HMIS Lead
- Governs the implementation of the HMIS system
- Assists in the development and revision of HMIS policies and procedures including the data quality, privacy and security plan in collaboration with the HMIS Lead
- Advises and recommends changes to HMIS policies and procedures for approval by Executive Committee of each Continua of Care
- Examines HMIS aggregate data as well as offers comments and suggestions on how data measurements can contribute to fulfillment of strategic goals

- Ensures consistent participation of recipients and sub-recipients in HMIS; The committee will encourage representation of each program types operating within the continuum
- Ensures the HMIS is administered in compliance with requirements prescribed by HUD.
- Review and approve agency requests for additional user licenses.

HMIS Partner Agencies

- Responsible for ensuring that HMIS processing capabilities remain consistent with the privacy obligations of the Partner Agencies
- Comply with applicable standards set forth by the applicable Continua of Care, HMIS Lead and HUD, including but not limited to issues of privacy and confidentiality
- Develop agency procedures to ensure and monitor compliance and sanctions for non-compliance
- Ensure staffing and equipment necessary to implement HMIS
- Complete an HMIS Agency Partner Agreement with the HMIS Lead
- Designate a Chief Privacy Officer and at least one Agency Authorized Representative

HMIS PARTICIPATION POLICY

Mandated

Agencies receiving Emergency Solution Grants, Continuum of Care program grants, HOPWA grants, RHY grants and other funders within the Continuum of Care will be required to meet the minimum HMIS participation standards. Participating agencies must agree to execute and comply with an HMIS Agency Partner Agreement, as well as, all HMIS policies and procedures. Depending on funding source, fees may be associated with HMIS participation. Agencies should contact the HMIS Lead for any such fees.

Voluntary

While the Continua of Care do not require participation in HMIS by agencies that do not receive HUD Continuum of Care, Emergency Solutions Grant, or other federally funding, every effort is made to encourage all homeless service providers to participate in the HMIS system in order to more thoroughly gain an understanding of those experiencing homelessness in Saint Louis community. Non-funded agencies should contact the HMIS Lead for any fees associated with participation.

Minimum Standards to Participate in HMIS

- Partner Agencies will enter into an HMIS Agency Partner Agreement and comply with all HUD regulations for HMIS participation
- Partner Agencies will designate a Chief Privacy Officer. The Chief Privacy Officer is responsible for: managing client questions and complaints about the Privacy Notice, ensuring all new users have completed a User Agreement, monitoring all user

compliance with training requirements, and maintaining both user and technological requirements needed for security standards.

- Partner Agencies will designate an Agency HMIS Authorized Representative. The Agency Authorized Representative is the designated communication point with the HMIS Lead and will be expected to routinely verify data for completeness, accuracy and timeliness and work in collaboration with the HMIS Lead for correcting and managing the agency's data.
- All users are responsible for collecting data elements as defined by HUD and any additional data elements determined by the Continua of Care.
- All users must enter client-level universal data elements at minimum into the HMIS system within the timeline outlined in the Continua of Care's Data Quality Plan.

HMIS Partnership Termination Policy

Contract Termination Initiated by HMIS Partner Agency

Contributing HMIS Organizations may terminate the HMIS Partner Agreement with or without cause upon 30 days written notice to the HMIS Lead and according to the terms specified in the HMIS Agency Partner Agreement. The termination of the HMIS Agency Agreement by the Partner Agency may impact other compliance regulations, such as contracts with any funders that specify HMIS utilization. In the event of termination of the HMIS Agency Agreement, all data entered into the HMIS system will remain active, and records will remain open or closed according to any data sharing agreements in place at the time of termination. In all cases of termination of HMIS Partner Agreements, the HMIS Lead will inactivate all users from that agency on the date of termination of contract. The HMIS Lead will notify the HMIS Committee, the Collaborative Applicant, and any other funders of that agency.

Contract Termination Initiated by HMIS Lead

The HMIS Lead may terminate the HMIS Agency Partner Agreement for noncompliance within the terms of that contract upon 30 days written notice to the HMIS Partner Agency. The HMIS Lead will require any violations to be rectified to avoid termination of the HMIS Partner Agreement.

The HMIS Lead may also terminate the HMIS Partner Agreement with or without cause upon 30 days written notice to the HMIS Partner Agreement and according to the terms specified in the HMIS Partner Agreement.

The termination of the HMIS Partner Agreement may impact other compliance regulations, such as contracts with the Department of Human Services that specify HMIS utilization. In the event of termination of the HMIS Agency Agreement, all data entered into the HMIS system will be maintained by the HMIS Lead until all clients are appropriately exited from the terminated agency.

Prior to any notification of termination, the HMIS Lead must first consult with the Executive Board of the applicable Continuum of Care and the relevant funding organization(s) that require HMIS access before any termination is issued.

HMIS Technical Standards

The HMIS Lead and HMIS vendor are equally responsible for compliance with any and all technical standards determined by HUD. HUD has established that all HMIS software must be able to: produce unduplicated client records, collect all data elements set forth by HUD, report outputs, produce compliance reports for Partner Agencies and the Lead to assess achievements with established benchmarks, and generate standardized audit reports.

Hardware and Computer Requirements

While the HMIS Lead and HMIS vendor maintain software for HUD standards, Partner Agencies are responsible for complying with agency-level system security standards. These system standards aid in the safety and integrity of client records. Partner Agencies must comply with the following hardware and software standards in accordance with the current HMIS Data and Technical Standards and Agency Partner Agreement, the current version of which is included in the Appendix. The equipment used to connect to the HMIS system is the responsibility of the HMIS Partner Agency. Contributing HMIS Partner Agencies will need to provide their own internal technical support for the hardware, software and Internet connections necessary to connect to the HMIS system according to their own organizational needs.

System Availability

It is the intent of the Continuum of Care, HMIS Lead and HMIS Vendor that the HMIS system server will be available 24 hours a day, 7 days a week, and 52 weeks a year to incoming connections. However, no computer system achieves 100 percent “uptime.” In the event of planned server downtime, the HMIS Lead will inform agencies as much in advance as possible in order to allow HMIS Partner Agencies to plan their access patterns accordingly.

Annual reviews for Technical Standard Compliance will be conducted by each Partner Agency Chief Privacy Officer to ensure agencies are meeting requirements. Additionally, the HMIS Lead will conduct technical standard compliance on behalf of the entire Continua of Care to ensure Partner Agencies and HMIS system software are compliant.

HMIS Security Plan

The HMIS Lead is responsible for establishing a security plan, which must be approved by each Continuum of Care. This security plan must address the areas of data collection, maintenance, use, disclosure, transmission, destruction of data, and a communication plan for reporting and responding to security incidents. In addition to the security plan, the HMIS Lead must develop a Disaster Recovery Plan and verify that the HMIS Vendor has a Disaster Recovery Plan as well.

HMIS User Access

All users are required to sign a HMIS User Policy and Responsibilities Form and complete HMIS User Training before receiving access to the HMIS.

Agency authorized representatives shall designate users by completing a User Access Request. Potential Users will be responsible for completing the User Policy and Responsibilities Form and the trainings required by the HMIS Lead Agency before User Credentials will be issued. Per HUD requirements, all users must complete the Security & Privacy Awareness training and the Data Standards training prior to gaining access to the HMIS system. These trainings must be renewed annually thereafter. The HMIS lead will determine additional trainings that users will be required to complete based upon the project(s) they will have access to in HMIS.

HMIS License Allocation

Any requests requiring additional user licenses shall be reviewed and approved by the HMIS Committee.

Establishing a New Partner Agency

Homeless service providers that are interested in obtaining access to the HMIS system will be required to first contact the HMIS Lead, who will process the request and engage the Continuum of Care as necessary. New Partner Agencies will attend an HMIS committee meeting for an orientation to Continua of Care level HMIS processes.

The HMIS Lead will set up a New Agency Orientation to review expectations of HMIS use by discussing current HMIS policies and procedures, discussing the provider's project(s) details, collecting all HUD required agency policies, and discussing the process for getting established as a New Partner Agency. Once the homeless service provider has been approved for access to the HMIS system, the New Partner Agency will receive a copy of an HMIS Agency Partnership Agreement to review and obtain the appropriate signatures before submitting to the HMIS Lead. Once all agreements are finalized, the HMIS Lead will contact the new Partner Agency regarding new user training to obtain access to the system.

Data Access Policies

HMIS Users will receive a unique username and establish a password. Usernames and passwords are never to be shared, or documented in a visible or accessible location which would compromise the integrity and security of the HMIS system. HMIS Users will automatically be prompted to change their HMIS password on a routine basis.

HMIS Users must log off the HMIS system or lock the computer any time they step away from the workstation. Automatic password protected screen savers, or network log-off, should be implemented on each computer used for HMIS.

Any paper documentation with identifying information, such as client authorization forms, should be filed in a locked, secure area and not left unattended. All paper and electronic documentation for any client in the HMIS system must be stored and maintained for a minimum of seven years.

HMIS Privacy Plan

Data Collection Limitation Policy

Partner Agencies will only enter client information into the HMIS system that is necessary to provide quality services. Partner Agencies, in collaboration with the Continua of Care and other funders, will determine what qualifies as essential for services.

Clients have the right to decline to have the information shared in the HMIS and shall in no way impact a client's eligibility for services. The agency assumes that, by requesting services from the agency, the client agrees to allow them to collect information and to use or disclose it as described in the privacy notice and otherwise as allowed or required by law.

Client Notification

Partner Agencies must post the HMIS Consumer Notice, the current version of which is included in Appendix, at each intake desk, or comparable location.

In accordance with HUD's 2004 HMIS Data and Technical Standards, the HMIS Privacy and Security Notice, the current version of which is included in the Appendix, must be posted on the agency's web page, if applicable. There should be at least one printed copy of the HMIS Privacy and Security Notice available to any client upon request.

Any client who agrees to data sharing within HMIS must sign the Client Informed Consent to Share and Release Information. Clients who decline data sharing must have their record locked by the HMIS Lead prior to an HMIS client record being created. Unless the provider a "protected," all Clients must have a copy of the Client Informed Consent to Share and Release Information in their client file or scanned and uploaded to the HMIS and their response documented in HMIS, regardless of whether or not the client chooses to participate in data sharing. A current version of the Client Informed Consent to Share and Release of Information is included in the Appendix.

The Continuum of Care may approve the use of alternative releases of information for specific projects, such as Coordinated Entry. Should an alternative release of information be utilized, all policies in this section still apply.

The agency must provide reasonable accommodations for persons with disabilities throughout the data collection process. Various versions of the Privacy Notice will be made available through the HMIS Lead.

Limitations of HMIS Use

Partner Agencies will use and disclose personal information from HMIS only in accordance with uses allowed in the HMIS Privacy and Security Notice. Agencies are responsible for ensuring compliance with this notice and should consult with the HMIS committee regarding any questions about the use of HMIS data.

Client Rights to Access and Correction of Files

Any client receiving services from a Partnering Agency has the following rights:

1) **Access to program records**. Clients have the right to review their records in a project in the HMIS. A written request should be made to the agency's HMIS Chief Privacy Officer, who should follow-up on the request within five working days.

2) **Access to full records.** Clients have the right to review their full record in the HMIS. They may make a written request through the agency's HMIS Chief Privacy Officer, who will request approval from the HMIS Lead within five working days.
3) **Correction of an HMIS record**. A client has the right to request that his or her HMIS record is correct so that information is complete and accurate. This ensures fairness in its use. Agency may refuse the client's request to change the data if the Agency deems the change unnecessary or untrue.
4) **Refusal**. A client has a right to refuse to participate in HMIS or to provide personal information. However, the agency's ability to assist a client may depend on the documentation of certain personal identifying information in the HMIS.
5) **Agency's Right to Refuse Inspection of an Individual Record**. The agency may deny a client the right to inspect or copy his or her personal information for the following reasons:
    i. information is compiled in reasonable anticipation of civil, criminal or administrative action or proceedings;
    ii. Other exceptions applicable under law

6) **Harassment.** The agency reserves the right to reject repeated or harassing requests for access or correction. However, if the agency denies a client's request for access or correction, written documentation regarding the request and the reason for denial will be provided to the client. A copy of that documentation will also be included in the client record.

Data Sharing

At initial project intake, the client should receive verbal explanation of the HMIS system for the Continuum of Care. If a client is willing to share information with HMIS, they must sign a Client Informed Consent to Share and Release of Information form. Any information that will be shared within HMIS, beyond what is covered by the Client Informed Consent to Share and Release of Information form, will require additional written consents and release of information by the client. Any client information to be shared with any entities outside of HMIS will also

require additional written consents and release of information by the client, unless that information is shared in accordance with the Privacy Notice. The client does have the right to decline data sharing within HMIS. HMIS users should immediately contact the HMIS Lead before entering information into HMIS if a client declines data sharing within HMIS, unless the client is being served by a protected agency.

Clients have the right to revoke data sharing authorization at any time, unless this is overridden by agency policy or is a part of a conditional agreement with the provider. Once the client has revoked their authorization, the Partner Agency should immediately notify the HMIS Lead for next steps to secure the client's HMIS record.

Policies pertaining to the sharing of Coordinated Entry Data are included in the Coordinated Entry Manual. All Partner Agencies are expected to uphold federal, state, and local confidentiality regulations to protect records and privacy. If an agency is covered by the Health Insurance Portability and Accountability Act (HIPPA), the HIPAA regulations prevail.

Protected Agencies and Domestic Violence Agencies

Protected agencies serve populations that require special security and privacy considerations. Protected agencies contribute data to HMIS; however, the services provided by the agencies remain hidden beyond basic identification of clients.

Domestic violence agencies are prohibited from entering data into the HMIS. If domestic violence agencies receive Continuum of Care or ESG funding, they are required to have a comparable database, which the HMIS lead will review to ensure the database meets requirements. If not compliant, the HMIS lead will provide written documentation as to the steps required to become compliant and notify the applicable Continuum of Care and applicable funder. Agencies utilizing a comparable database are required to report aggregate data for reporting purposes.

HMIS Data Release Policy and Procedures

<u>Client-Level Data:</u>

Client-level data may be viewed by only the HMIS Lead and HMIS Vendor for purposes of compliance, software correction, data quality resolution, and other required tasks related to HMIS privacy, security, and data quality standards.

Request for HMIS data will be reviewed in accordance with the St. Louis City CoC & St. Louis County CoC Data Request Policies, the current version of which are included in the Appendix. No identifiable client data are to be released to any person, agency or organization without written consent by the client, unless otherwise required by law or allowed by the Privacy and Security Notice and is approved by the Continuum of Care.

Mandated Reporting

Mandatory reporters should comply with state guidelines for reporters. This obligation supersedes any agency policies that prohibit disclosure of identifying information.

Court-Ordered Subpoenas

There are many situations in which police or other government officials request information from shelters and other service providers. If an HMIS Partner Agency is served with a Subpoena for records, the agency must immediately contact the HMIS Lead and the Chair of the Executive Board of the appropriate Continuum of Care. Once it is established the exact information requested in the subpoena, the Partner Agency and HMIS Lead will work in collaboration to gather the appropriate documentation. Due to the fact HMIS Partner Agencies have data sharing, it is vital to work with the HMIS Lead to only provide information from the listed Partner Agency requested in the subpoena.

Program-Level (aggregate) Data:

The HMIS Lead will supply reports requested by Continuum of Care committees and/or funders on a routine basis.

Extracted Data

HMIS users should apply the same standards of security to local files downloaded to a computer containing client data as to the HMIS database itself. Reports extracted from HMIS should not be downloaded or stored on a computer accessible to unauthorized persons. Unencrypted data or reports containing identifying information may not be sent over a network that is open to the public. Data reports containing any personal identifying information, such as client names, should never be sent over any network unless secure and encrypted. Security questions will be addressed to the HMIS Lead.

Data Retrieval for Research or Comparative Purposes

While the HMIS is a useful resource, it is not always comprehensive enough to fully understand the nature and extent of homelessness, how individuals access mainstream or other federal programming resources, and the most effective prevention.

To gain a better understanding of the needs and service usage of individuals who are experiencing a housing crisis, and to assist with planning, implementation and allocation of resources, HMIS data may be used or disclosed data for research conducted by an individual or institution with approval by the applicable Continuum of Care Executive Board(s).

To identify trends and patterns of service usage to better implement homeless and prevention services, either Continuum of Care Executive Board may approve the HMIS Lead, with appropriate consent or agreements, to cross-reference their Continuum of Care's HMIS client-level data with other public databases including: those relating to employment, family services, child welfare, criminal justice, prevention, and healthcare.

All requests for data shall be considered in accordance with the St. Louis City CoC & St. Louis County CoC Data Requests Policies. Requests for data requiring Continuum of Care approval must first be considered by the HMIS Committee, who will bring recommendations to the Executive Boards for approval as necessary.

Requests for data must include for consideration by the applicable Continuum of Care:

1. The purpose and intent of the request
2. What data elements for which clients will be shared, by whom, with whom, how frequently, and for how long
3. Potential risks and benefits to current or future clients through care coordination, enhanced data collection, and/or system integration

All uses of data must follow the same HMIS Security and Privacy policies outlined in this document. Reports containing client level information may only be shared with third parties under a Data Sharing Agreement (DSA) according to the requirements outlined in this document. The Continuum of Care, at its own discretion, may require a Data Sharing Agreement for any approved data request, even when client level information is not being shared.

With the approval of the applicable Continua of Care, the HMIS Lead is authorized to enter into Data Sharing Agreements as required by this document. Data Sharing Agreements must contain:

1. The purpose and intent of the use of data
2. Allowable uses of the data
3. What data elements for which clients will be shared, by whom, with whom, how frequently, and for how long
4. Consent to the security policies for the protection of the data
5. Monitoring procedures for the agreement
6. Term of the agreement

Data sharing agreements will be kept on record by the HMIS lead. A copy of the executed data sharing agreement will be sent by the HMIS lead to the applicable Continuum of Care Board Chair. Modifications to the data request purpose and intent of the use of the data and/or the data shared must be approved by the Continuum of Care and may require an amendment to the Data Sharing Agreement.

HMIS Data Quality Plan

It is ultimately the responsibility of the Continuum of Care Executive Committee and HMIS Lead to ensure quality data is submitted to HUD. In an effort to direct service provisions in an effective and efficient manner and assist the Continua of Care in obtaining strategic goals, the HMIS Lead is responsible for submitting Data Quality benchmarks and a Data Quality Plan for approval by the by the Continua of Care.

Each Partner Agency is expected to establish a data self-monitoring plan for which the agency will monitor client-level data for data completeness and quality. HMIS Data Quality reviews of client-level data will also be used by the agency and by the HMIS Lead to monitor data quality and indicate possible additional trainings needed for improvement. HMIS Data Quality reviews

of program-level data will be used by the HMIS Lead to report continuum-wide improvement suggestions, and recommendations for integrations with other mainstream and Federal Programming data. Program-level data quality may also be used by various Continuum of Care committees for system analysis and evaluations.

Data Quality Standards and Monitoring

- All data entered will be accurate and complete. Entries of "client doesn't know" or "client refused" will be kept to a minimum.
- The HMIS lead will monitor agency data quality and notify the agency, funder, and/or applicable Continuum of Care of any areas of concern
- In all reports of shelter, housing or services provided for a client, the client must be eligible to receive the services from the listed provider
- Universal data elements at minimum must be entered into the HMIS system within 24 hours of entry into a project and complete appropriate discharge within 48 hours of exit from a project.
- Per HUD data standards, blank entries in required data fields are not allowed.
- Partner Agency will perform monthly data quality checks and ensure that their data complies with Continua of Care standards.
- Any pattern of error identified by users which impacts or is impacting data between Partner Agencies should be reported to the HMIS Lead

Data Collection Requirements

Partner Agencies are responsible for completing, at minimum, the HUD defined Universal Data Elements (UDE's) and any HUD Program-specific Data Elements required for the agency's project. Partner Agencies may also be required to collect data elements determined by the HMIS Committee as vital. Partner Agencies will do their due diligence to collect and verify client information upon client initial program enrollment or as soon as possible. Any information collected by the Partner Agency must be documented into HMIS within the established timeframe set forth by the HMIS Committee.

Data Quality Training Requirements

In order for the HMIS system to be a benefit to clients, a tool for Partner Agencies and a guide for planners, all users must be adequately trained to collect, enter, and extract data. The HMIS Lead will be responsible for developing and providing regular trainings, which must include various types and levels of training for beginning users and advanced users. Trainings can be offered either directly or through HMIS Lead approved or contracted trainers.

<u>New User Training</u>

All HMIS Users must complete approved training before being given access to HMIS. Users should be trained on: Security and Privacy Awareness, Data Standards, and project specific HMIS skills training.

<u>Ongoing Training</u>

In order to remain current on HUD standards and local continuum expectations, all HMIS users are required to complete annual security and data standards trainings and any applicable trainings on HMIS software updates. These ongoing trainings can be in the form of: attendance to quarterly HMIS user meetings (Partner Agency attendance is required to 75% of quarterly user meetings each calendar year), HMIS Lead approved online/in-person trainings, and individualized trainings with HMIS System Administrators. The HMIS Lead will communicate training opportunities via website, newsletters/emails, and announcements at Continuum of Care General Meetings. Documentation of training will be made available from the HMIS Lead.

Annual reviews for data quality, security and privacy standards compliance will be conducted by each Partner Agency to ensure projects are meeting requirements. The HMIS Lead will work with Partner Agencies to schedule annual site-visits to ensure compliance across the Continuum of Care.

Non- HMIS User Employee Training

As part of the training, each employee and volunteer of your agency who collects, reads, or is otherwise exposed to client information must be provided training so that they understand the security and privacy policies related to HMIS. The Chief Privacy Officer is responsible for ensuring that agency staff receive such training.

HMIS Grievance Policy

Client Grievance

Clients have the right to be heard if they feel that their confidentiality rights have been violated, if they have been denied access to their personal records, or if they have been put at personal risk or harmed. Each agency must establish a formal grievance process for the client to use in such a circumstance. To file an HMIS related complaint or grievance clients should contact the agency's Chief Privacy Officer. HMIS Partner Agencies must report all HMIS related client grievances to the HMIS Lead, who will notify the HMIS committee. The HMIS committee will determine any necessary corrective action.

Partner Agency Grievance

It is encouraged that if any issues arise, problems should be presented and resolved at the lowest possible level. If HMIS users have an issue with HMIS software, policy or HMIS Lead representative, they should first reach out to the HMIS Authorized Representative. If an issue cannot come to a successful resolution with the HMIS Authorized Representative, the issue should be presented to the HMIS Lead.

The HMIS Lead will attempt to resolve issues between the Partner Agencies and/or the HMIS Vendor. The HMIS Lead will also present any Continuum of Care systematic issues or policy concerns to the HMIS Committee.

HMIS Non-Compliance Sanctions

The HMIS Lead is responsible for establishing appropriate sanctions for non-compliance issues which are outlined in the Agency Partnership Agreement. These sanctions must be approved by the Continuum of Care and may include suspension of HMIS system access.

2019 HDX Competition Report

PIT Count Data for MO-501 - St.Louis City CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	**1248**	**1336**	**949**	**1031**
Emergency Shelter Total	567	650	561	702
Safe Haven Total	0	0	0	0
Transitional Housing Total	583	544	291	276
Total Sheltered Count	**1150**	**1194**	**852**	**978**
Total Unsheltered Count	**98**	**142**	**97**	**53**

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	**168**	**151**	**95**	**191**
Sheltered Count of Chronically Homeless Persons	132	81	74	184
Unsheltered Count of Chronically Homeless Persons	36	70	21	7

2019 HDX Competition Report

PIT Count Data for MO-501 - St.Louis City CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	**146**	**172**	**112**	**105**
Sheltered Count of Homeless Households with Children	146	172	112	105
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	**124**	**140**	**169**	**136**	**141**
Sheltered Count of Homeless Veterans	99	137	158	132	131
Unsheltered Count of Homeless Veterans	25	3	11	4	10

2019 HDX Competition Report

HIC Data for MO-501 - St.Louis City CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	**532**	**67**	**379**	**81.51%**
Safe Haven (SH) Beds	**0**	**0**	**0**	**NA**
Transitional Housing (TH) Beds	**371**	**96**	**232**	**84.36%**
Rapid Re-Housing (RRH) Beds	**319**	**7**	**312**	**100.00%**
Permanent Supportive Housing (PSH) Beds	**1940**	**0**	**1547**	**79.74%**
Other Permanent Housing (OPH) Beds	**21**	**0**	**0**	**0.00%**
Total Beds	3,183	170	2470	81.98%

2019 HDX Competition Report

HIC Data for MO-501 - St.Louis City CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	119	513	1239	1936

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

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC		21	34	55

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC		65	204	319

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Summary Report for MO-501 - St.Louis City CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

RESUBMITTING FY2018 DATA: If you provided revised FY2018 data, the original FY2018 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

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.

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	2605	2594	2455	74	73	77	4	41	40	36	-4
1.2 Persons in ES, SH, and TH	3175	3116	2842	129	127	112	-15	63	60	48	-12

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.

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	2562	2499	2417	216	240	315	75	90	95	120	25
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	3218	2993	2766	266	284	340	56	130	130	157	27

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

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.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY 2017	FY 2018	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	0	0	0	0		0	0		0	0		0	
Exit was from ES	168	347	19	19	5%	16	11	3%	15	35	10%	65	19%
Exit was from TH	252	313	9	7	2%	14	11	4%	11	14	4%	32	10%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	535	345	22	10	3%	20	8	2%	34	23	7%	41	12%
TOTAL Returns to Homelessness	955	1005	50	36	4%	50	30	3%	60	72	7%	138	14%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1336	949	-387
Emergency Shelter Total	650	561	-89
Safe Haven Total	0	0	0
Transitional Housing Total	544	291	-253
Total Sheltered Count	1194	852	-342
Unsheltered Count	142	97	-45

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	3242	3160	2905	-255
Emergency Shelter Total	2591	2573	2477	-96
Safe Haven Total	0	0	0	0
Transitional Housing Total	790	725	489	-236

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	842	917	902	-15
Number of adults with increased earned income	50	71	61	-10
Percentage of adults who increased earned income	6%	8%	7%	-1%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	842	917	902	-15
Number of adults with increased non-employment cash income	172	168	138	-30
Percentage of adults who increased non-employment cash income	20%	18%	15%	-3%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	842	917	902	-15
Number of adults with increased total income	214	207	171	-36
Percentage of adults who increased total income	25%	23%	19%	-4%

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	318	304	330	26
Number of adults who exited with increased earned income	72	66	67	1
Percentage of adults who increased earned income	23%	22%	20%	-2%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	318	304	330	26
Number of adults who exited with increased non-employment cash income	69	66	89	23
Percentage of adults who increased non-employment cash income	22%	22%	27%	5%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	318	304	330	26
Number of adults who exited with increased total income	133	124	145	21
Percentage of adults who increased total income	42%	41%	44%	3%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2620	2544	2385	-159
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.	595	564	517	-47
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)	2025	1980	1868	-112

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	3144	3046	3098	52
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.	745	718	729	11
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.)	2399	2328	2369	41

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 FY2018 (Oct 1, 2017 - Sept 30, 2018) 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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	298	286	503	217
Of persons above, those who exited to temporary & some institutional destinations	47	42	110	68
Of the persons above, those who exited to permanent housing destinations	52	54	111	57
% Successful exits	33%	34%	44%	10%

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

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	2753	2582	2447	-135
Of the persons above, those who exited to permanent housing destinations	1121	1011	893	-118
% Successful exits	41%	39%	36%	-3%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	1630	1637	1719	82
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1598	1608	1668	60
% Successful exits/retention	98%	98%	97%	-1%

2019 HDX Competition Report

FY2018 - SysPM Data Quality

MO-501 - St.Louis City CoC

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.

2019 HDX Competition Report

FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	533	650	584	433	667	622	575	308	1349	1396	1764	1885			65	203				
2. Number of HMIS Beds	154	460	436	384	0	533	535	268	40	1116	1417	1595			51	203				
3. HMIS Participation Rate from HIC (%)	28.89	70.77	74.66	88.68	0.00	85.69	93.04	87.01	2.97	79.94	80.33	84.62			78.46	100.00				
4. Unduplicated Persons Served (HMIS)	1984	2320	2587	2486	1097	976	789	542	1788	1716	1765	1892	1071	404	957	1114	0	26	401	742
5. Total Leavers (HMIS)	1677	1954	2197	2109	640	566	532	337	283	310	198	366	774	86	559	560	0	2	276	575
6. Destination of Don't Know, Refused, or Missing (HMIS)	1071	737	715	238	56	23	22	10	6	5	4	9	430	0	5	13	0	0	52	171
7. Destination Error Rate (%)	63.86	37.72	32.54	11.28	8.75	4.06	4.14	2.97	2.12	1.61	2.02	2.46	55.56	0.00	0.89	2.32		0.00	18.84	29.74

2019 HDX Competition Report

Submission and Count Dates for MO-501 - St.Louis City CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/30/2019	

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/22/2019	Yes
2019 HIC Count Submittal Date	4/22/2019	Yes
2018 System PM Submittal Date	5/30/2019	Yes

(https://www.hud.gov/)

U.S. Department of Housing and Urban Development
Secretary Ben Carson

Hello, David Henrion (Javascript:void();)

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My CoC Status Summaries

Welcome to the Longitudinal Systems Analysis (LSA) module. Here, you can upload, view, and notate official and local-use LSA datasets.

A summary of progress for all **official** HUD submissions for each of your affiliated CoCs is displayed below.

Use the menu on the left to navigate to “Upload New LSA” to upload new official or local-use LSAs or to “My Datasets” to view your successfully uploaded data.

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Show 10 entries Filter by Reporting Year 2018 Updated Search:

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MO-501	St.Louis City CoC	2018 Updated	SUBMITTED (/dataset/8101/summary)	100%	100%	100%	100%	100%	100%	100%	100%	100%		Annie Leiter	Amy Bickford	6/24/2019	8/2/2019	6/25/2019	Prelim Yes
CoC Code	CoC Name	Year	Review Stage	ESSH-AO	RRH-AO	PSH-AO	ESSH-AC	RRH-AC	PSH-AC	ESSH-CO	RRH-CO	PSH-CO	Email	Liaison	Submitter	Date Started	Date Submitted	Date Confirmed	Met Deadline?

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