

Before Starting the CoC Application

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

The Collaborative Applicant is responsible for:

1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.
2. Ensuring all questions are answered completely.
3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.
4. Ensuring all imported responses in the application are fully reviewed and updated as needed.
5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.
6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.

- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.

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

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

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: MA-500 - Boston CoC

1A-2. Collaborative Applicant Name: City of Boston Acting by and through its PFC

1A-3. CoC Designation: CA

1A-4. HMIS Lead: City of Boston Acting by and through its PFC

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members. Responses should be for the period from 5/1/16 to 4/30/17.

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	No
Local Jail(s)	Yes	No
Hospital(s)	Yes	Yes
EMT/Crisis Response Team(s)	Yes	Yes
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	No
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	No
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Other:(limit 50 characters)		

Faith based & higher ed	Yes	No
Philanthropy & business	Yes	No
Homeless Court, Drug & MH Court diversion	Yes	No

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

1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 1000 characters)

Boston has organized WG & consumer advisory bodies (e.g. the Youth Advisory Board) to further progress in advancing both HUD & CoC goals of preventing and ending homelessness for all populations. These groups are cross sector, including representation from the homeless provider community, homeless/formerly homeless indiv, health care, business, youth, educational, and state and local government. All members are invited to participate in the development and implementation of CoC work plans. Also the CoC has engaged a TA provider to interview staff at participating organizations for in-depth feedback and recommendations on how to enhance cross agency collaboration to improve client outcomes and achieve overall system goals. Recommendations are then implemented as part of the CoC's continuous process improvement efforts. The CoC also solicits input via community meetings and open comment, such as with the development of the HUD Action Plan.

1B-2. Describe the CoC's open invitation process for soliciting new members, including any special outreach. (limit 1000 characters)

Membership recruitment to the CoC is ongoing and open to any individual or organization with an interest in preventing and ending homelessness in Boston. The work of the CoC is advertised via the CoC webpage, City of Boston website, open meetings and by the Mayor's press office in its drive to inform the public about efforts to end homelessness through permanent housing. The CoC Leadership Council and CoC work groups frequently assesses representation in the CoC to ensure outreach efforts to those least likely to participate. An example of this outreach is the CoC's assistance in the creation and resourcing of Boston's first Youth Advisory Board. Comprised of volunteer homeless and at-risk youth, the Boston YAB provides the CoC membership and leadership with a youth-centric perspective that informs system change efforts that touch unaccompanied youth.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to proposals.

(limit 1000 characters)

The CoC uses several methods to advertise the availability of new funding during the competition, incl. daily newspaper (Boston Herald) public meetings (Action Plan, CoC, City council hearing), web postings & notice to the CoC list serv when funding opportunities are posted. The CoC uses a public procurement process to solicit proposals from sponsors. The advertisement stipulates the opportunity is open to 501(c)(3)s that serve homeless populations & isn't exclusive to those already receiving CoC funds. Applications are available for download via the City's supplier portal or hard copy format. Applications may be submitted electronically or in person. The CoC targets agencies that serve underrepresented populations, such as youth or those affected by DV. The CoC formally announced the availability of new funding opportunities via email blast & its webpage on 7/31/17. Applications are scored in accordance with CoC board approved tools to determine inclusion in the Project Priority Listing.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects. Only select "Not Applicable" if the funding source(s) do not exist in the CoC's geographic area.

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
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
Other Local CoCs	Yes
Veteran Service Organizations	Yes

1C-2. Describe how the CoC actively consults with Emergency Solutions Grant (ESG) recipient’s in the planning and allocation of ESG funds. Include in the response: (1) the interactions that occur between the CoC and the ESG Recipients in the planning and allocation of funds; (2) the CoCs participation in the local Consolidated Plan jurisdiction(s) process by providing Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions; and (3) how the CoC ensures local homelessness information is clearly communicated and addressed in Consolidated Plan updates. (limit 1000 characters)

The City’s Department of Neighborhood Development serves as lead agency for the Boston CoC, the ConPlan & is the recipient for Boston’s ESG allocation. As such for this single plan jurisdiction, the homeless & homelessness

prevention sections of the ConPlan are updated annually by CoC & ESG staff working in conjunction with policy & research staff as the ConPlan is developed, using data from Federal reports inc. the PIT, HIC, CoC application, CAPER & AHAR but also reports derived from the daily updating of the HMIS warehouse. CoC staff conduct targeted outreach to CoC membership to ensure their input into the ConPlan. Many CoC & ESG subrecipients overlap & ESG staff sit on CoC working groups. This spring, CoC & ESG staff collaborated to issue a joint procurement for the most recent ESG allocation, allowing for targeting of system gaps & close funding coordination of CoC & ESG activities. Program staff monitor programs to ensure that CoC and ESG programs are working in tandem.

**1C-3. CoCs must demonstrate the local efforts to address the unique needs of persons, and their families, fleeing domestic violence that includes access to housing and services that prioritizes safety and confidentiality of program participants.
(limit 1000 characters)**

DV survivors access an array of housing & service programs through an initial call to 24/7 SAFELink hotline, staffed by Casa Myrna Vazquez, a CoC & DOJ funded provider. Calls are confidential & answered by trained advocates to assess for imminent danger, supportive services that address no/limited financial support, lack of child care, health issues & housing options. Survivors are referred immediately, while on the call, to a safe program. Survivors are assisted CoC housing search, based on their choice of service needs and connections to a community. All DV staff are trained on privacy/safety protocols, location of DV shelters are confidential, files are kept in secure & locked areas & electronic databases are encrypted & secured. Stabilization services assess survivors for MS benefits while addressing up front service needs and issues. RA is funded by the CoC, RRH by ESG, ES by the State & services such as legal by DOJ. Several DV providers are represented as voting members in the CoC.

**1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment.
(limit 1,000 characters)**

In addition to attending HUD/HHS sponsored webinars, all providers are educated at least annually on client driven, cultural competency & trauma informed care best practices and incorporate into the CES assessment and screening tools to ensure that the CES process addresses the physical and emotional safety, privacy and confidentiality needs of HH. DV staff provide confidential referrals through the CES system and safety planning protocols that include unique id #'s, releases of information with specific and limit identifying information, and confidential unidentified location and contact information. All DV programs complete client level de-identified surveys on the night of the census for aggregate DV data across CoC. CoC/ESG funded DV programs collect de-

identified HMIS data for APR/CAPER reporting and share aggregated DV data with the CoC to determine scope and needs of DV resources and population.

1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.

Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Boston Housing Authority	68.90%	Yes-Both

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

1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 1000 characters)

Not applicable; one PHA operates within the Boston CoC and it has adopted homeless admission preferences for PH and HCVP resources.

1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy. (limit 1000 characters)

Boston agencies offer inclusive programs to LGBTQ persons, inc. ESG funded GLASS for LGBTQ youth. Youth Homeless providers trained in LGBTQ cultural competency. Health Care for Homeless runs transgender clinic. State & local protections ensure non-discrimination based on sexual orientation, gender identity, gender expression. Boston human rights ordinance extended public

accommodation protections to transgender people(2002).MA enacted law prohibiting employment & housing discrimination(2011).CoC offered training for management, human resources & front line staff(2012).On 1/11/17 the CoC notified agencies of HUD Region 1 Equal Access & Gender Identity webinar for HUD-funded projects: ES, HOME, HOPWA, CDBG, ESG and CoC. On 1/18/17 Equal Access & Gender Identity Rule PPT, Equal Access Expectations Toolkit, Training Scenarios shared w/CoC recipients, subrecipients, leadership & community stakeholders. Add. trainings to be offered in FY18. LGBT providers are members of the CoC voting LC.

1C-6. Criminalization: Select the specific strategies implemented by the CoC to prevent the criminalization of homelessness in the CoC’s geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 50 characters)	
Courts divert to detox	<input checked="" type="checkbox"/>
4 MH FTE's embedded @ BPD	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

When "No Strategies have been implemented" is selected no other checkbox may be selected.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning-State and Local: Select from the list provided, the systems of care the CoC coordinates with and assists in state and local discharge planning efforts to ensure those who are discharged from that system of care are not released directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

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

1D-1a. If the applicant did not check all the boxes in 1D-1, provide: (1) an explanation of the reason(s) the CoC does not have a discharge policy in place for the system of care; and (2) provide the actions the CoC is taking or plans to take to coordinate with or assist the State and local discharge planning efforts to ensure persons are not discharged to the street, emergency shelters, or other homeless assistance programs. (limit 1000 characters)

not applicable

1D-2. Discharge Planning: Select the system(s) of care within the CoC's geographic area the CoC actively coordinates with to ensure persons who have resided in any of the institutions listed below longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>

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

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

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Using the drop-down menu, select the appropriate response(s) that demonstrate the process the CoC used to rank and select project applications in the FY 2017 CoC Program Competition which included (1) the use of objective criteria; (2) at least one factor related to achieving positive housing outcomes; and (3) included a specific method for evaluating projects submitted by victim service providers.

Attachment Required: Public posting of documentation that supports the process the CoC used to rank and select project application.

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

1E-2. Severity of Needs and Vulnerabilities

**CoCs must provide the extent the CoC considered the severity of needs and vulnerabilities experienced by program participants in their project ranking and selection process. Describe: (1) the specific vulnerabilities the CoC considered; and (2) how the CoC takes these vulnerabilities into account during the ranking and selection process. (See the CoC Application Detailed Instructions for examples of severity of needs and vulnerabilities.)
 (limit 1000 characters)**

The CoC expects that projects practice a housing first/low barrier model & serve those w/ the highest needs and vulnerabilities as exemplified by the adoption of the Orders of Priority in CPD Notice-16-11. Renewal & new apps are ranked by score as described in the published CoC Rating and Selection Criteria. Severity of need is determined via HMIS data, weighting as follows: 43% Performance Measurements, 22% HUD Opening Doors & CoC priorities alignment, 19% HMIS data quality, 13% Financial Management & CoC Monitoring, 3% utilization. The 22% Opening Doors awards points to programs that serve specific vulnerabilities including; chronically homeless, veterans, youth, vulnerability to victimization (DV), HoH's with multiple disabilities, unsheltered homelessness episodes, assault/child abuse, very little or no income, current or past substance abuse, and criminal histories. Additional points are awarded to projects that prioritize those with longest time homeless and most severe

needs.

1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

Attachment Required: Documentation demonstrating the objective ranking and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available. Attachments must clearly show the date the documents were publicly posted.

Public Posting	
CoC or other Website	<input checked="" type="checkbox"/>
Email	<input checked="" type="checkbox"/>
Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

1E-4. Reallocation: Applicants must demonstrate the ability to reallocate lower performing projects to create new, higher performing projects. CoC's may choose from one of the following two options below to answer this question. You do not need to provide an answer for both.

Option 1: The CoC actively encourages new and existing providers to apply for new projects through reallocation.

Attachment Required - Option 1: Documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between FY 2013 and FY 2017 CoC Program Competitions.

No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 1

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps. 09/06/2017

Attachment Required: Copies of the written notification to project applicant(s) that their project application(s) were rejected. Where a project application is being rejected or reduced, the CoC must indicate the reason(s) for the rejection or reduction.

1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps. 09/12/2017

Attachment Required: Copies of the written notification to project applicant(s) their project application(s) were accepted and ranked on the Priority listing.

Reallocation Supporting Documentation

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No	MA-500 Reallocati...	09/14/2017

Attachment Details

Document Description: MA-500 Reallocation Invitation

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

Attachment Required: If "Yes" is selected, a copy of the sections of the Governance Charter, or MOU/MOA addressing the roles and responsibilities of the CoC and HMIS Lead.

2A-1a. Provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA. CoC 1 & HMIS 6

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? Attachment Required: If the response was "Yes", attach a copy of the HMIS Policies and Procedures Manual. Yes

2A-3. What is the name of the HMIS software vendor? Social Solutions Global, Inc.

2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area. Single CoC

2A-5. Per the 2017 HIC use the following chart to indicate the number of beds in the 2017 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells

in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	5,198	94	5,027	98.49%
Safe Haven (SH) beds	59	0	29	49.15%
Transitional Housing (TH) beds	648	83	529	93.63%
Rapid Re-Housing (RRH) beds	934	22	912	100.00%
Permanent Supportive Housing (PSH) beds	4,750	0	4,461	93.92%
Other Permanent Housing (OPH) beds	3,184	0	1,779	55.87%

2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months.

(limit 1000 characters)

The Boston CoC is currently at 100% HMIS bed coverage of SH beds. 2 SH programs were incorrectly marked as non-HMIS reporting on the 2017 HIC. Another program began entering HMIS as of February 1, 2017, after the HIC time frame for reporting. The Other PH beds are developed as part of Boston's Homeless Set-Aside program and are developed by mainstream housing developers. DND makes every effort to bring these units onto HMIS however because these are mainstream developers we cannot require participation. Additionally, the Boston Housing Authority's homeless preference, a number of these units are PHA units and due to the other reporting requirements of PHA's they are resistant to report in HMIS in addition to their other HUD systems. The CoC is exploring identifying additional funds to help encourage mainstream developers & the PHA to enter "other PH" beds into the HMIS.

2A-6. Annual Housing Assessment Report (AHAR) Submission: How many Annual Housing Assessment Report (AHAR) tables were accepted and used in the 2016 AHAR? 12

2A-7. Enter the date the CoC submitted the 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 05/05/2017

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

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Indicate the date of the CoC's 2017 PIT count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception. 01/25/2017

2B-2. Enter the date the CoC submitted the PIT count data in HDX. (mm/dd/yyyy) 05/05/2017

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

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Describe any change in the CoC’s sheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specifically, how those changes impacted the CoCs sheltered PIT count results. (limit 1000 characters)

Not Applicable; there were no significant changes to the 2017 PIT methodology on the sheltered population from the previous PIT count in 2016.

2C-2. Did your CoC change its provider coverage in the 2017 sheltered count? Yes

2C-2a. If “Yes” was selected in 2C-2, enter the change in provider coverage in the 2017 sheltered PIT count, including the number of beds added or removed due to the change.

Beds Added:	447
Beds Removed:	827
Total:	-380

2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC's 2017 sheltered PIT count? No

2C-3a. If "Yes" was selected in 2C-3, enter the number of beds that were added or removed in 2017 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT count implementation, including Yes

**methodology and data quality changes from 2016 to 2017?
CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.**

2C-4a. Describe any change in the CoC’s unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specify how those changes impacted the CoC’s unsheltered PIT count results. See Detailed Instructions for more information. (limit 1000 characters)

No change in methodology, as Boston CoC again conducted our annual blitz count of all city neighborhoods broken down to 45 areas. A mobile application was not deployed during the count, due to the high cost proposed by the vendor. Data quality improvements included enhanced training, e.g., a revised Team Leader Training powerpoint; Street interview guidelines, practice sessions and a webinar. Additional volunteers recruited via Boston’s Youth Homelessness Leadership group, Youth Advisory Board, Homes for the Brave Veterans liaisons & Public Health Opioid Outreach specialists. All surveys entered into a central spreadsheet the night of the count at PIT Command Center, ensuring immediate review and initial deduplication by Team Leaders. Area-by-area review and de-duplication coordinated by DND PIT Coordinator, outreach teams with extensive knowledge of Boston’s unsheltered adult, youth & veteran populations and Harvard Business School fellow with extensive data quality expertise.

2C-5. Did the CoC implement specific measures to identify youth in their PIT count? Yes

2C-5a. If "Yes" was selected in 2C-5, describe the specific measures the CoC; (1) took to identify homeless youth in the PIT count; (2) during the planning process, how stakeholders that serve homeless youth were engaged; (3) how homeless youth were engaged/involved; and (4) how the CoC worked with stakeholders to select locations where homeless youth are most likely to be identified. (limit 1000 characters)

In the fall the DND Coordinator works with outreach providers to update known locations for the PIT Count. Youth providers & ambassadors, including current & formerly homeless youth, identified city neighborhoods with high #s of unaccompanied youth (UY) for the 2016 Chapin Hall Voices of Youth Count. These areas are canvassed year round via city-wide Street Homeless Task Force agencies. Bridge Over Troubled Waters, lead RHY provider, Pine St Inn, BPHC outreach, Boston Warm interfaith & Local law enforcement participate. In 6 meetings prior to the PIT Count, known locations were reviewed. The Boston CoC Youth Advisory Board consumers added intel and helped conduct the count. Transit hubs frequented by UY are highlighted by MBTA Transit Police. On the night of the count 10 downtown teams had youth expertise via Bridge,

United Way, Pine St Inn, MBTA & city agencies. Boston Centers for Youth & Families street workers led 7 other teams in neighborhoods where they work with at-risk youth.

2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness. (limit 1000 characters)

CoC Veteran & Chronic Homeless Working groups convene outreach, shelter, Veteran Serving Organizations, DMH and BHA weekly to review By Name Lists (BNLs) of Veterans and Chronic Individuals. Veteran & Chronic data is updated nightly & cross referenced w/HMIS and Coordinated Entry. Real time data enables street outreach, shelter and CoC staff to use BNLs to identify where Veterans and Chronic Individuals stay and implement outreach & housing plans. Street Homeless Task Force met weekly (Nov-Jan) to update unsheltered locations. Street Outreach, Veteran specialists were on all street count teams to better count chronic & veterans. DHCD collects HMIS data monthly for all families in EA shelter or motels. Metro Boston Housing (motel families), shelter case managers and DHCD review family length of stay monthly, target chronically homeless families, longest stayers & veteran families for assistance to overcome complex barriers to housing and provide data on all families for the PIT.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**3A-1. Performance Measure: Reduction in the Number of First-Time Homeless. Describe: (1) the numerical change the CoC experienced; (2) the process the CoC used to identify risk factors of becoming homeless for the first time; (3) the strategies in place to address individuals and families at risk of becoming homeless; and (4) the organization or position that is responsible for overseeing the CoC's strategy to reduce or end the number of individuals and families experiencing homelessness for the first time.
(limit 1000 characters)**

There were an additional 94 FTH w/ no previous entry in the ES system & only 13% originated from w/i the CoC. In 2016 the CoC launched ES Front Door Triage to divert from ES &/or to shorten LOS. At entry, FTH HHs are assessed to identify potential alternatives to ES. Aggregate assessment data allows the CoC to see trends & develop strategies to divert (Eg:48% of families enter ES are doubled up, strategy is for HH to stay in that unit, while searching for alternative). 25% of new families are now diverted from ES using up to 8K per HH of state funds. Over the last year, 2,288 persons were triaged, 192 diverted (0 days in ES) and 177 placed in housing in <30 days. Last year the city created the Office of Housing Stability to focus on homelessness prevention (HP) triaging 252 HP cases. As the responsible coordinating entity for ES & FDT, DND is able to adjust strategies based on assessments of new HH, while the State's DHCD serves as front door to family ES.

**3A-2. Performance Measure: Length-of-Time Homeless. CoC 's must demonstrate how they reduce the length-of-time for individuals and families remaining homeless. Describe (1) the numerical change the CoC experienced; (2) the actions the CoC has implemented to reduce the length-of-time individuals and families remain homeless; (3) how the CoC identifies and houses individuals and families with the longest length-of-time homeless; and (4) identify the organization or position that is responsible for overseeing the CoC's strategy to reduce the length-of-time individuals and families remain homeless.
(limit 1000 characters)**

The avg. LOT for ES & SH has dec. by 222 days & the avg. LOT for ES, SH & TH has dec. by 213 days, per SPM report. LOT is tracked via HMIS for CoC & ESG. Notable LOT dec. is due to investments in recently launched multi-resourced RRH system & CAS build out, which prioritizes PH matches based on HMIS LOT & most vulnerable w/most severe needs. The RRH system incld.

case mgmt, housing search & RA to move families & indiv. from ES & SO to PH. Families can access resources through both state EA system & local CoC CES. In FY17 the CoC added 186 family RRH units. For singles, the city added \$900K, CoC, & ESG funds created 322 RRH units. Also, several shelters have implemented time limited shelter stays, which reduced LOT homeless w/o increasing the # of people returning to streets/ES. For families, every HH who is eligible for EA is offered ES and a RRH slot w/i days of shelter entry to move to PH. Individuals are targeted for RRH based on LOS in ES. DND coordinates the CoC's RRH system.

3A-3. Performance Measures: Successful Permanent Housing Placement and Retention

Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC's strategy for retention of, or placement in permanent housing. (limit 1000 characters)

In FY17, there was an inc of 2% of HH who moved from SO to PH (6% total), a slight dec. of ES exits to PH (57% total) & an inc by 3% of HH who have retained PH (95% overall retention rate). This year the CoC implemented a CoC-wide RRH system, inc. 618 beds at a PIT. In FY16 the CoC received funding to support 295 PSH units to serve the most vulnerable & longest time homeless HHs which assisted with the placement of 264 CH homeless into housing over the last year. The CoC also has systematized CAS, a PSH matching engine, which is a part of the CoC CES system. The transition to CAS slowed the PH placement rate as the system was tested. Finally, the CoC has worked w/ service provider agencies & MassHealth providers to inc. the # of SP agencies providing billable stabilization services to support client housing placements. DND has oversight of PSH for CoC and ESG, the RRH system, the CAS match, & the development of homeless set aside units for prioritized homeless HH.

3A-4. Performance Measure: Returns to Homelessness.

Describe: (1) the numerical change the CoC experienced, (2) what strategies the CoC implemented to identify individuals and families who return to homelessness, (3) the strategies the CoC will use to reduce additional returns to homelessness, and (4) the organization or position responsible for overseeing the CoC's efforts to reduce the rate of individuals and families' returns to homelessness. (limit 1000 characters)

Boston CoC had 1297 Clients exit to PH in the prior 2 years, 87 returned to homelessness (RTH) 13-24 months post placement for a recidivism rate of 7%, a decrease from 8% of returns w/i 1 year of placement. DND as CA is responsible for overseeing the reduction in RTH. Strategies implemented to reduce RTH, inc. increased stabilization services for those entering housing by layering on Medicaid billable services & instituting a Front Door Triage & Diversion program. Also, the CoC unveiled "Window into the Warehouse" a secured staff login to the CoC's HMIS Data Warehouse where client HOH are viewable. The portal enables FDT staff to assess one's HOH when entering ES

& immediately notify the stabilization manager for quick re-housing. A pilot, FDT is reaching 30% of new entrants into ES, in the next year, FDT will be scaled to capture a higher % of new entrants; additionally, the build out of a recidivism report in HMIS will alert housing staff if a housed client enters ES.

3A-5. Performance Measures: Job and Income Growth

**Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC’s strategy to increase job and income growth from employment, non-employment including mainstream benefits.
(limit 1000 characters)**

DND is the lead & has implemented new strategies to inc employment income outcomes, including a Workforce Development & Income Expansion WG of homeless service providers. In conjunction with the WG, the Boston Private Industry Council and the Mayor’s Office of Workforce Development funded a collaborative effort of homeless providers to create an Access Point targeting homeless guests of the CoC's largest day shelter, St. Francis House who has robust staff to support workforce development. Access Point will allow guests to access the full resources of the state’s One Stops while receiving support and instruction from shelter staff. For those whom employment is not viable, WG hosts agencies (Mass Rehab & SSA) as part of a series of workshops for clients to increase cash income from non-employment sources. Also, DND will offer additional trainings to providers in order to reiterate the importance of updating income annually for each HH in HMIS.

3A-6. Did the CoC completely exclude a geographic area from the most recent PIT count (i.e. no one counted there, and for communities using samples in the area that was excluded from both the sample and extrapolation) where the CoC determined there were no unsheltered homeless people, including areas that are uninhabitable (deserts, forests). No

**3A.6a. If the response to 3A-6 was “Yes”, what was the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoCs unsheltered PIT count?
(limit 1000 characters)**

N/A

3A-7. Enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 05/31/2017

2016.
(mm/dd/yyyy)

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

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. Compare the total number of PSH beds, CoC program and non CoC-program funded, that were identified as dedicated for use by chronically homeless persons in the 2017 HIC, as compared to those identified in the 2016 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	3,191	3,705	514

3B-1.1. In the box below: (1) "total number of Dedicated PLUS Beds" provide the total number of beds in the Project Allocation(s) that are designated ad Dedicated PLUS beds; and (2) in the box below "total number of beds dedicated to the chronically homeless:, provide the total number of beds in the Project Application(s) that are designated for the chronically homeless. This does not include those that were identified in (1) above as Dedicated PLUS Beds.

Total number of beds dedicated as Dedicated Plus	15
Total number of beds dedicated to individuals and families experiencing chronic homelessness	1,974
Total	1,989

3B-1.2. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing. Yes

3B-2.1. Using the following chart, check each box to indicate the factor(s) the CoC currently uses to prioritize households with children based on need during the FY 2017 Fiscal Year.

History of or Vulnerability to Victimization	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>

Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder)	<input checked="" type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

3B-2.2. Describe: (1) the CoCs current strategy and timeframe for rapidly rehousing every household of families with children within 30 days of becoming homeless; and (2) the organization or position responsible for overseeing the CoC’s strategy to rapidly rehouse families with children within 30 days of becoming homeless. (limit 1000 characters)

MA has a legal mandate to shelter eligible homeless families; no family in the CoC is screened out of access to ES or due to factors in 3B2.1. The CoC assists families through CES. The primary point of entry is the MA Div. of Stabilization where CoC partner staff assess & triage homeless families. The strategy to rapidly rehouse every family is through HomeBase which provides up to \$8K to RRH families w/i 30 days of initial assessment & shelter placement. Add. financial assistance is available for families w/ add. barriers. 765 Boston families have been housed w/HomeBase. For HH’s w/ multiple barriers who may not be able to take advantage of HomeBase w/i 30 days, an Intensive CM team is deployed, including cmgmt., housing search, MH and child welfare agency staff, to assist the family with housing and stabilization support. The state office is responsible for the initial shelter & RRH placement & the City OHS is responsible if more intensive services are needed as described above.

3B-2.3. Compare the number of RRH units available to serve families from the 2016 and 2017 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	32	218	186

3B-2.4. Describe the actions the CoC is taking to ensure emergency shelters, transitional housing, and permanent supportive housing (PSH and RRH) providers within the CoC adhere to anti-discrimination policies by not denying admission to, or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status or disability when entering a shelter or Housing. (limit 1000 characters)

Adult shelters are chartered by the state to work w/ individuals & adhere to all city, state & federal anti-discrimination policies. Same gender couples/families are allowed in the same shelter & dual gender couples/families are provided w/ shelter beds in the appropriate shelter which are often on the same campus. CoC-supported PH meets all federal, state & city anti-discrimination

policies. As appropriate, couples & families live together regardless of age, sex, gender, LGBT status, marital status or disability. The family EA system is managed by DHCD. As a right to shelter state the legislative language creating that right defines the household as, consisting “of the needy child(ren), the parent(s), step-parent or caretaker relative of the needy child, a legal guardian and the siblings (including half-siblings and step-siblings) of the needy child, who themselves are under the age of 21” and that the entirety of the household, as defined above is placed together.

3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.

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

3B-2.6. From the list below, select each of the following the CoC has a strategy for prioritization of unaccompanied youth based on need.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input checked="" type="checkbox"/>

3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC’s efforts. (limit 1500 characters)

CoC strategies to increase housing, services for homeless youth incl. better data via Chapin Hall, MA Youth Count & HMIS; Joint outreach by Bridge & Pine St (described in Q2C-5a) to improve unsheltered youth assessment & referral; new Bridge/JRI Housing 1st program provides RRH, RA & support services to 40 homeless youth; Increased philanthropic & other funding; e.g., Boston-based

Liberty Mutual Foundation \$595k for outreach, housing, services; United Way \$50k; \$675k MA State funding restored. System Change: CoC applied for HUD YHDP NOFA (11/16), ranked well enough to receive TA, created Youth Homeless Leadership Team, Youth Advisory Board & Resource Map of Housing & Services. An RFP to create Plan to End Youth Homelessness to be released 10/2/17. HMIS data on FTH & LOS for youth used as measures to track impact. Street HMIS data showed 49% decrease in FTH youth b/t FY'15 & FY'16. CoC believes FTH and LOS data suggest effective prevention/diversion and briefer street and shelter stays.

3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services. (limit 1000 characters)

Boston Public Schools collects data on students meeting DOE McKinney-Vento homeless definition. CoC Lead & BPS convene monthly Family Stability Pilot meetings w/ non-profits working w/ homeless families w/children and BHA to pair homeless BPS students and their families w/affordable housing & stabilization services. Housing resources incl. PH, HCV & private affordable units. State contracts require all CoC family shelters to designate staff liaison to ensure homeless children seamlessly enrolled in school/early childhood ed. CoC & ESG family providers coordinate with BPS McKinney-Vento Liaisons(MVs) to ensure families & youth access CoC & ESG resources. MVs are informed when family is placed in ES and family is informed of option to continue in school of origin or enroll in nearby school. BPS Homeless Education Resource Network provides transport for homeless students in need to public, charter, private, parochial or districts outside Boston via On-line Transportation Request form.

3B-2.9. Does the CoC have any written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No".

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	Yes	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	Yes
Public Pre-K	No	Yes
Birth to 3	Yes	Yes
Tribal Home Visiting Program	No	No
Other: (limit 50 characters)		
Child Protection System	No	Yes
Child to Adolescent Clinical	No	Yes

**3B-3.1. Provide the actions the CoC has taken to identify, assess, and refer homeless Veterans who are eligible for Veterans Affairs services and housing to appropriate resources such as HUD-VASH and Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 1000 characters)**

The CoC convenes the Vets WG to create housing plans for every sheltered & unsheltered homeless vet in Boston on the BNL. Staff are represented from the VA, VAMC, the BHA, MA DMH, GPD, Street Outreach (SO), ES, & SSVF. SO teams, incl. VAMC outreach, engage vets on the street, in ES & at TH/GPD programs. Those identified as VA eligible are assessed by the VA outreach worker for services & referred appropriately. Those determined VASH eligible are referred to VASH intake staff. Currently, the WG is referring BNL VASH-eligible Vets who have been homeless the longest to a project-based VASH site that opened last year on site at NECHV. Similarly, all Vets who enter ES or TH/GPD programs are assessed for SSVF eligibility. To facilitate rapid enrollment, SSVF workers are embedded in all single adult ES's. Recently Vets WG members organized the Housing Tent at the Boston Stand Down to help eligible vets identify & navigate appropriate housing pathways; 18 long term homeless vets attended.

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

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

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

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

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Select from the drop-down (1) each type of healthcare organization the CoC assists program participants with enrolling in health insurance, and (2) if the CoC provides assistance with the effective utilization of Medicaid and other benefits.

Type of Health Care	Yes/No	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, e.g. Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits

CoC program funded projects must be able to demonstrate they supplement CoC Program funds from other public and private resources, including: (1) how the CoC works with mainstream programs that assist homeless program participants in applying for and receiving mainstream benefits; (2) how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for homeless program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs); and (3) identify the organization or position that is responsible for overseeing the CoCs strategy for mainstream benefits. (limit 1000 characters)

The CoC systematically provides MS benefit info to its provider network via listserv, web site & meetings, incl. info on eligibility/changes that affect clients. In FY 17 100% of renewal & new projects assisted homeless HH in obtaining MS benefits. To supplement CoC program funds, DND has partnered w/ local health care & housing agencies to connect clients to MS resources including elder services. BHCHP (a CoC member) outreaches to ES & street to enroll HH's in Medicaid. CH WG knows health coverage of 80% of indiv. on the BNL of CH indiv.; 76% receive Medicaid. CoC collaborated with MassHealth to host 3 housing surge events for CH elders. Attendees were assessed & enrolled in Medicaid services to support PH stability. The CoC signed a MOU w/ the BHA to create a Superpriority for CH elders w/ services & 88 individuals received offers of hard units & services via surges. As convening entity, DND sponsors

housing surges w/ the state, BHA, & providers as part of overall MS strategy.

4A-2. Low Barrier: Based on the CoCs FY 2017 new and renewal project applications, what percentage of Permanent Housing (PSH) and Rapid Rehousing (RRH), Transitional Housing (TH), Safe-Haven, and SSO (Supportive Services Only-non-coordinated entry) projects in the CoC are low-barrier?

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	37.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	37.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	100.00%

4A-3. Housing First: What percentage of CoC Program Funded PSH, RRH, SSO (non-coordinated entry), safe-haven and Transitional Housing; FY 2017 projects have adopted the Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	37.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	37.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	100.00%

4A-4. Street Outreach: Describe (1) the CoC's outreach and if it covers 100 percent of the CoC's geographic area; (2) how often street outreach is conducted; and (3) how the CoC has tailored its street outreach to those that are least likely to request assistance. (limit 1000 characters)

Boston Interagency Street Outreach Network covers entire CoC 365 days/year. Pine Street conducts mobile day & overnight outreach daily, Bridge Over Troubled Waters provides homeless & runaway youth outreach via street workers & mobile medical van with hotline back-up 24/7. 311 Helpline and BPD ensure city-wide coverage. Persons least likely to request assistance are referred as appropriate to Pine St Inn, Boston Police Homeless Liaison, DMH & Boston Emergency Services Team (BEST) crisis hotline for mental health emergencies. Health Care for the Homeless assists persons with complex mental/cognitive health issues like Traumatic Brain Injury co-occurring with substance use. Boston Public Health added 6 new outreach staff to cover opioid & substance users city-wide. Outreach is multilingual. Spanish speakers at all agencies, Haitian Creole, Chinese, other language translation and ASL available via Mayor's Health Line & Medical Centers.

**4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin,**

religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach.

Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

The CoC has implemented strategies to AFFH & provides effective communication to ensure PWD & limited english proficiency apply for system resources. The strategies that AFFH are via the CoC CE system. The CoC CES is well advertised & coverage is CoC wide. It includes multiple elements & access points to ensure those least likely to apply have access to resources: 311 mobile constituent app; marketing of the CAS system in multiple languages; virtual & physical locations that are accessible to PWD. CoC & DMH outreach workers engage w/ people on the streets, targeting those w/ MH, SUD, or other barriers that make them least likely to apply / seek out resources. Through ESG, CoC supports outreach efforts targeting LGBTQ and RHY populations, who may not typically enter shelter / access "adult" resources. Access to PSH is coordinated through CAS & offers are prioritized based on vulnerability and cumulative time homeless, assuring those in most need are paired w/ the deepest resources.

4A-6. Compare the number of RRH beds available to serve populations from the 2016 and 2017 HIC.

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	138	934	796

4A-7. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve homeless households with children and youth defined as homeless under other Federal statues who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3). No

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	MA-500 Notice to ...	09/26/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	MA-500 Public Pos...	09/27/2017
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	MA-500 Rating and...	09/26/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	MA-500 Rating and...	09/26/2017
05. CoCs Process for Reallocating	Yes	MA-500 Process fo...	09/26/2017
06. CoC's Governance Charter	Yes	MA-500 CoC Govern...	09/26/2017
07. HMIS Policy and Procedures Manual	Yes	MA-500 HMIS Polic...	09/26/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	MA-500 PHA Admini...	09/26/2017
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
11. CoC Written Standards for Order of Priority	No	MA-500 CoC Writte...	09/26/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	MA-500 HDX System...	09/26/2017
14. Other	No	MA-500 Other - No...	09/26/2017
15. Other	No		

Attachment Details

Document Description: MA-500 Notice to Rejected Participants

Attachment Details

Document Description: MA-500 Public Posting Evidence

Attachment Details

Document Description: MA-500 Rating and Review Procedure

Attachment Details

Document Description: MA-500 Rating and Review Procedure: Public Posting Evidence

Attachment Details

Document Description: MA-500 Process for Reallocating

Attachment Details

Document Description: MA-500 CoC Governance Charter

Attachment Details

Document Description: MA-500 HMIS Policy and Procedures Manual

Attachment Details

Document Description:

Attachment Details

Document Description: MA-500 PHA Administration Plan (Applicable Sections Only)

Attachment Details

Document Description:

Attachment Details

Document Description: MA-500 CoC Written Standards for Order of Priority

Attachment Details

Document Description:

Attachment Details

Document Description: MA-500 HDX System Performance Measures

Attachment Details

Document Description: MA-500 Other - Notice of Project Inclusion
(Q.1E-5a)

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	08/23/2017
1B. Engagement	09/27/2017
1C. Coordination	09/25/2017
1D. Discharge Planning	08/23/2017
1E. Project Review	09/27/2017
1F. Reallocation Supporting Documentation	09/14/2017
2A. HMIS Implementation	09/25/2017
2B. PIT Count	09/25/2017
2C. Sheltered Data - Methods	09/26/2017
3A. System Performance	09/27/2017
3B. Performance and Strategic Planning	09/26/2017

4A. Mainstream Benefits and Additional Policies	09/27/2017
4B. Attachments	09/27/2017
Submission Summary	No Input Required



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From: Katie Cahill-Holloway [mailto:katie.cahill-holloway@boston.gov]

Sent: Monday, July 31, 2017 9:55 AM

To: Pooja Bhalla; Alex Browder; Alex Kontras; Alexandra Pastore; Alexia Layne-Lomon; Alexis Lindman; Allison Kinyua; Amanda Townsend; Amanuel Haile; Andrea Farina; Andrew Malloy; Andrew McCawley; Andrew Pond; Angela Marcolina; April Stevens; Arlene Snyder; Beth Grand; Bill Porcello; Bill Sprague; Brenda Cassidy; Brian Cormier; Brian Kindorf; Bruce L. Bird; Brunette Beaupin; Caitlin Burbidge; Carl Sciortino; Carla Richards; Carol Ann McAuliffe; Cheri Epps; Chris Norris; Chris Womendez; Christopher Dollard; Connie Wynne; Corey Grier; Cronin, Zoe; Daniel Ayala; Darlene L Tritto; David Thomas; Dayna Gladstein; Deborah Collins-Gousby; Deborah Hughes; Debra Paul; drouinm@vinfen.org; Edward Ahern; Eileen Merisola; Eileen O'Brien; Elisabeth Jackson; Elizabeth Maglio; Elizabeth Winston; Ellen Tan; Erin Flynn; Felicia Smith; Feranda Faria; FINEX; Gail Livingston; Hank Layfield; Heather Ross; Jack Langley; Jacquelynne J. Bowman; James Greene; James May; Jamie Rihbany; Jayne Murphy; Jessyka Marquez; Jim Greene (jgreene@bphc.org); Joanne McMahon; Joe Finn; Joe McPherson; John Hillis; John Samaan; Jon Murphy (Director of Service); Jonathan Scott (Executive Director); Karen LaFrazia; Karla Sordia Lozano; Kate Walsh; Katherine Hastings; Kaye Wild; Kelly Mulligan; Kevin Davis; Kevin Ward; Kim Davis; Kip Langello; Kristen Lascoe; Kristine Dinardo; Larry Elgart; Larry Gottlieb; Larry Seamans; LaTanya Wright; Laura Souders; Leo Adorno; Linda Garcia; Linda Lank; Linda Lown-Klein; Linda Smith; Linda Wood-Boyle; Lisa Kaplan; Liz Rogers; Lois Ferrareso; Lori Cain; Louise Reilly; Lucy Stonis; Lyndia Downie; Malherbe, Melanie; Maria Davis; Maria Torres; Marianne McLaughlin; Marisa Mcquaid; Mark Dagnall; Mark Hinderlie; Mary Thomas; Matthew Dowd; Maureen Skeeahan; May Shields; Meghan Goughan; Mia Demarco; Michael Lara; Michelle Chandler; Mike Way; Myechia Minter Jordan; Myra Ackerman; Nancy Mahan; Nancy Owens-Hess; Nancy Paladino; Nancy Sullivan; Nicole Fitzgerald (COO); Pamela Andrade-Talbert; Pat Lucca; Patricia Sullivan; Paula DiMascio; Paula Saba; Peter Schindler; Polly Hanson, LICSW; Ralph Hughes; Raquel Rosenblatt; Renee Yourk; Richard Matos-Haile; Richard Ring; Rita Chapdelaine; Roxby Frost; Rox Lindbert; Roy Morrison; Ruth Harel Garvey; Samuelle Margolis; Sarah Decelles; Sarah McBride; Sarah Porter; Sarah Quinn; Sean Harding; Sharon Reilly; Sister Margaret Leonard; Stephanie Brown; Steve Wilkins; Sue Buoncuore; Sue Morong; Sue White; Susan Chorley; Susan Keliher; Susan Nohl; Susan Rabinowitz; Suzanne Kenney; Tabitha Gaston; Tammy Simmons-Dixon; Tara Rousseau; Theresa Brewer; Theresa Okokon; Thuy Dung Nguyen; Timothy J. Barrett; Tom Lorello; Tom Morris; Toni Jones; Valerie Frias; Valina Jackson; Venessa Rosemond; Verna Augustine; Victoria Jalal; Virginia Griffin; Yahaira Bautista

Cc: Laila Bernstein; Laura Rivera-Davis; Adelina Correia; Caroline McCabe; Courtney Trudell; Jennifer Flynn; Kadra Adderly; Gina Schaak

Subject: Boston CoC: New Permanent Housing Bonus and Reallocation RFP

Good morning Boston CoC.

The Request for Proposals for those seeking to apply for new permanent housing bonus or reallocation projects under HUD's 2017 Continuum of Care competition has been posted to the City of Boston's procurement supplier portal. You may also obtain a copy by visiting DND's Bid Counter, 26 Court Street, 10th floor. Please see Request for Proposals for application requirements, including details on the mandatory Applicants' Conference scheduled for August 7, 2017 at 10:30 AM. You may access the Supplier Portal by following the link embedded below.

<https://procurement.cityofboston.gov/psp/prdsp/SUPPLIER/ERP/h?tab=DEFAULT>

Katie Cahill-Holloway
Acting Deputy Director for Supportive Housing
City of Boston | Massachusetts
Department of Neighborhood Development
Supportive Housing Division
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Boston, MA 02108
Tel: [617-635-0253](tel:617-635-0253)
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<https://www.boston.gov/housing/c/continuum-care-program>



BOSTON'S WAY HOME

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Event Details

Welcome, COB Supplier Portal Guest
 User: COB Supplier Portal Guest

New Window | Customize Page

[Information On Inquiry Options](#)

Bidding Shortcuts: [View Event Package](#)

Event Name:	Permanent Supp. Hsg. Bonus & Reallocation for CoC		
Event ID:	BOSTN-EV00004596		
Event Format/Type:	Sell Event	RFx	
Event Round:	1		
Event Version:	1		
Event Start Date:	07/31/2017 9:00AM EDT		
Event End Date:	08/15/2017 04:00 PM EDT		
Event Description:			
Requesting proposals for new permanent housing programs, new rapid re-housing programs funded through HUD's Continuum of Care (CoC) Program or the reallocation of existing resources that wish to be included in a single, city-wide application on behalf of the Boston CoC.			
Contact:	Armstrong, Lorrie	Payment Terms:	
Phone:		My Bids:	Edit Bid
Email:	lorrie.armstrong@boston.gov	Edits to Submitted Bids:	Allowed
Online Discussion:		Multiple Bids:	Not Allowed
Live Chat Help:			

★ Bid Required | Line Comments/Files

Line	Description	Unit	Requested Quantity	Status
			1 of 1	



MA-500

Evidence of the CoC's communication to rejected participants



Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

quick follow up

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Wed, Sep 6, 2017 at 4:16 PM

To: Alexandra Pastore <alexandra.pastore@nechv.org>, Kevin Ward <kevin.ward@nechv.org>, "Hunt, Courtney" <courtney.hunt@nechv.org>,
Andrew McCawley <andrew.mccawley@nechv.org>

Cc: Jennifer Flynn <jennifer.flynn@boston.gov>

hi folks,

thanks for your time earlier to discuss the needed revisions to your project application. 2 quick things i want to mention as i'm putting together the project list for our CoC application:

-i've given the project the name "housing options for vets (HOV)" let me know if you have another name in mind.

-assuming the revisions are as we discussed, the overall application amount will be \$273,102, which is slightly less than you originally applied for. this allows us to stay within the maximum amount we can request in bonus funding.

we look forward to your revised submittal on 9/13.

best,
katie

Katie Cahill-Holloway
Acting Deputy Director for Supportive Housing
City of Boston | Massachusetts
Department of Neighborhood Development
Supportive Housing Division
26 Court Street, 8th Floor
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<https://www.boston.gov/housing/continuum-care-program>



BOSTON'S WAY HOME
MAKING THE CITY A BETTER PLACE TO LIVE



MA-500

CoC Consolidated Application: Public Posting Evidence



Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Boston CoC: 2017 CoC Application and Project Priority Listing Posted

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Tue, Sep 26, 2017 at 5:56 PM

To: Pooja Bhalla <pobhalla@bhchp.org>, Alex Browder <abrowder@commonwealthlandtrust.org>, Alex Kontras <akontras@mhsa.net>, Alexandra Pastore <alexandra.pastore@nechv.org>, Alexia Layne-Lomon <alexia.laynelomon@bostonabcd.org>, Alexis Lindman <ALindman@baycove.org>, Allison Kinyua <akinyua@brm.org>, Amanda Townsend <ATownsend@prohope.org>, Amanuel Haile <Ahaile@prohope.org>, Andrea Ryan-Farina <Afarina@stfranchishouse.org>, Andrew Malloy <amalloy@projectplace.org>, Andrew McCawley <andrew.mccawley@nechv.org>, Andrew Pond <apond@jri.org>, Angela Marcolina <Angela.marcolina@bostonhousing.org>, April Stevens <April.Stevens@pinestreetinn.org>, Arlene Snyder <ASnyder@bridgeotw.org>, Beth Grand <bgrand@bphc.org>, Bill Porcello <wporcello@hearth-home.org>, Bill Sprague <bsprague@baycove.org>, Brenda Cassidy <bcassidy@aac.org>, Brian Cormier <bcormier@headinghomeinc.org>, Brian Kindorf <Brian.Kindorf@npcm.com>, "Bruce L. Bird" <birdb@vinfen.org>, Brunette Beapin <Brunette.Beapin@mbhp.org>, Caitlin Burbidge <cburbidge@mhsa.net>, Carl Sciortino <csciortino@aac.org>, Carla Richards <carla.richards@bostonabcd.org>, Carol Ann McAuliffe <cmcauliffe@prohope.org>, Cheri Epps <cheri_epps@bphc.org>, Chris Norris <Chris.Norris@mbhp.org>, Chris Womendez <chriswomendez@hotmail.com>, Christopher Dollard <Christopher.Dollard@va.gov>, Connie Wynne <cwynne@commonwealthlandtrust.org>, Corey Grier <CGrier@bphc.org>, "Cronin, Zoe" <zcronin@gbls.org>, Daniel Ayala <daniela@familyaidboston.org>, Darlene L Tritto <trittod@vinfen.org>, David Thomas <dthomas@bphc.org>, Dayna Gladstein <Dayna.Gladstein@pinestreetinn.org>, Deborah Collins-Gousby <dcollins-gousby@casamyma.org>, Deborah Hughes <dhughes@brookviewhouse.org>, Debra Paul <dpaul@bphc.org>, "drouinm@vinfen.org" <drouinm@vinfen.org>, Edward Ahern <eahern@vpi.org>, Eileen Merisola <emerisola@voamass.org>, Eileen O'Brien <eileen.obrien@bmc.org>, Elisabeth Jackson <EJackson@bridgeotw.org>, Elizabeth Maglio <emaglio@prohope.org>, Elizabeth Winston <elizabethwinston@justastart.org>, Ellen Tan <etan@commonwealthlandtrust.org>, Erin Flynn <EFlynn@jvs-boston.org>, Felicia Smith <fsmith@sojournerhouseboston.org>, Feranda Faria <ffaria@comteam.org>, FINEX <finexhouse@yahoo.com>, Gail Livingston <gail.livingston@bostonhousing.org>, Hank Layfield <layfield@homestart.org>, Heather Ross <hross@gbls.org>, Jack Langley <jackl@familyaidboston.org>, "Jacquelynne J. 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Good afternoon Boston CoC,

9/26/2017

City of Boston Mail - Boston CoC: 2017 CoC Application and Project Priority Listing Posted

The Boston CoC has posted its HUD / CoC 2017 Consolidated Application and Project Priority Listing to its webpage .

<https://www.boston.gov/departments/neighborhood-development/continuum-care-program#latest-updates>

To view the CoC Consolidated application, please see "Latest Updates".

To view the FY17 Project Priority Listing, please see "Latest Updates".

Boston will submit the 2017 CoC Consolidated Application to HUD by September 28, 2017.

Katie Cahill-Holloway
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BOSTON'S WAY HOME
MAKING HOUSING WORK

Mayor Martin J. Walsh

PUBLIC NOTICES PAY AND APPLY FEEDBACK

MEETINGS INFORMATION BOSTON COC NETWORK PROVIDERS RELATED LINKS

LATEST UPDATES

The Boston CoC has posted the HUD / CoC 2017 Consolidated Application and Project Priority Listing.

View the CoC Consolidated application.

View the FY17 Project Priority Listing.

Boston will submit the 2017 CoC Consolidated Application to HUD on September 28, 2017.

Attention Boston CoC and interested parties:

HUD released the 2017 Continuum of Care NOFA on July 14. The CoC application and all project renewals are due to HUD on September 28, 2017.

In an effort to put forth the most competitive application possible, DND hosted a Boston CoC General Membership meeting on Wednesday, August 9 at 26 Court Street, Boston, in the Winter Chambers.

The agenda included

- ▶ a NOFA overview
- ▶ Information on Permanent Housing Bonus and Reallocation opportunities, and
- ▶ an update on tiering and the project scoring methodology.

mobile view



The Boston CoC has posted the HUD / CoC 2017 Consolidated Application and Project Priority Listing.

[View the CoC Consolidated application.](#)

[View the FY17 Project Priority Listing.](#)

Boston will submit the 2017 CoC Consolidated Application to HUD on September 28, 2017.



BOSTON CONTINUUM OF CARE
LEADERSHIP COUNCIL MEETING MINUTES
September 7th, 2017 3:00- 4:30PM
26 Court St., 1st floor conference room

Agenda Items

1. Welcome & Introductions

Sign-In sheet of attendees attached.

2. CoC 2017 Competition

Katie

- Final application amount

The final application amount for the Boston CoC will be \$26,250,698

- Review list of renewal applications

37 Renewal applications for CoC Operations (HMIS, CAS), Permanent Supportive Housing Leasing and Services and Rapid Re-Housing.

- New PH Bonus and Reallocation update

4 New Project Applications were submitted to the CoC by the publicly advertised RFP Process. 1 New project came in under the reallocation process, St. Francis House RRH, and the remaining 3 under Bonus. These three new projects include one RRH by Pine Street Inn, 1 Dedicated Plus PSH by Mass Housing and Shelter Alliance and 1 Joint TH-RRH by New England Center and Home for Veterans. The total amounts requested by these projects were pretty in line with what the CoC is able to apply for under the Bonus so no budgets or projected numbers served need to be adjusted.

- Work to finalize applications

The Development Officers continue to complete the renewal applications in Esnaps but the process is going smoothly due to being able to import last year's application. The bulk of the work now is focusing on completing the narratives in the CoC Application. Please have staff available at your agencies in case any help is needed with the narratives.

- Planning Application -Ideas include
 - Coordinated Entry: further build out of system
 - Youth system coordination
 - Scale up Front Door Triage
 - Outcome evaluations (RRH, employment, diversion, etc.)
 - Discharge planning

As a continuation from last Council meeting, the DND team solicited feedback and ideas regarding the uses of Planning Grant funds for the upcoming year as we fully embark on Coordinated Entry and CoC Systems Change. There was a general consensus to scale up Coordinated Entry both in order to comply with a HUD deadline but also with the intention that scaling up Coordinated Entry will also influence other Systems Change issues such as Discharge Planning and Front Door Triage. Additional focus to scale up the Youth Leadership Team and working group in anticipation of the CoC's upcoming Youth Plan RFP as well as HUD's Youth NOFA. Focus also needs to include the Family shelter system and taking a more active role even though the State manages the system. And finally, Planning funds should be used to look at increasing the diversity (racial, income, sector representation) both of the Council but also the overall leadership in the Service Provider community.

The general consensus involved the researching of both policies and procedures from neighboring CoCs and other Systems of Care as well as Best Practices across the region and country. As a major metropolitan city, Boston continues to serve a regional need. Neighboring CoCs have developed tight entrance policies for shelter which can increase demand for Boston's low barrier, no wrong door, shelter system. Does the CoC need to look to a single point of entry, a more robust 211 system statewide which does not just send folks to Boston shelters, or increased Front Door Triage/Diversion. Education with other Systems of Care which Discharge to shelters also needs to occur and has already started and was noted that a particular medical facility with high discharges was invited to the shelter to see the conditions that medically frail clients are being discharged to. Other State Systems of Care are also in the process of systems change as well and how do these changes influence our system. The example of the DPH procurement of DV contracts was noted and the emphasis on "must be currently fleeing" as an entrance criteria and how is this going to affect the availability of other non-DV beds in the CoC.

Finally, an ongoing discussion regarding the members and structure of the decision making body must be undertaken. As is now, the Leadership Council lacks diversity, diversity both in the sector in which the member represents as well as the racial, ethnic and economic diversity of the members. The Council is extremely service provider heavy, meaning that the majority of the Council must recuse themselves from voting at funding decision time. The Council also lacks members of a diverse racial makeup, partially due to the large representation of Provider staff on the Council, as well as the imbalance in the diversity of the decision makers of the Providers themselves.

3. Review & Action:

Katie

- Ranking and Tiering: approve
- Approve: new projects

All Leadership Council members with a conflict of interest recused themselves from the meeting at this point for a vote. The remaining members reviewed the handed out Project Priority Listing. The Projects were listed by the previously approved Priority order of: CoC Operational grants, Renewal PSH-Leasing, Renewal PSH-Services, Renewal RRH, New Reallocation, New Bonus. The projects were reviewed and scored by a DND review team using the previously approved Project Score sheet and a final consensus score was reached. Projects were then ranked within their component type by the order for the consensus score, until the Tier 1 threshold funding amount was met. The Tier 1 Amount of \$22,638,216 was reached midway through the Renewal RRH component. The straddle project of Project Hope's RRH for Students and Families will partially be included in Tier 1 and partially included in Tier2.

The Council Voted to include and approve the Renewal Projects in the Priority Order presented and scored.

A more detailed description of the New(Bonus and Reallocation) projects was discussed with the Council in order to inform of the component type, population proposed to serve, numbers proposed to serve and final funding amount.

The Council voted to include and approve the New Projects presented for funding as well as the funding amounts.

4. Adjourn and Next Meeting
December 20, 2017, 3 – 4:30 PM

Katie

-Charter revisions

MA-500: Boston CoC: Reallocation Recommendation – CoC 2017 Competition

St. Francis House: RRH - Access to Employment: reallocation of existing Moving Ahead Transitional Housing program to RRH- services with a focus on enhancing employment opportunities and access to income for up to 180 clients enrolled in CoC RRH programs.

MA-500: Boston CoC: New PH Bonus Recommendations – CoC 2017 Competition

PSI -Place Me Home Chronic Housing - PSH: develop team parallel to team at PSI that works at BPHC to assist those on the CH list with all aspects of obtaining PH, including interacting and responding to CAS and assisting clients through housing search, document readiness, lease up and initial stabilization. Project also includes the creation of 12 new units of low barrier housing at PSI. The proposed project has a point in time capacity to serve 150 clients.

MHSA – Homefront Expansion and PSH- Dedicated Plus project: MHSA will partner w/ NECHV to double the capacity of Homefront, from 15 to 30 units. Homefront is a PSH program that serves non-VA eligible veterans with leasing and supportive services. Dedicated Plus designation will allow program to serve those vets that were chronic at one point but no longer meet the strict definition.

NECHV – Housing Options for Veterans, Joint TH – PH-RRH:

NECHV has proposed a joint TH-RRH project that will outreach to the 40 most vulnerable and hardest to serve vets in our system, to immediately place them in either TH or RRH. NECHV will work in conjunction with shelters throughout Boston and with the veterans working group to identify vets on the street and in emergency shelter to enroll them in HOV. The flexibility of the model allows for client choice in terms of immediate placement into TH or RRH and allows for those in TH to move on to CoC rental assistance, something prohibited with other CoC RRH resources.

CoC Leadership Council Team Meeting
September 7, 2017

✓	<i>Arlene Schneider</i>
✓	Alana Olsen
	Andy McCawley
	Annissa Essaibi-George, City Councilor
✓	Beth Grand <i>David Thomas</i>
	Bill McGonagle
	Chris Norris
✓	David Gleich
	Elisabeth Jackson
✓	Gabby Vacheresse
	Gail Livingston
✓	Gina Schaak
	James O'Connell
✓	Jennifer Flynn
	Jessie Gaeta
✓	Jim Greene
✓	Karen LaFrazia
✓	Katie Cahill-Holloway
	Kaye Wild <i>on phone</i>
✓	Laila Bernstein
✓	Libby Hayes
✓	Lyndia Downie

**CoC Leadership Council Team Meeting
September 7, 2017**

✓	Matt Pritchard
	Sandra McCroom
✓	Seth Michaelson
	Sheila Dillon
✓	Stephanie Brown



MA-500

CoC Rating and Review Procedure

Boston Continuum of Care 2017 Competition Reallocation Policy

Based on the CoC 2017 Competition HUD NOFA, the Boston CoC is seeking funds from reallocated projects to:

- Create new Permanent Supportive Housing (PSH) Projects for chronically homeless (CH) individuals and families
- Create new Rapid Re-Housing (RRH) projects for homeless individuals and families, including unaccompanied youth, coming from the street or emergency shelter
- Create new Joint TH and PH-RRH projects to better serve homeless individuals and families, including those fleeing or attempting to flee domestic violence

Process to Reallocate Existing CoC Resources:

The City of Boston will issue a publicly advertised Request for Proposals to solicit project applications from existing CoC providers that wish to reallocate funds to create one of the project types described above and in HUD's Notice of Funding Availability for FY '17 CoC Competition.

- Applications for new PSH and RRH projects will be rated and ranked according to the Boston CoC 2017 Competition Review, Rating and Ranking and Selection Criteria and Process

Total Annual Renewal Demand

(ARD) \$24,083,209

Tier 1 = 94% of the ARD or \$22,638,216

Tier 2 = 6% of the ARD or \$1,444,993

HUD Tier 1 and Tier 2 Selection Process

Tier 1 - HUD will select projects that are ranked in Tier 1 based on CoC score, beginning with the highest scoring to the lowest scoring CoC (Tier 1 projects are likely to be funded by HUD).

Tier 2- HUD will select projects that are prioritized in Tier 2. All projects in Tier 2 will be scored on a 100 point scale based on the following criteria:

- I. up to 50 points for CoC score (CoC maximum score of 200 pts= 50 pts),
- II. up to 40 points for CoC ranking of the project,
- III. up to 10 points for commitment to operating a housing first/low barrier program model

Boston CoC FY17 Competition Project Review, Rating, and Selection Criteria

The CoC uses several methods to monitor the project performance of program recipients, including desk review monitoring, on-site DND monitoring, Annual Program Report (APR) review, HMIS and System Performance data review.

Sponsors are required to invoice monthly, which is reviewed to ensure eligibility of activities, expenditure rates and administrative capacity.

Annual Performance Reports (APR) are also reviewed for project utilization rates, success in accessing mainstream benefits, permanent housing destination data and recapture rates of unobligated funds.

HMIS and System Performance Measurement (SPM) data is analyzed to ensure project and agency participation and data quality. The majority of the monitoring, scoring and ranking criteria are based on this data. The criteria include, but are not limited to, the following data:

- Destination of exits from RRH and PSH program
- Length of stay/retention of PH in PSH and RRH programs
- Returns to homelessness
- Increased earned income through employment
- Increased overall income (include mainstream benefits)
- HMIS project data quality
- Level of high need populations served

CoC staff maintains an on-site monitoring schedule, which includes review of client records, in addition to feedback on performance concerns that may have presented through APRs, invoicing or other means. The CoC staff triages visits based on risk, new providers, and/or large programs may be more likely to be selected for on-sight monitoring by staff. The CoC also offers on-demand technical assistance to ensure providers have adequate systems and information necessary to effectively manage the programs.

Tier 1 Projects

Projects will be placed in Tier 1 in order of priority:

Tier 1 - Priority One

HMIS dedicated renewal projects that are funded to: increase CoC staff capacity, fund the projected increased cost of HMIS software, secure additional software licenses for state and federal partners (DMH and the VA), and customizations in order to interface with the Coordinated Access system. The renewal of the Coordinated Access SSO project, which supports the funding of CAS, is also included in this priority.

Tier 1 – Priority Two

Renewal PSH Projects that directly support leasing and rental assistance costs and meet HUD threshold criteria, and are then scored by the CoC renewal scoring tool based heavily on system/project performance data.

Tier 1 –Priority Three

Renewal PSH projects that directly support services for chronic in housing and meet HUD threshold criteria are then scored by the CoC renewal scoring tool based heavily on system/project performance data.

Tier 1 – Priority Four

Renewal PH-RRH projects that directly support homeless individuals, families and youth with rapid rehousing assistance and meet HUD threshold criteria, and are then scored by the CoC renewal scoring tool based heavily on system/project performance data.

Tier 2 Projects

Tier 2- Priority One: Renewal PH-RRH projects as described above. Given the Tier 1 limit, a portion of renewal PH-RRH projects will fall into Tier 2 based on rank from the scoring tool. It is anticipated that one of these projects will be the CoC's "straddle project" where a portion of the project funding falls within Tier 1 and the balance is at the top of Tier 2.

Tier 2- Priority Two: (New Reallocation Projects) these projects will be ranked with the new project scoring tool and placed below renewing projects that fall within Tier 2.

Tier 2 – Priority Three: (New Permanent Housing Bonus Projects) these projects will be ranked with the new project scoring tool and placed below new reallocation projects.

Initially projects (new and renewal) will be reviewed to ensure they meet HUD threshold requirements. All projects will be ranked by score using the CoC scoring tools (new and renewal). Projects that are renewing for the first time or have been operating for less than a year as of September 1, 2017 will be evaluated using the new project scoring tool. The scoring tools weight heavily on system performance measurements data outcomes. The score will be made up of the follow criteria:

1. Consistency with HUD objectives regarding past project performance as it relates to HUD and CoC system performance measurements- include; exits to PH, length of stay in PSH, increased income employment and mainstream benefits. *(Scoring source- APRs, SPM, and HMIS)*
2. Project level HMIS data quality- Include; percentage of bed coverage in HMIS, percent of null and unknown data fields. *(Scoring source- HMIS)*
3. Financial Management of project-include; agency audit findings, project invoicing, and project cost effectiveness and contribution of non-CoC funded resources. *(Scoring source from APR and monitoring data)*
4. Project utilization rates- include; rates of returned funds, utilization at PIT count and average throughout the year, and target population. *(Scoring source- HMIS, AHAR, PIT report, SPM, and HIC report)*
5. Alignment with CoC, HUD, and USICH policy priorities-include; serving sub-populations most at risk to or experiencing long-term homelessness, project that operate a housing first/low barriers model, projects serving populations with serve needs and who have high barriers to housing, projects participating in the coordinated access system, and projects who serve households who have been homeless for longest length of time. *(Scoring source- APRs, HMIS, SPM, and Project Applications)*

HMIS Guidance for the Desk Review Monitoring Tool for the CoC Program

Instructions: This Guide has been marked up in order to help you interpret the Project Data Quality Report (will be renamed eventually) that has been generated from the Boston CoC HMIS Data Warehouse. This report was designed specifically to answer the data and outcome related questions for this version of the CoC Monitoring Tool. Depending on the program's structure, one or more HMIS programs may be grouped together in order to generate this report for the evaluation of the full grant and program. The guide will also make an attempt to direct you to the actual data element used in this calculation where applicable.

HMIS review conducted by (SH Development Officer and HMIS PM):	Direct Entry by Development Officer
Date HMIS review completed:	Report Summary: Completed On Auto Generated based on user submission in warehouse report
Agency Name:	Title of Report & Result of Measure (Agency Name) Pulled from Site Name in HMIS
Subrecipient Name ¹ (if different than agency)	Result of Measure - Partner Agencies will be listed here (Agency Name) Pulled from the Site Name in HMIS
Project Name:	Title of Report & Result of Measure (Project Name) -- Partner Agency programs will be listed here Pulled from the Program Name in HMIS
Operating Year that was Monitored (corresponds to APR year used)	{START DATE} to {END DATE} Result of Measure (Operating Year (Funder Dates)) Pulled from Grant Start/End Date in HMIS Project Descriptor Data Elements
Funding Year:	Direct Entry by Development Officer Maybe inferred from Operating Year if present
Grant Identification #	Result of Measure (Grant ID#) Pulled from Grant ID# in HMIS Project Descriptor Data Elements
CoC Program Component:	Result of Measure (CoC Program Component Type) Pulled from Grant ID# in HMIS Project Descriptor Data Elements (grouped projects will have more

¹ If the onsite visit is different the actual subrecipient then list the subrecipient here- e.g. MBHP is the subrecipient for all RA grants, you may be conducting an onsite visit at one of their project sponsors

Is this a DV project?	than one type, Development Officers should use the main type Direct Entry by Development Officer DV programs are Federally Prohibited from entering HMIS data and must use a comparable database to and be able to report aggregate data directly to the Development Officer
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HMIS	Notes
1. Is the Agency entering the required data/descriptor touch-points into HMIS for this project?	<p>Result of Measure (Entering required descriptor data) Report is looking for completion of these fields above, not accuracy, Development Officers should use best judgement in completing this question based on the above supplied data</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
2. Is the Agency a DV provider and entering data into a comparable database for this project?	<p>Direct Entry by Development Officer DV programs are Federally Prohibited from entering HMIS data and must use a comparable database to and be able to report aggregate data directly to the Development Officer. If a DV program cannot produce a system generated APR this answer is NO.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
3. What is the percent of bed coverage in HMIS/comparable database for this project?	<p>Result of Measure (Bed Coverage %) Agency Supplied Beds Captured in HMIS per the Project Descriptor Inventory Data Point / Agency Supplied Total Beds for the Program per the Project Descriptor Inventory Data Point * 100</p>
4. What is the percent of null or missing data values?	<p>Development Officers should indicate the highest % element per the Results of Measures of Missing Names->Destination and the Element Name Total Clients Missing Element / Clients Included (Measure 1) *100</p>
5. What is the percent of refused or unknown values in HMIS?	<p>Development Officers should indicate the highest % element per the Results of Measures of Refused Names->Destination and the Element Name Total Clients Refused Element / Clients Included (Measure 1) *100</p>
6. Project meets data quality benchmarks established in the HMIS Data Quality	<p>Result of DQ Benchmark Measure Any Program with any measure in # 4 or #5 above with 10% or</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

Plan	Notes	higher is automatically NO
PERFORMANCE MEASUREMENTS 7. PSH Program: Participants remained in PH for over 12 months	Above 80% <input type="checkbox"/> 79%-50% <input type="checkbox"/> 49%-25% <input type="checkbox"/> Less than 80% <input type="checkbox"/>	Result of Measure Clients with Enrollments 12 months or longer (Leavers Length of Stay (Datedif of Entry Date-Exit Date) # > 12 months) + {Stayers Length of Stay (Datedif of Entry-End Date of report) #>12 months} # / Client Included (Measure 1) *100
8. RRH Program: Participants exited RRH to PH	Above 80% <input type="checkbox"/> 79%-50% <input type="checkbox"/> 49%-25% <input type="checkbox"/> Less than 80% <input type="checkbox"/>	Results of Measure Leavers who exited to PH Leavers who exit to PH Types / ALL Leavers *100 # Type: PERMANENT 25 Long-term care facility or nursing home 26 Moved from one HOPWA funded project to HOPWA PH 11 Owned by client, no ongoing housing subsidy 21 Owned by client, with ongoing housing subsidy 3 Permanent housing for formerly homeless persons 10 Rental by client, no ongoing housing subsidy 28 Rental by client, with GPD TIP housing subsidy 20 Rental by client, with other ongoing housing subsidy 19 Rental by client, with VASH housing subsidy 22 Staying or living with family, permanent tenure 23 Staying or living with friends, permanent tenure # Type: OTHER 24 Deceased
9. Percentage of program participants that gained/increased earned income after program entry through employment	Above 60% <input type="checkbox"/> 54-60% <input type="checkbox"/> Less than 54% <input type="checkbox"/>	Results of Measure % of Clients who increased Earned Income (Adults) {# All Clients with Earned Income at Most Recent Assessment (Exit or Annual)} - # All Clients with Earned Income at Entry}/All Clients *100
10. Percentage of program participants that obtained non-cash mainstream benefits	Above 75% <input type="checkbox"/> 74-55% <input type="checkbox"/> 54-25% <input type="checkbox"/> Less than 24% <input type="checkbox"/>	Results of Measure % of Clients who increased Non-Cash (Adults) {# All Clients with 1+ Sources at Most Recent Assessment (Exit or Annual)} - # All Clients with 1+ Sources at Entry}/All Clients

11. Percentage of program participants that increased overall income	Above 75% <input type="checkbox"/> 74-55% <input type="checkbox"/> 54-25% <input type="checkbox"/> Less than 24% <input type="checkbox"/>	*100 Results of Measure % of Clients who increased Total Income (Adults) {# All Clients Total Income Amount at Most Recent Assessment (Exit or Annual) – # All Clients Total Income Amount at Entry} = Those with a \$ increase / All Clients *100 This was not included on the original guide that Jen received. We will need to add this to Elliot's Queue
12. Length of time persons remain homeless (SPM Measure 1)	Was there a reduction in the avg. and median LOT for persons who remain homeless at the program	
APR and PROJECT APPLICATION DATA		
13. Project capacity for the operating year?		Notes Results from Bed Coverage Measure Agency Supplied Capacity (Bed Count) from the HMIS Inventory section of the Project Descriptor Data Elements
14. How many households were served over the course of the year?		Results from Clients Included All clients with an open enrollment in the report time period. Currently only calculating persons, need to add "family" function
15. What percentage of capacity is the project at for the operating year?	Above 85% <input type="checkbox"/> 84-75% <input type="checkbox"/> Less than 75% <input type="checkbox"/>	Still needs refining but will be "Percentage of beds in use, Average"
16. HUD funded contract amount for the projects operating year (not all BLI apply to all projects):	Services: Operations: Rental Assistance: Leasing: Admin:	
17. HUD funded actual invoice/billing (not all BLI apply to all projects):	Services: Operations: Rental Assistance: Leasing: Admin:	

18. Percentage of HUD funds remaining at the end of the operation year?		
19. Required match based on project budget:		
20. Match reported at end of project operating year:		
21. Was HUD match requirement met (25% of total HUD funds minus leasing dollars)		
22. Program has low-threshold eligibility criteria and ensures it is not screening out for CORI issues (only screens for CORI for CM informational purposes)	(have project complete attachment A regarding project entry denials)	
23. Services emphasis engagement and problem solving over punitive actions that lead to terminations	(have projects complete attachment B regarding terminations)	

Attachment A- Supplement to question #22

Use this chart to collect the last 5 program entry denials.

Applicant number (#1-5 do not use actual client names)	Reason for program denial, if not eligible please list eligibility criteria not met	Was there an appeal by the client, did staff work to mitigate the reason for denial to project

Attachment B- Supplement to question #23

Use this chart to collect the last 5 program terminations.

Applicant number (#1-5 do not use actual client names)	Reason for program termination	Was there an appeal by the client. If so what steps were taken?



Boston Continuum of Care FY17 Renewal Project Scoring Tool

Project Sponsor: _____

Project Name: _____

First Reviewer Name: _____

First Reviewer Score: _____

Second Reviewer Name: _____

Second Reviewer Score: _____

Consensus Score: _____

Criteria Topic	Scored Criteria	Criteria Source	Point Scale	Weight	Score
Past Performance and Performance Measurements	1. Exits from RRH and Retention in PSH	HMIS, SPM*		43%	
	1.a. RRH : Exit RRH to PH (benchmark 80%)	HMIS, SPM	30 pts: 100% - 80% 15 pts: 79% - 50% 5 pts: 49% - 25% 0 pts: below 24%		
	1.b. PSH : Stayed in PH for over 12 months (benchmark 80%)	HMIS, SPM	30 pts: 100% - 80% 15 pts: 79% - 50% 5 pts: 49% - 25% 0 pts: below 24%		
	2. Jobs and income growth through employment by 20%	HMIS, SPM	4.5 pts: 100-75% 3 pts: 74-55% 1.5 pts: 54-25% 0 pts: 24% - 0%		
	3. Income growth through other (non-employment) income by 20%	HMIS, SPM	4.5 pts: 100-75% 3 pts: 74-55% 1.5 pts: 54-25% 0 pts: 24% - 0%		
	4. Program has low-threshold eligibility criteria and ensures it is not screening out for CORI issues (only screens for CORI for CM informational purposes)	Desk review (question #22)	2 pts. if not screening out		
	5. Services emphasis engagement and problem solving over punitive actions that lead to terminations	Desk review (question #23)	2 pts. if no terminations for punitive actions		

Criteria Topic	Scored Criteria	Criteria Source	Point Scale	Weight	Score
HMIS data quality	6. Required project descriptor HMIS elements accurately completed	HMIS	6 pts: yes 0 pts: no	19%	
	7. Below 10% in null or missing values	HMIS	5 pts: 10 - 0% 0 pts: above 11%		
	8. Below 10% in refused or unknown values	HMIS	5 pts: 10 - 0% 0 pts: above 11%		
	9. Does agency have any A-133/3rd party audit outstanding findings	CoC monitoring report/ Agency external audit	3 pts: no outstanding findings 0 pts: any findings		
Project financial performance based on CoC/DND monitoring and invoicing	10. Invoicing- submit invoices- on time, with all back up materials, and for eligible activities	CoC monitoring report/ Agency external audit	5 pts: invoices always submitted on time, complete with no errors 2 pts: usually on time, complete with few errors 1 pt: if submit invoices seldom on time, incomplete and have errors	13%	
	11. Is project efficient with funds- do calculation of cost per person served in each project (include HUD funds and match total and compare standard practice: CH 1 FTE for 15-20 households, families \$4,00 per year, RRH 1 FTE to 20-30 clients per yr)	APR, Project Application Budget	3 pts: if standard is met and funding is equal to or less than per person/family ratio 0 pts: if not met and more funds per person/family		
	12. Required match based on project budget \$_____	Application and APR	3 pts: yes 0 pts: no		
	Was the match reported at end of operating year equal or greater?				
	13. Project returns unobligated funds in FY14 and/or FY15	eLoccs/ DND budget tracking	2 pts: 0 - 10% return 0 pts: 11 - 20%		
Utilization rates	14. Project utilization rate from current project operating year	APR	3 pts: 85 -over 100% 1 pt: 84 - 75% 0 pts: under 74%	3%	

Criteria Topic	Scored Criteria	Criteria Source	Point Scale	Weight	Score
Alignment with HUD, Opening Doors, Boston CoC (includes Boston's Way Home) policy priorities	15. Serving sub-populations in line with HUD and Boston CoC priorities: *Serving chronically homeless households, *Serving homeless youth; *Serving veterans; *Serving people fleeing domestic violence	Project Application	Up to 8 pts: 2 pts for each sub-population served	22%	
	16. Project practices a Housing First model/low barrier program	Project Application	4 pts: yes 0 pts: no		
	17. Does project serve participants who have the following vulnerabilities and severity of needs that may prevent them to enter housing due to the following barriers: *Vulnerability to victimization (history of DV); *Head of household has multiple disabilities; *Past unsheltered homelessness episodes; *Assault/child abuse (if program serves unaccompanied homeless youth) *Very little or no income at entry *current or past substance abuse *criminal histories	APR	Up to 7 pts: 1 pts for each sub-population served		
	18. Prioritizes households with the longest time homeless and most severe needs as prioritized through the CAS system	CAS system, application	3 pts: yes 0 pts: no		
				TOTAL	

*= system performance measurements

Total Available 100



BOSTON'S WAY HOME
HEALING THROUGH HOUSING

Boston Continuum of Care FY17 New Project Scoring Tool

Project Sponsor: _____

Project Name: _____

First Reviewer Name: _____

First Reviewer Score: _____

Second Reviewer Name: _____

Second Reviewer Score: _____

Consensus Score: _____

Criteria Topic	Scored Criteria	Criteria Source	Pass/Fail	Notes
Project Quality Threshold Criteria	Project will serve eligible populations. For PSH: 100% of households will be chronically homeless and/or DedicatedPLUS For RRH: 100% of households will be coming from streets or emergency shelters, or fleeing DV (category #4), or in a TH project that is being eliminated in FY17, in a joint TH-RRH project, or receiving services through a VA program and meet one of the above	Project application		
	Is the project cost-effective, with such costs not deviating substantially from the norm in that locale for the type of structure or kind of activity	Project application		
	Does the project applicant provide reasonable assurances that the project will meet the requirements: CAS/CES participation; Housing First/Low Barrier Housing; Documented and secured minimum match; applicant is active in CoC; application is complete and data is consistent; bed/unit utilization rate will be at or above 95%; acceptable organization audit/financial review, documented financial stability of appliance agency	Project application		
	If applicant is seeking to fund a new project with either PH Bonus Funds or through Reallocation, did they submit a project application in accordance with the publicly advertised Request for Proposals	Project application		

If project does not score "pass" in ALL of the above criteria- the project application does not meet minimum CoC and HUD threshold for funding and is not eligible for inclusion in the Boston CoC 2017 application to HUD.

Criteria Topic	Scored Criteria	Criteria Source	Points	Score
Agency Past Performance	1. The proposal demonstrates successful experience working with the eligible target population(s)	project application	5 pts: yes 0 pts: no	
	2. The proposal demonstrates successful experience working with HUD funded projects including: leasing units, administering rental assistance, providing supportive services, and utilizing HMIS, as applicable to the proposed project	project application	10 pts: yes 0 pts: no	
	3. The agency has past experience operating similar types of programs and services, working with the subpopulation, and achieving 80% participants maintain PH housing for at least 12 months or from exiting RRH or TH, program provides evidence participants achieve increased income	project application, agency CoC program portfolio	10 pts: yes 0 pts: no If agency does not have CoC funds award	
	4. Linkages and collaborations with other resources and providers are leveraged and discussed (evidenced by signed MOUs, contracts)	project application	2 pts: yes 0 pts: no	
	5. Agency has given back a project/funds/subsidies to serve homeless households to DND without a budget management plan, in the last 5 years	DND monitoring and portfolio	5 pts: no 0 pts: yes	
Program Design	6. The project will practice a Housing First/Low Barriers model	project application	10 pts: yes 0 pts: no	
	7. The proposal describes a management plan and reasonable plan for effective and timely start up of the proposed activities	project application	5 pts: yes 0 pts: no	
	7a. If RRH, PSH or Joint TH-RRH the proposal describes how the sponsor will manage housing search challenges and quick identification and lease up of hard units for clients. Proposal references existing relationships with property owners, managers, existing units leased by sponsor, PBVs, etc.	project application	5 pts: yes 0 pt: no	
	8. The proposed staffing level is adequate to support the project (i.e. for RRH, 1 FTE to max. 30 households; for CH 1 FTE for 15 - 20 households)	project application	2 pts: yes 0 pts: no	
	9. The proposal includes performance measurements related to housing stability: a) The proposal describes how participants will be assisted to obtain	project application	4 pts: yes 0 pts: no	

	and remain in permanent housing for at least 12 months (if PSH program) b) The proposal describes how participants will be assisted to obtain permanent housing upon exiting a RRH program (RRH program or Joint TH-RRH)			
	10. The proposal includes performance measurements related to how participants will be assisted to increase both their employment, access to mainstream resources and/or non-employment income and maximize their ability to live independently	project application	4 pts: yes 0 pts: no	
Subpopulations proposed to serve	11a. The proposal describes a viable plan for conducting outreach to identify and enroll chronically homeless/DedicatedPLUS program participants (for PSH proposals) 11b. The proposal describes a viable plan for conducting outreach to identify and enroll homeless households living in on the street or in emergency shelter (for RRH proposals)	project application	3 pts: yes 0 pts: no	
	12. Other sub-populations priorities: *Veterans * Chronically homeless *Families * Youth *DV	project application	1 pt for each sub-population	
Fiscal Planning and Agency Performance	13. The project shows a diverse mix of funding or primary reliance on CoC Program (supportive services, leasing, rental assistance etc.)	project application	10 pts: mix of funding 5 pts: reliance of CoC funds	
	14. The project demonstrates cost effectiveness; use industry standards for matrix= families \$4,000 per year, CH program 1 csmgr per 17 clients, RRH 1 csmgr per 40 - 50 clients per year	project application	3 pts: Within range 0 pts: Not in range	
	15. Funds requested are reasonable in relationship to stated goals and objectives (review if costs and direct assistance seem too high or too low to achieve proposed outcomes)	project application	4 pts: yes 0 pts: no	
	16. Sponsor/applicant provides match commitments totaling 25% of the HUD funding requested (minus	project application	3 pts: yes 0 pts: no	

	leasing dollars) and demonstrates effective use of the match resources			
	17. Project will participate in the CoC CAS system	project application	2 pts: yes 0 pts: no	
	18. Agency audit A-133 or supplement external audit has no major findings/"low risk"	project application, agency CoC program portfolio	2 pts: yes 0 pts: no	

CoC Needs/Gaps Analysis	19. The proposed project fills a need or gap in the existing homeless assistance system and is not duplicative of other mainstream resources	project application	3 pts: yes 0 pts: no	
	20. The proposed project has made a convincing rationale, backed by data and/or a CoC needs analysis, that the project will address identified system gaps, thereby furthering HUD and CoC goals of ending homelessness for the target population to be served	project application	3 pts: yes 0 pts: no	

The reviewer may assign partial points to each question if proposal semi/partially addressed question/scoring criteria. The maximum points total available is 100.



MA-500

CoC Rating and Review Procedure: Public Posting Evidence

Event Name: Permanent Supp. Hsg. Bonus & Reallocation for CoC
Event ID: BOSTN-EV00004596
Event Format/Type: Sell Event RFX
Event Round: 1
Event Version: 1
Event Start Date: 07/31/2017 9:00AM EDT
Event End Date: 08/15/2017 04:00 PM EDT

Event Description:
 Requesting proposals for new permanent housing programs, new rapid re-housing programs funded through HUD's Continuum of Care (CoC) Program or the reallocation of existing resources that wish to be included in a single, city-wide application on behalf of the Boston CoC.

Contact: Armstrong, Lorrie
Phone:
Email: lorrie.armstrong@boston.gov
Online Discussion:
Live Chat Help:

Payment Terms:
My Bids: Edit Bid
Edits to Submitted Bids: Allowed
Multiple Bids: Not Allowed

Line	Description	Unit	Requested Quantity	Status

ADVERTISEMENT

CITY OF BOSTON
DEPARTMENT OF NEIGHBORHOOD DEVELOPMENT (DND)

REQUEST FOR PROPOSALS FOR

Permanent Supportive Housing Bonus and Reallocation Opportunity for Continuum of Care Program

EVENT # 00004596

The City of Boston (“the City”), on behalf of the Boston Continuum of Care (Boston CoC), acting through its Director of the Department of Neighborhood Development (“DND”), at 26 Court Street, Boston, MA 02108, hereby invites proposals for new permanent supportive housing programs funded through HUD’s Continuum of Care (CoC) Program that wish to be included in a single, citywide application for Continuum of Care / McKinney-Vento funds to the U.S. Department of Housing and Urban Development (HUD). The new programs will be included in the application to HUD, which is due on September 28, 2017.

The City of Boston is requesting proposals for new permanent supportive housing programs, new rapid rehousing programs and will consider applications for HUD’s new component type, Joint TH and PH-RRH created through either the New Permanent Housing Bonus available through the U.S. Department of Housing and Urban Development’s 2017 Continuum of Care (CoC) Competition or the reallocation of existing CoC resources that wish to be included in a single, citywide application on behalf of the Boston CoC.

This application is for HUD’s Permanent Housing Bonus, a funding opportunity as defined in the Department of Housing and Urban Development Notice of Funding Availability (NOFA) for the Continuum of Care (CoC) Homeless Assistance Grant Programs made available on July 14, 2017. Awards made through the Permanent Housing Bonus must go towards the creation of new dedicated permanent supportive housing to serve the chronically homeless. The projects must serve chronically homeless and disabled individuals or families who are living on the streets, in places not meant for human habitation or in emergency shelter. Those residing in transitional housing are not considered homeless for the purposes of this opportunity. CoC’s may also create new permanent supportive housing projects that meet the requirements of DedicatedPLUS as described in Section III.A.3.d of the CoC 2017 NOFA.

The Permanent Housing Bonus also allows for the creation of rapid re-housing projects.

CoCs may create new rapid rehousing projects that will serve homeless individuals and families, including unaccompanied youth, who meet the following criteria:

- (a) residing in a place not meant for human habitation;
- (b) residing in an emergency shelter;
- (c) persons meeting the criteria of paragraph (4) of the definition of homeless, including persons fleeing or attempting to flee domestic violence situations;

- (d) residing in a transitional housing project that was eliminated in the FY 2017 CoC Program Competition;
- (e) residing in transitional housing funded by a Joint TH and PH-RRH component project (see Section III.A.3.h. of this NOFA); or
- (f) receiving services from a VA-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

The Permanent Housing Bonus also allows for the creation of Joint TH and PH-RRH projects to better serve individuals and families experiencing homelessness. These projects will provide low-barrier, temporary housing while individuals and families quickly move into permanent housing with a seamless program design. The joint TH and PH-RRH component combines two existing program components – TH and PH-RRH- into a single project to serve individuals and families experiencing homelessness. Joint TH and PH-RRH component projects that assist program participants must be able to provide both transitional housing assistance and rapid re-housing assistance to each program participant. CoCs may create new Joint TH and PH-RRH component projects as defined in Section III.A.3.h. of this NOFA to better serve homeless individuals and families, including individuals or families fleeing or attempting to flee domestic violence.

The maximum amount the CoC may request for the Permanent Housing Bonus projects is 6 percent of the CoC's Final Pro Rata Need (FPRN). Under this formula, it is estimated that the Boston CoC is eligible to apply for up to \$1,444,993. The following types of new projects will be considered for the Permanent Housing Bonus:

- a. Applicants may create new permanent supportive housing projects that will serve 100% chronically homeless families and individuals or
- b. CoC's may create new rapid rehousing projects as described above.
- c. CoC's may create new Joint TH and PH-RRH projects as described above.

The NOFA and this application also allow for the **reallocation** of existing CoC resources as follows:

Through the reallocation process Applicants may create the following type of new projects:
The following types of projects may be created using funds that the CoC has made available through reallocation:

- (1) CoCs may create new permanent supportive housing projects that meet the requirements of DedicatedPLUS as defined in Section III.A.3.d. of this NOFA or new permanent supportive housing projects where 100 percent of the beds are dedicated to chronic homelessness.
- (2) CoCs may create new rapid rehousing projects that will serve homeless individuals and families, including unaccompanied youth, who meet the following criteria:
 - (a) residing in a place not meant for human habitation;
 - (b) residing in an emergency shelter;
 - (c) persons meeting the criteria of paragraph (4) of the definition of homeless, including persons fleeing or attempting to flee domestic violence situations;
 - (d) residing in a transitional housing project that was eliminated in the FY 2017 CoC Program Competition;
 - (e) residing in transitional housing funded by a Joint TH and PH-RRH component project (see Section III.A.3.h. of this NOFA); or

(f) receiving services from a VA-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

(3) CoCs may create new Joint TH and PH-RRH component projects as defined in Section III.A.3.h. of this NOFA to better serve homeless individuals and families, including individuals or families fleeing or attempting to flee domestic violence.

This Request for Proposal includes a project application for the Continuum of Care Program.

The Request for Proposals ("RFP") package will be available beginning at 9:00 AM on July 31, 2017 from the City's purchasing website, Supplier Portal (www.cityofboston.gov/Procurement), the City's online process for purchasing, bidding, contracting, vendor registration and payment. You may also obtain the RFP package at the Department of Neighborhood Development ("DND") Bid Counter, 10th floor, 26 Court Street, Boston. A mandatory Applicants' Conference will be held at DND on Monday, August 7, 2017 at 10:30 A.M. in conference room 11A located on the 11th floor, 26 Court Street, Boston. It is our expectation that you read the RFP prior to the Applicants' conference so we can answer any questions you may have about the RFP.

All Applicants that plan to apply for inclusion in the City's 2017 Continuum of Care application under this Request for Proposals MUST submit a Letter of Intent. Letters of Intent are due on Friday, August 11, 2017 by 5:00 PM EST. Letters of Intent may be submitted via email or hand delivered to Katie Cahill-Holloway at katie.cahill-holloway@boston.gov, 8th Floor, 26 Court Street, Boston, MA 02108.

To access details for this specific Event, or to respond through electronic format, please visit the City of Boston Supplier Portal and access **Event # 00004596**.

Completed proposals must be submitted via the Supplier Portal or directly to the DND Bid Counter, 26 Court Street, 10th Floor, Boston, MA 02108 **before 4:00 PM on Tuesday, August 15, 2017. LATE PROPOSALS WILL NOT BE ACCEPTED.**

PLEASE NOTE: In order to participate in these online procurement activities Bidders must register with the Supplier Portal at www.cityofboston.gov/Procurement. First-Time Applicants, i.e., those who have never contracted with the City or, if so, not for many years, will be required to obtain login credentials, a process which is subject to administrative delays. DND recommends that First-Time Applicants submit a hardcopy proposal at the DND Bid Counter, yet still register with the Supplier Portal so as to be prepared for future RFPs.

DND Bid Counter hours of operation are Monday – Friday 9:00 AM to 4:00 PM. Please plan accordingly.

Sheila A. Dillon
Chief of Housing and Director



Mail



COMPOSE

Inbox (1,939)

Starred

Important

Sent Mail

Drafts (7)

Active

Archive 3 Years

Archive 7 Years

CoC 17 AAOs

Conversation Action S...

Enterprise Vault

Inbox_archive

Inbox/mckinney 10 S+C

Inbox/Saved Mail

Inbox/saved mail f

Migrated/Outbox

News Feed

quarantine

Quick Step Settings

Root Folder

More

From: Katie Cahill-Holloway [mailto:katie.cahill-holloway@boston.gov]

Sent: Monday, July 31, 2017 9:55 AM

To: Pooja Bhalia; Alex Browder; Alex Kontras; Alexandra Pastore; Alexia Layne-Lomon; Alexis Lindman; Allison Kiryua; Amanda Townsend; Amanuel Haile; Andrea Farina; Andrew Malloy; Andrew McCawley; Andrew Pond; Angela Marcolina; April Stevens; Ariene Snyder; Beth Grand; Bill Porcello; Bill Sprague; Brenda Cassidy; Brian Cormier; Brian Kindorf; Bruce L. Bird; Brunette Beaupin; Caitlin Burbidge; Carl Sciortino; Carla Richards; Carol Ann McAuliffe; Chen Epps; Chris Norris; Chris Womendez; Christopher Dollard; Connie Wynne; Corey Grier; Cronin, Zoe; Daniel Ayala; Dariene L Tritto; David Thomas; Dayna Gladstein; Deborah Collins-Gousby; Deborah Hughes; Debra Paul; drounam@vinfen.org; Edward Ahern; Eileen Merisola; Eileen O'Brien; Elisabeth Jackson; Elizabeth Maglio; Elizabeth Winston; Ellen Tan; Erin Flynn; Felicia Smith; Feranda Faria; FINEK; Gail Livingstone; Hank Layfield; Heather Ross; Jack Langley; Jacquelynne J. Bowman; James Greene; James May; Jamie Rihbany; Jayne Murphy; Jessyka Marquez; Jim Greene (jgreene@boh.org); Joanne McMahon; Joe Finn; Joe McPherson; John Hillis; John Samaan; Jon Murphy (Director of Service); Jonathan Scott (Executive Director); Karen LaFrazia; Karia Sordia Lozano; Kate Walsh; Katherine Hastings; Kaye Wild; Kelly Mulligan; Kevin Davis; Kevin Ward; Kim Davis; Kip Langello; Kristen Lascoe; Kristine Dimardo; Larry Elgart; Larry Gottlieb; Larry Seamans; LaTanya Wright; Laura Souders; Leo Adorno; Linda Garcia; Linda Lank; Linda Lown-Klein; Linda Smith; Linda Wood-Boyle; Lisa Kaplan; Liz Rogers; Lois Ferrarasso; Lori Cain; Louise Reilly; Lucy Stonis; Lyndia Downie; Maïherbe, Melanie; Maria Davis; Maria Torres; Marianne McLaughlin; Marisa Mcquaid; Mark Dagnall; Mark Hinderlie; Mary Thomas; Matthew Dowd; Maureen Skeehan; May Shields; Meghan Coughan; Mia Demarco; Michael Lara; Michelle Chandler; Mike Way; Mychia Minter Jordan; Myra Ackerman; Nancy Maftan; Nancy Owens-Hess; Nancy Paladino; Nancy Sullivan; Nicole Fitzgerald (COO); Pamela Andrade-Talbert; Pat Lucca; Patricia Sullivan; Paula DiMascio; Paula Saba; Peter Schindler; Polly Hanson, LICSW; Ralph Hughes; Raquel Rosenblatt; Renee Yourik; Richard Matos-Haile; Richard Ring; Rita Châpdelaine; Robyn Frost; Rox Lindbert; Roy Morrison; Ruth Harel Garvey; Samuelle Margolis; Sarah Decelles; Sarah McBride; Sarah Porter; Sarah Quinn; Sean Harding; Sharon Reilly; Sister Margaret Leonard; Stephanie Brown; Steve Wilkins; Sue Buoncuore; Sue Morong; Sue White; Susan Chorley; Susan Keliher; Susan Nohi; Susan Rabinowitz; Suzanne Kenney; Tabitha Gaston; Tammy Simmons-Dixon; Tara Rousseau; Theresa Brewer; Theresa Okonko; Thuy Dung Nguyen; Timothy J. Barrett; Tom Lorello; Tom Morris; Toni Jones; Valerie Frias; Valira Jackson; Venessa Rosemond; Verna Augustine; Victoria Jalal; Virginia Griffin; Yahaira Bautista

Cc: Laia Bernstein; Laura Rivera-Davis; Adelina Correia; Caroline McCabe; Courtney Trudell; Jennifer Flynn; Kadra Adderly; Gina Schaak

Subject: Boston CoC: New Permanent Housing Bonus and Reallocation RFP

Good morning Boston CoC.

The Request for Proposals for those seeking to apply for new permanent housing bonus or reallocation projects under HUD's 2017 Continuum of Care competition has been posted to the City of Boston's procurement supplier portal. You may also obtain a copy by visiting DND's Bid Counter, 26 Court Street, 10th floor. Please see Request for Proposals for application requirements, including details on the mandatory Applicants' Conference scheduled for August 7, 2017 at 10:30 AM. You may access the Supplier Portal by following the link embedded below:

<https://procurement.cityofboston.gov/ps/prps/SUPPLIER/ERP/h?tab=DEFAULT>

Katie Cahill-Holloway
Acting Deputy Director for Supportive Housing
City of Boston | Massachusetts
Department of Neighborhood Development
Supportive Housing Division
26 Court Street, 8th Floor
Boston, MA 02108
Tel: 617-635-0263
Fax: 617-635-0383
katie.cahill-holloway@boston.gov
<https://www.boston.gov/housing/continuum-care-program>



**BOSTON CONTINUUM OF CARE
GENERAL MEMBERSHIP MEETING AGENDA
August 9, 2017, 2017 2:00 – 3:30 PM
Winter Chambers, 26 Court St., 1st Floor**

Agenda Items

1. Welcome

2. CoC 2017 Competition Gina & Katie
 - NOFA Overview: TAC Summary

3. Review: Katie & Jen
 - New Permanent Housing Bonus and Reallocation RFP
 - Reallocation Policy
 - Tiering and Project Scoring

4. Project Renewals: Process for 2017 Adelina

5. Summary Timeline for Remainder of Competition
 - New PH and Reallocation Proposals Due: 8/15/17
 - Renewal Project Applications Due: 8/18/17
 - CoC to communicate application status 9/13/17
 - CoC to post CoC application & exhibits 9/26/17
 - Final CoC application due to HUD 9/28/17

Check out our CoC webpage for updates during the competition at
<https://www.boston.gov/housing/continuum-care-program>

ADVERTISEMENT

**CITY OF BOSTON
DEPARTMENT OF NEIGHBORHOOD DEVELOPMENT (DND)**

REQUEST FOR PROPOSALS FOR

Permanent Supportive Housing Bonus and Reallocation Opportunity for Continuum of Care Program

EVENT # 00004596

The City of Boston (“the City”), on behalf of the Boston Continuum of Care (Boston CoC), acting through its Director of the Department of Neighborhood Development (“DND”), at 26 Court Street, Boston, MA 02108, hereby invites proposals for new permanent supportive housing programs funded through HUD’s Continuum of Care (CoC) Program that wish to be included in a single, citywide application for Continuum of Care / McKinney-Vento funds to the U.S. Department of Housing and Urban Development (HUD). The new programs will be included in the application to HUD, which is due on September 28, 2017.

The City of Boston is requesting proposals for new permanent supportive housing programs, new rapid rehousing programs and will consider applications for HUD’s new component type, Joint TH and PH-RRH created through either the New Permanent Housing Bonus available through the U.S. Department of Housing and Urban Development’s 2017 Continuum of Care (CoC) Competition or the reallocation of existing CoC resources that wish to be included in a single, citywide application on behalf of the Boston CoC.

This application is for HUD’s Permanent Housing Bonus, a funding opportunity as defined in the Department of Housing and Urban Development Notice of Funding Availability (NOFA) for the Continuum of Care (CoC) Homeless Assistance Grant Programs made available on July 14, 2017. Awards made through the Permanent Housing Bonus must go towards the creation of new dedicated permanent supportive housing to serve the chronically homeless. The projects must serve chronically homeless and disabled individuals or families who are living on the streets, in places not meant for human habitation or in emergency shelter. Those residing in transitional housing are not considered homeless for the purposes of this opportunity. CoC’s may also create new permanent supportive housing projects that meet the requirements of DedicatedPLUS as described in Section III.A.3.d of the CoC 2017 NOFA.

The Permanent Housing Bonus also allows for the creation of rapid re-housing projects.

CoCs may create new rapid rehousing projects that will serve homeless individuals and families, including unaccompanied youth, who meet the following criteria:

- (a) residing in a place not meant for human habitation;
- (b) residing in an emergency shelter;
- (c) persons meeting the criteria of paragraph (4) of the definition of homeless, including persons fleeing or attempting to flee domestic violence situations;



MA-500

CoCs Process for Reallocating

Boston Continuum of Care 2017 Competition Reallocation Policy

Based on the CoC 2017 Competition HUD NOFA, the Boston CoC is seeking funds from reallocated projects to:

- Create new Permanent Supportive Housing (PSH) Projects for chronically homeless (CH) Individuals and families
- Create new Rapid Re-Housing (RRH) projects for homeless individuals and families, including unaccompanied youth, coming from the street or emergency shelter
- Create new Joint TH and PH-RRH projects to better serve homeless individuals and families, including those fleeing or attempting to flee domestic violence

Process to Reallocate Existing CoC Resources:

The City of Boston will issue a publicly advertised Request for Proposals to solicit project applications from existing CoC providers that wish to reallocate funds to create one of the project types described above and in HUD's Notice of Funding Availability for FY '17 CoC Competition.

- Applications for new PSH and RRH projects will be rated and ranked according to the Boston CoC 2017 Competition Review, Rating and Ranking and Selection Criteria and Process

Total Annual Renewal Demand

(ARD) \$24,083,209

Tier 1 = 94% of the ARD or \$22,638,216

Tier 2 = 6% of the ARD or \$1,444,993

HUD Tier 1 and Tier 2 Selection Process

Tier 1 - HUD will select projects that are ranked in Tier 1 based on CoC score, beginning with the highest scoring to the lowest scoring CoC (Tier 1 projects are likely to be funded by HUD).

Tier 2- HUD will select projects that are prioritized in Tier 2. All projects in Tier 2 will be scored on a 100 point scale based on the following criteria:

- up to 50 points for CoC score (CoC maximum score of 200 pts= 50 pts),
- up to 40 points for CoC ranking of the project,
- up to 10 points for commitment to operating a housing first/low barrier program model

Boston CoC FY17 Competition Project Review, Rating, and Selection Criteria

The CoC uses several methods to monitor the project performance of program recipients, including desk review monitoring, on-site DND monitoring, Annual Program Report (APR) review, HMIS and System Performance data review.

Sponsors are required to invoice monthly, which is reviewed to ensure eligibility of activities, expenditure rates and administrative capacity.

Annual Performance Reports (APR) are also reviewed for project utilization rates, success in accessing mainstream benefits, permanent housing destination data and recapture rates of unobligated funds.

HMIS and System Performance Measurement (SPM) data is analyzed to ensure project and agency participation and data quality. The majority of the monitoring, scoring and ranking criteria are based on this data. The criteria include, but are not limited to, the following data:

- Destination of exits from RRH and PSH program
- Length of stay/retention of PH in PSH and RRH programs
- Returns to homelessness
- Increased earned income through employment
- Increased overall income (Include mainstream benefits)
- HMIS project data quality
- Level of high need populations served

CoC staff maintains an on-site monitoring schedule, which includes review of client records, in addition to feedback on performance concerns that may have presented through APRs, invoicing or other means. The CoC staff triages visits based on risk, new providers, and/or large programs may be more likely to be selected for on-sight monitoring by staff. The CoC also offers on-demand technical assistance to ensure providers have adequate systems and information necessary to effectively manage the programs.

Tier 1 Projects

Projects will be placed in Tier 1 in order of priority:

Tier 1 - Priority One

HMIS dedicated renewal projects that are funded to: increase CoC staff capacity, fund the projected increased cost of HMIS software, secure additional software licenses for state and federal partners (DMH and the VA), and customizations in order to interface with the Coordinated Access system. The renewal of the Coordinated Access SSO project, which supports the funding of CAS, is also included in this priority.

Tier 1 – Priority Two

Renewal PSH Projects that directly support leasing and rental assistance costs and meet HUD threshold criteria, and are then scored by the CoC renewal scoring tool based heavily on system/project performance data.

Tier 1 – Priority Three

Renewal PSH projects that directly support services for chronic in housing and meet HUD threshold criteria are then scored by the CoC renewal scoring tool based heavily on system/project performance data.

Tier 1 – Priority Four

Renewal PH-RRH projects that directly support homeless individuals, families and youth with rapid rehousing assistance and meet HUD threshold criteria, and are then scored by the CoC renewal scoring tool based heavily on system/project performance data.

Tier 2 Projects

Tier 2- Priority One: Renewal PH-RRH projects as described above. Given the Tier 1 limit, a portion of renewal PH-RRH projects will fall into Tier 2 based on rank from the scoring tool. It is anticipated that one of these projects will be the CoC's "straddle project" where a portion of the project funding falls within Tier 1 and the balance is at the top of Tier 2.

Tier 2- Priority Two: (New Reallocation Projects) these projects will be ranked with the new project scoring tool and placed below renewing projects that fall within Tier 2.

Tier 2 – Priority Three: (New Permanent Housing Bonus Projects) these projects will be ranked with the new project scoring tool and placed below new reallocation projects.

Initially projects (new and renewal) will be reviewed to ensure they meet HUD threshold requirements. All projects will be ranked by score using the CoC scoring tools (new and renewal). Projects that are renewing for the first time or have been operating for less than a year as of September 1, 2017 will be evaluated using the new project scoring tool. The scoring tools weight heavily on system performance measurements data outcomes. The score will be made up of the follow criteria:

1. Consistency with HUD objectives regarding past project performance as it relates to HUD and CoC system performance measurements- include; exits to PH, length of stay in PSH, increased income employment and mainstream benefits. *(Scoring source- APRs, SPM, and HMIS)*
2. Project level HMIS data quality- include; percentage of bed coverage in HMIS, percent of null and unknown data fields. *(Scoring source- HMIS)*
3. Financial Management of project-include; agency audit findings, project invoicing, and project cost effectiveness and contribution of non-CoC funded resources. *(Scoring source from APR and monitoring data)*
4. Project utilization rates- Include; rates of returned funds, utilization at PIT count and average throughout the year, and target population. *(Scoring source- HMIS, AHAR, PIT report, SPM, and HIC report)*
5. Alignment with CoC, HUD, and USICH policy priorities-include; serving sub-populations most at risk to or experiencing long-term homelessness, project that operate a housing first/low barriers model, projects serving populations with serve needs and who have high barriers to housing, projects participating in the coordinated access system, and projects who serve households who have been homeless for longest length of time. *(Scoring source- APRs, HMIS, SPM, and Project Applications)*

MEETINGS INFORMATION

AUGUST 16, 2017

A Leadership Council meeting was held on August 16, View the agenda and related materials and the meeting minutes.

AUGUST 9, 2017

A general membership meeting was held on August 9, 2017. View the August 9 meeting materials and the meeting minutes.

JULY 26, 2017

A Leadership Council meeting was held on July 26, 2017. View the July 26 agenda and materials and the July 26 minutes.



JULY 29, 2016

The Continuum of Care Leadership Council held a meeting on July 29. Download the July 29 meeting minutes.

A Continuum of Care Board meeting was also held on July 29 at 3 p.m. in the Bill Buckley room of Neighborhood Development. The Board voted to approve the Continuum of Care Reallocation Policy and the Continuum of Care Project review, rating, and Selection Criteria. View the MA-500 Boston CoC Board Vote and Minutes.

JULY 18, 2016

BOSTON CONTINUUM OF CARE
LEADERSHIP COUNCIL MEETING AGENDA
July 26, 2017, 2017 3:00- 4:30PM
Bill Buckley Conference Room, 26 Court St., 11th Floor

Agenda Items

1. Welcome & Introductions

2. CoC 2017 Competition Katie & Gina
 - CoC Meeting – August 9, 2017, 2 PM
 - Leadership Council Meeting for CoC Competition: monthly
 - NOFA Overview: TAC Summary

3. Review: Katie
 - Proposed Reallocation Policy
 - Tiering and Project Scoring
 - New Permanent Housing Bonus and Reallocation RFP

4. Boston's Way Home Updates Laila
 - Chronically Homeless
 - Homeless Veterans

5. Rapid Rehousing Written Standards Katie
 - Process Overview
 - Draft Written Standards

6. Next Meeting: August 16th @ 3 PM Jen & Katie
 - Approve Updated CoC Governance Charter
 - Update on New Project Proposals
 - Narrative Assistance
 - Date for September meeting: 9/6 or 9/13 in AM

Boston Continuum of Care 2017 Competition Reallocation Policy

Based on the CoC 2017 Competition HUD NOFA, the Boston CoC is seeking funds from reallocated projects to:

- Create new Permanent Supportive Housing (PSH) Projects for chronically homeless (CH) individuals and families
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5. Alignment with CoC, HUD, and USICH policy priorities-include; serving sub-populations most at risk to or experiencing long-term homelessness, project that operate a housing first/low barriers model, projects serving populations with serve needs and who have high barriers to housing, projects participating in the coordinated access system, and projects who serve households who have been homeless for longest length of time. *(Scoring source- APRs, HMIS, SPM, and Project Applications)*

HMIS Guidance for the Desk Review Monitoring Tool for the CoC Program

Instructions: This Guide has been marked up in order to help you interpret the Project Data Quality Report (will be renamed eventually) that has been generated from the Boston CoC HMIS Data Warehouse. This report was designed specifically to answer the data and outcome related questions for this version of the CoC Monitoring Tool. Depending on the program's structure, one or more HMIS programs may be grouped together in order to generate this report for the evaluation of the full grant and program. The guide will also make an attempt to direct you to the actual data element used in this calculation where applicable.

HMIS review conducted by (SH Development Officer and HMIS PM):	Direct Entry by Development Officer
Date HMIS review completed:	Report Summary: Completed On Auto Generated based on user submission in warehouse report
Agency Name:	Title of Report & Result of Measure (Agency Name) Pulled from Site Name in HMIS
Subrecipient Name ¹ (if different than agency)	Result of Measure - Partner Agencies will be listed here (Agency Name) Pulled from the Site Name in HMIS
Project Name:	Title of Report & Result of Measure (Project Name) – Partner Agency programs will be listed here Pulled from the Program Name in HMIS
Operating Year that was Monitored (corresponds to APR year used)	{START DATE} to {END DATE} Result of Measure (Operating Year (Funder Dates)) Pulled from Grant Start/End Date in HMIS Project Descriptor Data Elements
Funding Year:	Direct Entry by Development Officer Maybe inferred from Operating Year if present
Grant Identification #	Result of Measure (Grant ID#) Pulled from Grant ID# in HMIS Project Descriptor Data Elements
CoC Program Component:	Result of Measure (CoC Program Component Type) Pulled from Grant ID# in HMIS Project Descriptor Data Elements (grouped projects will have more

¹ If the onsite visit is different the actual subrecipient then list the subrecipient here- e.g. MBHP is the subrecipient for all RA grants, you may be conducting an onsite visit at one of their project sponsors

Is this a DV project?	than one type, Development Officers should use the main type Direct Entry by Development Officer DV programs are Federally Prohibited from entering HMIS data and must use a comparable database to and be able to report aggregate data directly to the Development Officer
-----------------------	--

HMIS		Notes
1. Is the Agency entering the required data/descriptor touch-points into HMIS for this project?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Result of Measure (Entering required descriptor data) Report is looking for completion of these fields above, not accuracy, Development Officers should use best judgement in completing this question based on the above supplied data
2. Is the Agency a DV provider and entering data into a comparable database for this project?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Direct Entry by Development Officer DV programs are Federally Prohibited from entering HMIS data and must use a comparable database to and be able to report aggregate data directly to the Development Officer. If a DV program cannot produce a system generated APR this answer is NO.
3. What is the percent of bed coverage in HMIS/comparable database for this project?		Result of Measure (Bed Coverage %) Agency Supplied Beds Captured in HMIS per the Project Descriptor Inventory Data Point / Agency Supplied Total Beds for the Program per the Project Descriptor Inventory Data Point * 100
4. What is the percent of null or missing data values?		Development Officers should indicate the highest % element per the Results of Measures of Missing Names->Destination and the Element Name Total Clients Missing Element / Clients Included (Measure 1) *100
5. What is the percent of refused or unknown values in HMIS?		Development Officers should indicate the highest % element per the Results of Measures of Refused Names->Destination and the Element Name Total Clients Refused Element / Clients Included (Measure 1) *100
6. Project meets data quality benchmarks established in the HMIS Data Quality	Yes <input type="checkbox"/> No <input type="checkbox"/>	Result of DQ Benchmark Measure Any Program with any measure in # 4 or #5 above with 10% or

Plan	Notes	higher is automatically NO
PERFORMANCE MEASUREMENTS 7. PSH Program: Participants remained in PH for over 12 months	Above 80% <input type="checkbox"/> 79%-50% <input type="checkbox"/> 49%-25% <input type="checkbox"/> Less than 80% <input type="checkbox"/>	Result of Measure Clients with Enrollments 12 months or longer (Leavers Length of Stay (Datedif of Entry Date-Exit Date) # > 12 months) + (Stayers Length of Stay (Datedif of Entry-End Date of report) #>12 months) # / Client Included (Measure 1) *100
8. RRH Program: Participants exited RRH to PH	Above 80% <input type="checkbox"/> 79%-50% <input type="checkbox"/> 49%-25% <input type="checkbox"/> Less than 80% <input type="checkbox"/>	Results of Measure Leavers who exited to PH Leavers who exit to PH Types / ALL Leavers *100 # Type: PERMANENT 25 Long-term care facility or nursing home 26 Moved from one HOPWA funded project to HOPWA PH 11 Owned by client, no ongoing housing subsidy 21 Owned by client, with ongoing housing subsidy 3 Permanent housing for formerly homeless persons 10 Rental by client, no ongoing housing subsidy 28 Rental by client, with GPD TIP housing subsidy 20 Rental by client, with other ongoing housing subsidy 19 Rental by client, with VASH housing subsidy 22 Staying or living with family, permanent tenure 23 Staying or living with friends, permanent tenure # Type: OTHER 24 Deceased
9. Percentage of program participants that gained/increased earned income after program entry through employment	Above 60% <input type="checkbox"/> 54-60% <input type="checkbox"/> Less than 54% <input type="checkbox"/>	Results of Measure % of Clients who increased Earned Income (Adults) {# All Clients with Earned Income at Most Recent Assessment (Exit or Annual) - # All Clients with Earned Income at Entry}/All Clients *100
10. Percentage of program participants that obtained non-cash mainstream benefits	Above 75% <input type="checkbox"/> 74-55% <input type="checkbox"/> 54-25% <input type="checkbox"/> Less than 24% <input type="checkbox"/>	Results of Measure % of Clients who increased Non-Cash (Adults) {# All Clients with 1+ Sources at Most Recent Assessment (Exit or Annual) - # All Clients with 1+ Sources at Entry}/All Clients

<p>11. Percentage of program participants that increased overall income</p>	<p>Above 75% <input type="checkbox"/> 74-55% <input type="checkbox"/> 54-25% <input type="checkbox"/> Less than 24% <input type="checkbox"/></p>	<p>*100 Results of Measure % of Clients who increased Total Income (Adults) {# All Clients Total Income Amount at Most Recent Assessment (Exit or Annual) – # All Clients Total Income Amount at Entry} = Those with a \$ increase / All Clients *100 This was not included on the original guide that Jen received. We will need to add this to Elliot's Queue</p>
<p>12. Length of time persons remain homeless (SPM Measure 1)</p>	<p>Was there a reduction in the avg. and median LOT for persons who remain homeless at the program</p>	<p>Notes</p>
<p>APR and PROJECT APPLICATION DATA</p>		
<p>13. Project capacity for the operating year?</p>		<p>Results from Bed Coverage Measure Agency Supplied Capacity (Bed Count) from the HMIS Inventory section of the Project Descriptor Data Elements</p>
<p>14. How many households were served over the course of the year?</p>		<p>Results from Clients Included All clients with an open enrollment in the report time period. Currently only calculating persons, need to add "family" function</p>
<p>15. What percentage of capacity is the project at for the operating year?</p>	<p>Above 85% <input type="checkbox"/> 84-75% <input type="checkbox"/> Less than 75% <input type="checkbox"/></p>	<p>Still needs refining but will be "Percentage of beds in use, Average"</p>
<p>16. HUD funded contract amount for the projects operating year (not all BLI apply to all projects):</p>	<p>Services: Operations: Rental Assistance: Leasing: Admin:</p>	
<p>17. HUD funded actual invoice/billing (not all BLI apply to all projects):</p>	<p>Services: Operations: Rental Assistance: Leasing: Admin:</p>	

18. Percentage of HUD funds remaining at the end of the operation year?		
19. Required match based on project budget:		
20. Match reported at end of project operating year:		
21. Was HUD match requirement met (25% of total HUD funds minus leasing dollars)		
22. Program has low-threshold eligibility criteria and ensures it is not screening out for CORI issues (only screens for CORI for CM informational purposes)	(have project complete attachment A regarding project entry denials)	
23. Services emphasis engagement and problem solving over punitive actions that lead to terminations	(have projects complete attachment B regarding terminations)	

Attachment A- Supplement to question #22

Use this chart to collect the last 5 program entry denials.

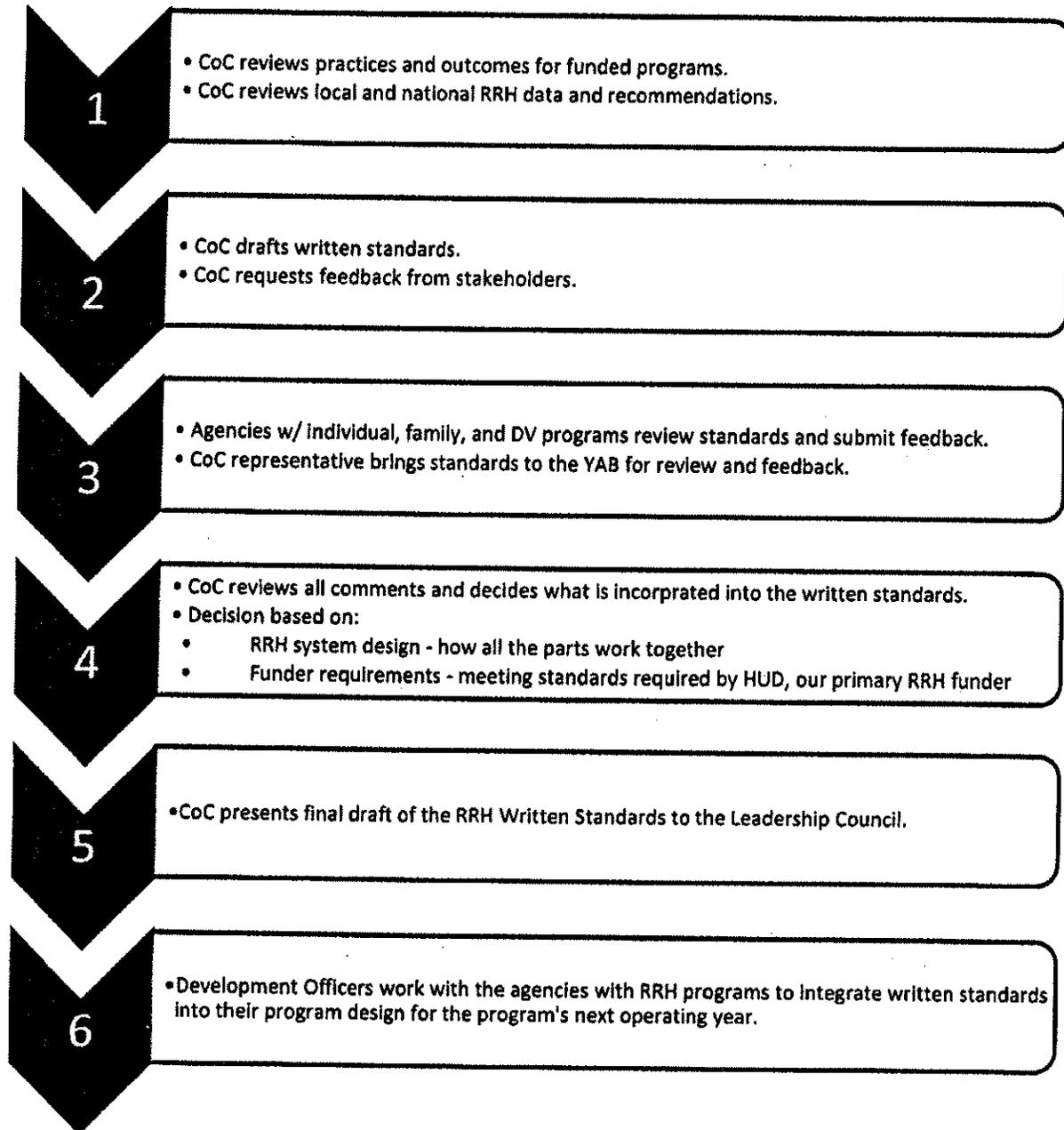
Applicant number (#1-5 do not use actual client names)	Reason for program denial, if not eligible please list eligibility criteria not met	Was there an appeal by the client, did staff work to mitigate the reason for denial to project

Attachment B- Supplement to question #23

Use this chart to collect the last 5 program terminations.

Applicant number (#1-5 do not use actual client names)	Reason for program termination	Was there an appeal by the client, if so what steps were taken?

RRH Written Standards Process



Who gave feedback on the proposed standards?

- FamilyAid Boston
- RRH Working Group
- Casa Myrna Vasquez
- MHSa
- Youth Advisory Board
- Homestart
- Project Hope
- Bridge Over Troubled Waters
- Victory Programs

Boston Continuum of Care Written Standards

Continuum of Care (CoC) and City-funded Rapid Re-Housing

Vision Statement: Boston CoC's Rapid Re-Housing

The Boston CoC's Rapid Re-Housing programs are poised to end homelessness by increasing placements to permanent housing and narrowing the pathway to chronic homelessness. The success of our Rapid Re-Housing efforts will be measured by the system goals of:

- A decrease in length of stay in Boston shelters (or outside), and
- A reduction in the annual Point In Time (PIT) Count of literally homeless households in Boston.

Policies and Procedures for Evaluating Individuals' and families' eligibility for assistance

Eligible Participants: Boston residents who fit the following categories of the HUD HEARTH Homeless Definition:

- HUD Category 1, Literally Homeless definition, as follows:

Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) Has a primary nighttime residence that is a public or private place not meant for human habitation; (ii) Is living in a 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 and local government programs); or (iii) Is exiting an institution where (s)he has 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. Rapid Re-Housing programs *funded by the CoC program cannot serve those in transitional housing due to restrictions set forth by HUD in the NOFA. City-funded RRH may serve those in transitional housing.*

- HUD Category 4, Fleeing or Attempting to Flee Domestic Violence, as follows:

Any individual or family who: is 1.) fleeing, or is attempting to flee, domestic violence; 2.) has no other residence, and 3.) Lacks the resources or support networks to obtain other permanent housing.

Rapid Re-Housing programs must also adhere to any eligibility criteria that was defined in the Notice of Funding Availability (NOFA) or Request for Proposals (RFP) the program was funded under.

The Boston CoC's governing body retains the right to vote in additional eligibility criteria on an as-needed basis.

Determining & prioritizing which eligible households will receive rapid re-housing assistance

Uniform Assessment Tool: The Boston CoC is currently exploring possible uniform assessment tools for Rapid Re-Housing programs to use to assess eligibility and prioritization for the resource. Use of a uniform assessment tool will be reflected in future drafts of these written standards.

Prioritization of Households for RRH Assistance: The following populations must be prioritized for Rapid Re-Housing assistance:

- Literally homeless households with a current episode of literal homelessness in Boston AND
 - Have had 30-179 Boston bed-nights (or outside nights) in the last year OR
 - Have had 180-365 Boston bed-nights (or outside nights) in the last three years

Households fleeing or attempting to flee Domestic Violence with proof of a Boston address

Additional Recommendations for Prioritization: The Boston CoC's vision is to target Rapid Re-Housing to those who are least likely to resolve their own homelessness and to prevent the pathway to chronic homelessness. To accomplish that, these written standards encourage providers to remove screening criteria related to perceived barriers such as:

- Minimum income requirements
- Sobriety requirements
- Criminal history.

Additionally, providers are encouraged to prioritize admissions for those who have a disability, per the HUD definition, in an effort to prevent chronic homelessness.

Evaluating Eligibility

To evaluate eligibility, programs must obtain proof of eligibility (Category 1 or 4 of the homeless definition), and proof of prioritized status (# of Boston bed nights) for those in category 1 (literal homelessness). Please note that households who meet the category 4 definition of homelessness (fleeing domestic violence) must document that they meet category 4 eligibility and have proof of a Boston address, but do not need to document the number of bed nights in HMIS. . Below are the instructions for evaluating eligibility and prioritized status for both Category 1 and Category 4 participants.

- Category 1, Literally Homeless: Participants must have documentation of either-
 - 30-179 bed nights sleeping outside in Boston or in a Boston shelter within the last year, OR
 - 180-365 bed nights sleeping outside in Boston or in a Boston shelter within the last three years
 - DND's preferred Order of Documentation is:
 1. HMIS record of the # of Boston bed/outside nights specified above
 2. Third-party written documentation
 3. Oral verification to the intake worker (written by the intake worker)
 4. Intake worker written observation of one's homelessness
 5. Self certification from the participant- there is a 25% cap per project per program year for self-certifications
 - If you are using documentation methods #2-5 above, programs must ensure documentation contains:
 1. The dates of the Boston bed/outside nights being verified
 2. Explanations for why staff had to use a lesser preferred method of documentation

- Category 4, Fleeing or Attempting to Flee Domestic Violence- Participants must have documentation of-
 - An oral statement by the participant that states they are fleeing DV; they have no subsequent residence; and they lack resources to obtain other housing- this statement must be documented through an intake worker or self-certification
 - Non-Victim Service Providers must additionally verify that the participant is fleeing DV if the participant's safety would not be jeopardized using HUD's preferred order of documentation:
 1. Third-party written documentation
 2. Oral verification to the intake worker (written by the intake worker)
 3. Intake worker written observation of one's homelessness
 4. Self certification from the participant (the 25% cap on self-certifications does not apply to Category 4 participants)
 - Category 4 participants must also have documentation in the file of proof of a Boston address

RRH Co-Enrollments: The Boston CoC is currently considering guidelines around co-enrolling participants in multiple Rapid Re-Housing programs. These guidelines may be reflected in future drafts of these written standards.

Standards for determining what percentage or amount of rent each RRH program participant must pay

The Boston CoC endorses the use of a progressive engagement approach as programs determine the percentage/amount of rent each RRH program participant must pay while enrolled. Participants are required to pay a minimum of 30% of their monthly gross income towards rent, when receiving ongoing rental assistance through a rapid re-housing program. Please note that ongoing rental assistance does not include upfront moving costs such as first month's rent, last month's rent, security deposit and moving assistance. Using a progressive engagement approach, programs are expected to provide the least amount of assistance possible during any given month to stabilize the housing situation; this may mean participants are paying a percentage higher than 30% of their income towards rent from the beginning of their program enrollment. Some of the key principles of progressive engagement are that:

- As much as possible, the participant will cover most or all of the full rent from the start of the tenancy.
- Participants are assessed each month to increase or decrease assistance, based on housing stability.
- The least amount of assistance possible is used to stabilize a housing situation.

The Boston CoC recognizes there may be rare instances where a participant's housing stability is jeopardized by paying 30% of monthly gross income towards rent. In these instances, a program may allow a participant to pay less than 30% of monthly gross income towards rent for the first 6 months of program enrollment. Programs are required to provide an explanation and/or documentation of why the participant's rent is calculated at less than 30% of gross income.

Standards re: length of time of rental assistance and services

Maximum # of Months- RRH Services and Financial Assistance: Rapid Re-housing programs have flexibility on how long participants may receive services and/or financial assistance from Rapid Re-Housing programs to promote housing stability. CoC-funded programs have a cap on financial assistance of a maximum of 24 months and a cap on services of 6 months after rental assistance stops; for example, if someone received the full 24 months of rental assistance, s/he could receive 6 additional months of supportive services only, resulting in 30 months of services. The City-funded programs do not have a cap.

Maximum # of times Participants May Re-Enroll into RRH: There is no defined cap on how many times a participant may re-enroll into rapid re-housing programs. However, if a participant does lose housing that was obtained through a rapid re-housing program and becomes literally homeless again, programs are required to conduct an assessment and put forth an effort to connect the participant with other appropriate housing interventions. Appropriate housing interventions may include providing rapid re-housing for a longer length of time paired with higher intensity supports, bridging to a permanent housing placement, or pursuing mainstream housing resources.

Re-Evaluation of Services and Rental Assistance

All Rapid Re-Housing programs are required to re-evaluate participants' need for Rapid Re-Housing assistance on an annual basis. The assessment must include the following:

- An evaluation that the participant lacks sufficient resources and support networks necessary to retain housing without Rapid Re-Housing; in other words, the participant would be homeless, "but for" Rapid Re-Housing assistance.
- An evaluation of the participant's service needs, with a plan to adjust any services accordingly.

Documentation of the annual evaluation must be present in participant files.

Standards for Providing RRH Supportive Services/Case Management

The following are the minimum expectations for providing supportive services to Rapid Re-Housing participants:

- *Meeting Frequency:* A minimum of one meeting per month is required for as long as a participant is receiving financial assistance or rapid re-housing supportive services. Please note that services may be provided for a maximum of 6 months after financial assistance ends to transition participants off the program.
- *Meeting Type/Format:* For those Rapid Re-Housing participants who have been receiving services or financial assistance for 6 months or more, programs are required to conduct a quarterly home visit beginning at month #6 to evaluate housing stability and provide support to participants.

Additionally, programs are encouraged to use the progressive engagement approach of decreasing or increasing the intensity of services, based on participants' housing stability.

BOSTON CONTINUUM OF CARE
LEADERSHIP COUNCIL MEETING MINUTES
July 26, 2017, 2017 3:00- 4:30PM
Bill Buckley Conference Room, 26 Court St., 11th Floor

Agenda Items

1. Welcome & Introductions

Sign In Sheet of attendees attached

2. CoC 2017 Competition

Katie & Gina

- CoC Meeting – August 9, 2017, 2 PM
- Leadership Council Meeting for CoC Competition: monthly
- NOFA Overview: TAC Summary

Katie Cahill-Holloway, Acting Deputy Director of Supportive Housing and Gina Schaak, Consultant, reviewed the highlights of this year's CoC competition. The NOFA was released on 7/14/17 and is due 9/28/17, 76 calendar days. Within the NOFA timeframe, a number of HUD transparency and internal deadline requirements must be met. These include the dates for when applications must be received by the Collaborative Application, dates for which projects must be notified of their inclusion in the CoC Application and the requirements for public posting of the tools used, documentation through meeting minutes of the decisions made, and making the full application available publicly.

As in past years, tiering is again a requirement. Boston's Annual Renewal Demand(ARD) is ~\$24m, Tier 2 must be 6% of the ARD, or for Boston, ~\$1.44m. As in past years, Tier 2 projects are at a greater risk of not being funded and relies heavily on the strength of the CoC Application. HUD will review and score tier 2 projects for threshold requirements and to assign an actual score out of 100. Score is: 50 based on CoC Score(proportionally), 40 based on the actual placement of the project within the Tier based on a HUD formula, 10 for adherence to Housing First/Low Barrier principles.

There were more changes than originally thought there would be but they are not very surprising. There is a shift in the weighting of certain sections, in particular, Data and System performance Measures are now the largest weighted sections. More general, overall CoC questions have been removed. There are also quite a few "technical changes" that are very much in the weeds but they are around eligibility. In particular a new option called "Dedicated PLUS". Dedicated PLUS allows for projects/beds that were previously dedicated to only Chronic to now serve clients that would have been chronic but for a TH, RRH, etc. enrollment.

PH Bonus funds are being made available again in the amount of 6% ARD. Bonus projects may be PSH, RRH or a new Joint TH/RRH program. This new program type is "bridge like" housing and intended to be for those who are

engaged in active housing search in order to move them out of emergency shelter more quickly. Reallocation is also available again this year, in addition to the above mentioned project types allowable, reallocation funds may also be used for new/expanded HMIS or SSO projects for Coordinated Entry. Finally, Planning funds are available at 3% of the ARD and are not included as part of the Tiering calculations.

3. Review:

Katie

- Proposed Reallocation Policy
- Tiering and Project Scoring
- New Permanent Housing Bonus and Reallocation RFP

Because of Boston's emphasis on reallocation to Permanent Housing projects over the past few years, there is only 1 Transitional Housing project remaining in the portfolio and the only SSO projects are the CoC HMIS and CAS grants. The TH project will be reallocated and any further reallocation will be voluntary. A Publicly advertised RFP for the New PH Bonus and Reallocation funds will be available as of Monday, July 31st. The CoC Prioritization Priority is as follows: 1-CoC SSO grants, 2-PH that directly supports tenancies through rental assistance or leasing, 3-PH projects that supports services to chronically homeless in housing, 4-Rapid Re-Housing programs, 5-New Reallocated Program, 6- New PH Bonus. Projects will be ranked in their component type based on their score from the CoC Ranking tool. A discussion then followed regarding the agreement to this prioritization, use of the tool which uses objective data from HMIS, SPM, APR, and financials and how the CoC may be applying for new PH or RRH programs and losing others. The rationale of Tiering 2 the RRH programs is that it has always been a time limited subsidy, if there was a subsidy at all and that we are not risking a truly subsidized unit. The Reallocation Policy and Rating and Ranking can be found on the CoC website.

4. Boston's Way Home Updates

Laila

- Chronically Homeless
- Homeless Veterans

Laila Bernstein, Special Advisor to the Mayor, reviewed a Powerpoint of the Action Plan Updates in preparation for the next Council meeting which will focus on the application and uses of the Planning grant. A number of challenges have been identified as the plan continues to be rolled out and implemented, how can we use planning funds to help these challenges. The presentation may be found on the Boston's Way Home website.

5. Rapid Rehousing Written Standards

Katie

- Process Overview
- Draft Written Standards

There is currently ~\$3.7m in RRH funds in the Boston CoC, split between CoC and City funds. The large RRH partnership between our two individual shelters

kicked off on 7/1. RRH has been identified as a critical component of the Systems Change work happening in the CoC. The thought process is that if RRH is targeted correctly then the impact hopefully will lead to decreases in length of stay as well as recidivism. The Rapid re-Housing working group made up of staff from all agencies and population types have developed the draft standards attached for review. The standards discuss who should be targeted, for how long, how much flex funds to be disbursed and a progressive engagement model. Also included is a Process Document as to how the work group reached the decisions that it did. The standards have been written to be flexible enough for each population. As the RRH projects roll out or are renewed then these standards will be implemented.

6. Next Meeting: August 16th @ 3 PM

- Approve Updated CoC Governance Charter Jen & Katie
- Update on New Project Proposals
- Narrative Assistance
- Date for September meeting: 9/6 or 9/13 in AM

Homework for the council, review the current Charter that was handed out with track changes highlighting some areas of concern or update. This document will be worked on electronically by the Council and CoC staff for a final vote to approve any updates at the next meeting in August. CoC staff will have a list and overview detail of the new projects as the proposals are due the previous day to DND. Also CoC staff will have any narratives that will need Council members help with.



MA-500

CoC's Governance Charter

ARTICLE I. - Mission

The mission of the City of Boston's Leadership Council is to oversee, through innovation and initiatives, the reduction of family and individual homelessness in the City of Boston.

The Leadership Council will carry this mission out through the following efforts:

- Prioritization of both new and renewal projects funded through the US Department of Housing and Urban Development's Continuum of Care Program
- Leadership to leverage and prioritize the effective use of Public/Private resources
- Oversight of implementation efforts of the *Boston's Way Home: An Action Plan to End Veteran and Chronic Homelessness in Boston*
- Policy Making and Advocacy on issues of concern to Boston's homeless families and individuals
- Oversight of the City of Boston's Continuum of Care accomplishing all responsibilities specified by HUD's Continuum of Care Program
- Setting performance targets for all Continuum of Care and ESG funded programs based on the Strategic Planning Objectives in the CoC application and the City homeless plan
- Oversight of monitoring of all CoC and ESG funded programs
- Oversight and Planning of City Initiatives and innovative pilots

ARTICLE II. – Collaborative Applicant and Unified Funding Agency

Section 1. The Leadership Council designates the City of Boston's Department of Neighborhood Development as both the Collaborative Applicant and the Unified Funding Agency representing the City of Boston's Continuum of Care. The Department of Neighborhood Development is responsible for conducting the duties and responsibilities of both the Collaborative Applicant (24 CFR 578.9) and the Unified Funding Agency (24 CFR 578.11) outlined in the US Department of Urban Development's Continuum of Care Program Regulation as codified in 24 CFR 578.

ARTICLE III. - Membership

Section 1. **Leadership Board Membership.** The City of Boston's Leadership Council is the decision-making body of Boston's Continuum of Care. The Leadership Council's representation consists of a broad representation from city agencies, service providers, philanthropic organizations, housing developers, faith-based groups, and consumers. The Leadership Council's composition is discussed in Articles III and IV.

Section 3. **Continuum of Care Membership.** The City of Boston's Continuum of Care membership is open to all interested parties from the Boston's geographic area involved in ending homelessness through the City of Boston. Members will be invited to join the CoC through a publically advertised open invitation process through solicitation of participation in the Consolidated Planning process (Con Plan

planning process includes CoC, ESG and HOPWA funds), and public solicitation of funding opportunities for CoC, ESG and HOPWA. Members can request to be added to the CoC membership by contacting DND, the CoC lead agency. The Leadership Council seeks Continuum of Care representation from the following stakeholders: non-profit and for profit entities such as; non-profit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and formerly homeless individuals.

ARTICLE IV. – Leadership Council Officers

Section 1. Officers and Duties. The officers shall be 2 Co-Chairs (with staggered terms) and a Secretary. These officers shall perform the duties prescribed by the Governance Charter. The Co-Chairs shall be responsible for chairing and convening all meetings and the Executive Committee. One Co-Chair shall be a member and represent homeless service providers and one Co-Chair shall be a member and represent public or private entities. Working with DND staff, the Secretary shall assure that minutes are taken and distributed for all meetings and be responsible for keeping the attendance records of the Leadership Council.

Section 2. Nomination. Any Leadership Council member may nominate a fellow member for a vacant officer position. A nomination must be seconded by one additional Leadership Council member. The member must serve actively on the Leadership Council for a minimum on one year in order to be nominated for an officer position.

Section 3. Elections and Terms of Office. The Leadership Council members shall elect all officers through a quorum vote as constituted in the Governance Charter. Co-Chairs shall serve for a two year staggered term. Co-Chairs shall serve up to two consecutive terms. The Secretary shall serve for a two year term and can serve consecutive terms with no limit.

Section 4. Vacancies. A vacancy in any office shall be filled by following the nomination and approval process described in Section 2.

Section 5. Executive Committee. The Executive Committee is comprised of the two Co-Chairpersons and the Secretary. All three individuals must be present to represent a quorum of the Executive Committee. The Co-Chairs shall be given the authority to convene a meeting of the Executive Committee in order for decisions/votes to be executed when time limits convening the full Leadership Council.

ARTICLE V. – Leadership Council Composition/Structure

Section 1. Leadership Council Composition. The Leadership Council will be comprised of 19 members – the 3 Council Officers and 16 additional members. The Leadership Council members will represent the following groups:

- City of Boston – Department of Neighborhood Development, Boston Public Health Commission, Boston Public Housing Authority (3 members)

- Commonwealth of Massachusetts – Department of Housing and Community Development (1 member)
- Homeless Services Provider Representatives (Individual, Family, Veteran) (9 members)
- Homeless Advocacy (2 member)
- Faith-Based Community (1 member)
- Philanthropy Community (1 member)
- Private Business/Housing Development (1 member)
- Homeless or Formerly Homeless Individual (1 member)

Section 2. Leadership Board Nomination/Selection. Based on the composition goals described above, the City of Boston’s Department of Neighborhood Development (DND) staff will identify, screen, and recommend a slate of individuals to the Mayor of the City of Boston. The Mayor will review and approve an individual from the slate of nominees for membership on the Leadership Council. The terms of membership will be for three years. There are no term limits for general membership on the Leadership Council. A homeless service provider agency is limited to one individual representative on the Council at any given time. As a condition of membership on the Council, a homeless service provider representative must agree to be named and carry out the responsibilities of a Workgroup Chairperson. All other Leadership Council members must agree to actively participate on at least one of the Workgroups.

Section 3. Removal/Vacancies. Leadership Council members may be removed from office by the Mayor of the City of Boston. A Leadership Council member shall resign their membership on the Council by providing written notice to the Mayor as well as the Leadership Council. DND staff will work to fill the Council vacancy by providing a slate of nominees to the Mayor at the earliest possible time.

Section 3. Leadership Council Duties and Responsibilities. The Leadership Council will be responsible for the following duties:

Strategic Planning

- Leadership to leverage and prioritize the effective use of Public/Private resources
- Oversight of implementation efforts of the Boston’s Way Home Homeless Plan
- Policy Making and Advocacy on issues of concern to Boston’s homeless families and individuals
- Oversight and Planning of City Initiatives and innovative pilots

Continuum of Care Oversight and Operation

- Prioritization of both new and renewal projects funded through the US Department of Housing and Urban Development’s Continuum of Care Program
- Operation of the Continuum of Care in accordance with HUD’s Continuum of Care Regulations
- Oversight of the City of Boston’s Homeless Management Information System (HMIS)
- Oversight of the City of Boston’s Coordinated Access System (CAS)
- Oversight of implementation of Continuum-wide Coordinated Entry System
- Conduct of Continuum of Care Planning in accordance with HUD’s Continuum of Care Regulations

ARTICLE VI. - Meetings

Section 1. Leadership Council Meetings. The Leadership Council shall meet regularly on a quarterly basis in order to conduct business. The Leadership Council shall formally meet no less than four times per year. Meeting information and tentative agendas shall be noticed to the Leadership Council membership at least one week in advance of the meeting. Special meetings of the Leadership Council may be called with three (3) days notice by the Co-Chairs.

Section 2. Workgroup Meetings. Each of the CoC Workgroups shall meet at a minimum of two times per quarter in order to conduct needed business. Supported by DND Staff, the Workgroup Chairperson will be responsible for coordinating the conduct of these meetings, providing adequate notice to workgroup members prior to the meeting, and providing periodic updates/report to the Leadership Council on progress of the workgroup.

Section 3. Semi-Annual CoC Meeting. The City of Boston's Continuum of Care shall hold at a minimum of two CoC Meetings per year. Meeting information and tentative agendas will be posted to all CoC membership as well as posted on Boston's Department of Neighborhood Development website at least one week in advance. DND Staff is responsible for taking notes and properly documenting these CoC General meetings.

ARTICLE VII. – Workgroup Structure and Responsibilities

Section 1. Workgroups' Composition/Responsibilities. The membership of the Workgroups will be comprised of experienced leaders in the field. Within its mission and mandate provided by the Leadership Council, the workgroup will be responsible for: identifying the full range of services and providers; identifying barriers for consumers; identifying gaps and duplications; establishing goals for streamline offering and removing barriers that support the Leadership Council's goals; identifying state, City, and non-profit level system changes necessary to achieve the Leadership Council's mission; and developing a work plan to share with the Leadership Council and related workgroups.

Section 2. Workgroups' Mission Statement. The mission of each workgroup is as follows:

Chronically Homeless Individuals Workgroup: Create housing plans for all chronically homeless individuals on Boston's by-name chronic list and coordinate resources to ensure chronically homeless individuals stabilize in permanent housing.

Chronically Homeless Individuals Leadership Team: Create goals and overall plan for reducing chronic homelessness through increasing permanent housing access, reducing reliance on shelter, streamlining consumer access to housing and benefits, removing regulatory barriers, increasing income potential and diverting and preventing individuals from becoming chronically homeless.

Homeless Youth Workgroup: Create goals and overall plan for reducing youth homelessness through increasing permanent housing access, reducing reliance on shelter, streamlining consumer access to housing and benefits, removing regulatory barriers, increasing household income, and preventing youth

from becoming homeless. Work shall be informed with input from the Youth Leadership Council and the Boston Youth Advisory Board (YAB).

Homeless Veterans Workgroup: Create housing plans for all homeless Veterans on Boston's by-name Veteran list and coordinate resources to ensure homeless Veterans stabilize in permanent housing.

Homeless Veterans Leadership Team: Create goals and overall plan for reducing Veteran homelessness through increasing permanent housing access, reducing reliance on shelter, streamlining consumer access to housing and benefits, removing regulatory barriers through both the federal and State service systems for Veterans, increasing household income, and preventing Veterans from becoming homeless.

HMIS and Data Analysis Workgroup: Focus on developing a unified data collection and reporting system addressing provider/agency barriers to participating in uniform data collection, reporting changes, technical assistance needs, and goals for network reporting.

Coordinated Access Workgroup: Implement Coordinated Access to connect individuals experiencing homelessness to the most appropriate housing resource. This group is charged with standardizing referrals and eligibility for Permanent Supportive Housing and Rapid Rehousing, maximizing utilization of resources, and streamlining process to accessing housing through technology. Coordinated Access and Front Door Triage together form Boston's Coordinated Entry system.

Front Door Triage Workgroup: Develop a unified triage response for individuals first entering the homeless system. The triage will provide a differential response based on vulnerability and individual need. Coordinated Access and Front Door Triage together form Boston's Coordinated Entry system.

Family Stability Pilot: The Commonwealth, City of Boston, Boston Public Schools, and various Boston-based agencies team up to provide housing units for homeless families in Boston Public Schools, and to deliver and/or direct these families to additional supports.

Rapid Re-Housing Workgroup: Align the rapid rehousing programs in Boston and develop a system that moves homeless individuals into housing as quickly as possible by expanding availability, accessibility, and appeal of Rapid Rehousing.

Income Expansion and Coordination Committee: Increase income for persons experiencing homelessness. To do this, the group develops and streamlines connections to mainstream employment and benefits as well as specialized employment and benefits.

Landlord Engagement Workgroup: Engage landlords and property owners in building an inventory of available units for homeless individuals to rent in and around Boston.

Permanent Supportive Housing Workgroup: Expedite creation of affordable housing paired with tenant support services targeted to chronically homeless households. This group works to address funding and other production barriers, increase access to services tied to affordable housing developments, develop the "Moving On" program, and other issues.

ARTICLE X. - Homeless Management Information System (HMIS) and Coordinated Access System (CAS)

Section 1. Background

HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for all communities and agencies receiving HUD Continuum of Care (CoC) homeless assistance funds. HMIS is essential to efforts to streamline client services and inform public policy. Through HMIS, homeless persons benefit from improved coordination in and between agencies, informed advocacy efforts, and policies that result in targeted services. Analysis of information gathered through HMIS is critical to the preparation of a periodic accounting of homelessness in the City of Boston, which may include measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs. Such an unduplicated accounting of homelessness is necessary to service and systems planning, effective resource allocation, and advocacy.

The continuum of care system components includes prevention, emergency shelter, transitional housing, permanent affordable and permanent supportive housing, supportive services at each stage, specialized programs and outreach for each homeless subpopulations, and integration with “mainstream” programs. HMIS will enable homeless service providers to collect uniform client information over time. Analysis of information gathered through HMIS is critical to accurately calculate the size, characteristics, and needs of the homeless population; these data are necessary to service and systems planning, and advocacy.

Section 2. Specific Responsibilities of the Parties

1. The City of Boston’s Department of Neighborhood Development shall act as the lead HMIS and CAS Governance Body and HMIS and CAS Lead Agency, providing oversight, project direction, policy setting, and guidance for the project in accordance with 24 CFR 578.7. The Boston CoC HMIS Data Warehouse is the designated HMIS of the CoC in accordance with the 24 CFR 578.7 (b)(1). The Boston CoC also provides licenses to ETO Software for use as a front end HMIS, however to be considered an HMIS Contributing Organization, data must be uploaded to the Boston CoC HMIS Data Warehouse at least monthly. In consultation with the Leadership Council, the HMIS and CAS Lead has developed and will update annually or as needed, all policies, procedures, roles and responsibilities in regards to the maintenance, operations and oversight of the HMIS and CAS Systems. These responsibilities include:

- 1) **General Responsibilities**
 - a. Responsible for ensuring and monitoring compliance with the HUD HMIS Standards.
 - b. Designating the software to be used for HMIS
 - c. Conducting outreach to and encouraging participation by all homeless assistance programs and other mainstream programs serving homeless people.
 - d. Developing and approving all HMIS operational agreements, policies, and procedures.
 - e. Working to inform elected officials, government agencies, the nonprofit community, and the public about the role and importance of HMIS and HMIS data.
 - f. Guiding data quality and reporting.

- g. Promoting the effective use of HMIS data, including measuring the extent and nature of homelessness, the utilization of services and homeless programs over time, and the effectiveness of homeless programs.
 - h. Provide all local information as necessary for compilation of the Continuum of Care Point in Time Count (PIT), Housing Inventory Chart (HIC), System Performance Measures (SPM) and the Annual Homeless Assessment Report (AHAR).
 - i. Serving as the liaison with HUD regarding the HUD HMIS grant.
 - j. Serving as the liaison with the software vendor.
 - k. Providing overall staffing for the project.
 - l. Participating in the success of HMIS.
 - m. Complying with HUD HMIS Standards (currently the 2016 HMIS Data 5.0 Manual and including anticipated changes to the HMIS Standards as of 10/1/2017 to version 1.2) and all other applicable laws.
 - n. Assisting with the completion of the HUD CoC Supportive Housing NOFA Exhibit 1
 - o. Annually prepare the HUD CoC Supportive Housing NOFA application for HMIS funding.
- 2) Project Management and System Administration
- a. Selecting and procuring server hardware.
 - b. Arranging hosting and executing the hosting facility agreement.
 - c. Providing domain registration.
 - d. Procuring server software and licenses.
 - e. Providing and managing end user licenses (per terms of grant agreement with HUD).
 - f. Creating project forms and documentation.
 - g. Providing and maintaining the project website.
 - h. Preparing project policies and procedures and monitoring and ensuring compliance of Agencies
 - i. Responsible for success of the HMIS project, including data, software vendor contract and licensing, security arrangements, Partner Agency MOUs, and contractor agreements.
 - j. Obtaining and maintaining signed Partner Agency MOUs.
- 3) System Security and Maintenance
- a. Server security, configuration, and availability
 - b. Setup and maintenance of hardware
 - c. Installation and maintenance of software
 - d. Configuration of network and security layers
 - e. Anti-virus protection for server configuration
 - f. System backup and disaster recovery
 - g. Taking all steps needed to secure the system against breaches of security and system crashes.
 - h. Ensuring system uptime and monitoring system performance.
 - i. Protecting of confidential data (in compliance with HUD Standards, local privacy policies, and other applicable law), and abiding by any restrictions clients have placed on their own data.
 - j. Developing and implementing security and confidentiality plans if required by the revised HUD HMIS Standards.
- 4) Administering HMIS end users including:
- a. Add and remove partner agency technical administrators
 - b. Manage user licenses

5) Training:

- a. Provide all training and user guidance needed to ensure appropriate system use, data entry, data reporting, and data security and confidentiality, including:
 - a. Training documentation
 - b. Confidentiality and Intake/Exit Forms training
 - c. Application training for agency administrators and end users
 - d. Outreach to users/end user support
 - e. Training timetable
 - f. Helpdesk

6) Data Quality:

- a. Ensuring all client and homeless program data are collected in adherence to the HUD HMIS Data Standards and local additional requirements thereto.
- b. Customizing the HMIS application to meet local data requirements.
- c. Monitoring data quality, generating agency exceptions reports
- d. Ensuring data quality.
- e. Preparing and implementing a data quality plan if required by the revised HUD HMIS Standards.
- f. Carrying out aggregate data extraction and reporting including the HMIS data needed for an unduplicated accounting of homelessness, including the Point in Time and Street count.
- g. Assist partner agencies with agency-specific data collection and reporting needs, such as the Annual Progress Report and program reports (within reason and within constraints of budget and other duties).

7) Centralized or Coordinated Assessment System (CAS):

- a. Establish and Operate a coordinated assessment system that provides an initial, comprehensive assessment of the needs of the individual or family for housing and services.
- b. Develop a specific policy on how the system will address the needs of individuals and families who are fleeing or attempting to flee, domestic violence, dating violence, sexual assault or stalking but who are seeking services from a non-victim service provider.
- c. Develop policies and procedures for the overall CAS that address:
 - i. Prioritization
 - ii. Low Barrier
 - iii. Housing First Oriented
 - iv. Person-Centered
 - v. Fair and Equal Access
 - vi. Emergency Services
 - vii. Standardized Access and Assessment
 - viii. Inclusive
 - ix. Referral to projects
 - x. Referral Protocols
 - xi. Outreach
 - xii. Ongoing Planning and Stakeholder Consultation
 - xiii. Informing local planning
 - xiv. Leverage local attributes and capacity
 - xv. Safety Planning

- xvi. Use of HMIS and other system for Coordinated Access
- xvii. Full Coverage

8) The Continuum has established the following prioritization for all CoC Program funded PSH for individuals and families. These priorities have been established because solving homelessness for the City's most vulnerable people, who have the longest time spent in homelessness and the most severe service needs, will enhance the City's goal of quickly transitioning homeless persons to permanent supportive housing and ultimately eradicating homelessness.

The following established and implemented *Order of Priority* for dedicated and prioritized PSH beds will ensure that those persons with the longest histories residing in places not meant for human habitation, emergency shelters, and in safe havens and with the most severe service needs are given first priority. The CoC identifies and verifies prioritization status (both with length of time homeless and severity of needs) through data driven methods which include an administrative data match and process that is documented in the participant's files.

1. Prioritizing chronically homeless persons in CoC Program-funded PSH beds dedicated or prioritized for occupancy by persons experiencing chronic homelessness

- a. First Priority- Households who are chronically homeless and; are the most vulnerable individuals and families who have the **longest history of homelessness** living in places not meant of human habitation, a safe haven, or an emergency shelter **AND** who have the **most severe service needs**
- b. Second Priority- Chronic/long-term homeless households; who have the **longest history of homelessness**
- c. Third Priority- Chronically homeless households who present with the **most severe services needs**
- d. Fourth Priority- All other chronically homeless households

Through CAS- the majority of CoC-funded PSH units will be available for CH households until the CoC ends chronic homelessness. In very limited cases (typically when the units have additional funder statutorily regulated specific target populations i.e. HIV/AIDS) the non-dedicated and non-prioritized units will follow this order of priority:

2. Prioritizing homeless persons in CoC Program-funded PSH beds not dedicated or not prioritized for occupancy by persons experiencing chronic homelessness

- a. First Priority- Homeless households with a disability with long periods of episodic homelessness and severe service needs
- b. Second Priority- Homeless households with a disability with severe service needs
- c. Third Priority- Homeless households with a disability coming from places not meant for human habitation, safe havens, emergency shelters without sever service needs
- d. Fourth Priority- Homeless households with a disability coming from transitional housing

9) DND as the HMIS and CAS Lead will maintain compliance with all HUD requirements current and future in accordance with 24 CFR 5787.7 (a)(5)

Section 3. Satisfactory Assurances Regarding Confidentiality and Security

DND shall receive from Human Services client information that may be subject to the privacy and security protections and requirements of HUD HMIS Standards, HIPAA Privacy Rule, other law, and local HMIS privacy and security policies and procedures. DND shall use protected client information only for purposes permitted by agreement with Human Services and as permitted by the applicable law and Standards. Further, DND shall use of all safeguards required by HUD Privacy Standards, HIPAA Privacy Rule, where appropriate, other law, and local HMIS privacy and security policies and procedures in order to prevent any unauthorized disclosure of protected client information.

ARTICLE XI. - Amendments

These Standing Rules may be amended or repealed at any Leadership Council meeting by a two-thirds vote of the Leadership Council provided there is a quorum.

ARTICLE XII. - Non-Discrimination

It is the policy of the City of Boston CoC Leadership Council that no person shall be discriminated against because of their race, sex, age, marital status, religious creed, color, national origin, disability, sexual orientation, or because they have minor children, or receive public assistance. The CoC Leadership Council shall be operated in an open and democratic fashion and shall not discriminate against anyone because they are a member of one of the above groups.

Last Updated: August 14, 2017

Voted and Approved by Leadership Council on: August 16, 2017



MA-500

***PHA Administration Plan
(Applicable Section(s) Only)***

- (3) Any adult granted the Application is subject to fulfill all preliminary and final eligibility requirements governed by this Administrative Plan or its successor.
- (g) **Any adult granted the Application is subject to fulfill all preliminary and final eligibility requirements governed by this Administrative Plan or its successor.**

3.3 Priority and Preference Admissions

The following system of Priorities and/or Preferences will be used for new admissions.

Process Overview:

A third party must verify all requests for Priority Status. Information shall be submitted on certificates of Priority Status and/or another form of written verification from a reliable third party as determined by the BHA. All requests for Priority status will be reviewed prior to the determination of Eligibility.

During the review of documents submitted for Priority status, it may be necessary to obtain additional documentation in order to complete the review. In this case, the Occupancy Department will send (or give) the Applicant a notice detailing the information still needed to complete the review for Priority status and the submission deadline.

Applicants who do not qualify for Priority status based on a review of the documents submitted are sent (or given) a notice detailing the specific reason(s) for the denial of Priority. This notice informs Applicants of their right to appeal the denial of Priority status through the informal hearing process conducted by the BHA Department of Grievances and Appeals.

Applicants will be sorted on each waiting list in accordance with any approved Priority and/or Preference(s). The ranking categories utilized by the BHA are outlined below.

3.3.1 Definition of Priority

Priority is a housing-related situation that affects an Applicant's present residential status. The BHA gives points to an Applicant with a Priority that ranks an Applicant higher on each waiting list than an Applicant without Priority. An Applicant can qualify for only one Priority at any given time. Certain Priorities are given more points than others are. An Applicant will always be assigned to the highest Priority for which they qualify.

3.3.2 Definition of Preference

The BHA gives preference to an Applicant on the waiting list if they qualify for one of the Preference categories listed below. See section 3.3.6.

Preference points are cumulative and are added to the Applicant's Priority points (if any) to determine an Applicant's position on each BHA waiting list. An Applicant may qualify for more than one Preference at a time.

3.3.3 Verification of Priority or Preference Status

The BHA will provide to each potential Applicant a description of all Priorities and Preferences that may be available. BHA will verify the Priority during the application process as part of the determination of eligibility (See section 5.2).

3.3.4 Granting of Priorities and/or Preferences

It is BHA policy that a Priority and/or Preference, as well as date and time of the application, establish placement position on a waiting list. The BHA will grant Priority and/or Preference to Applicants who are Eligible, Qualified, and meet the definitions of the Priorities and/or Preferences (see section 3.3.5) at the time they are certified for Admission.⁷ Applicants can apply for Priority status at anytime the waiting list is open.

3.3.5 Priority Categories

- a) **Special Purpose Vouchers:** The BHA will admit an Applicant who qualifies for a particular category of Special Purpose Vouchers to the Section 8 program before all other Applicants on the waiting list if the BHA is not currently assisting the required number of special purpose vouchers families.
- (b) **Super Priority.** The BHA will admit an Applicant to the Section 8 program before all other Applicants on the waiting list if:
 - (1) The Applicant resides in BHA public housing, AND;
 - (i) The Applicant Family is being temporarily displaced due to BHA rehabilitation and modernization programs; or
 - (ii) The Applicant or a member of the Applicant Household is in imminent danger of life threatening injuries due to providing testimony or information regarding criminal activity to a local law enforcement agency; or

⁷ If the Applicant is denied priority status and requests an informal review, the hearing officer at the review will determine the priority status at the time of certification and not at the time of the hearing. The BHA will take into consideration the individual circumstances of each Applicant.

- (iii) The Applicant or a member of the Applicant Household is a victim of physical harassment, extreme or repeated vandalism to personal property and/or extreme and/or repeated verbal harassment, intimidation or coercion which places them in imminent danger and that cannot be expeditiously remedied in any other way; or
 - (iv) The Applicant or a member of the Applicant Household has been or is currently a victim of Domestic Violence, Dating Violence, Stalking, or Sexual Assault, and has a reasonable belief of risk of imminent harm if he or she remains in the current Unit and no other BHA public housing sites are an appropriate alternative, or
 - (v) The BHA cannot approve the Applicant's request for Reasonable Accommodation at any of the BHA's public housing sites because the request would be unreasonable, an undue financial burden, or a fundamental alteration of the program and the Applicant's Request for Reasonable Accommodation could be resolved by being assisted under the HCVP.
- (2) The Applicant is a Participant in the BHA's Section 8 Moderate Rehabilitation Program, or the Project Based Voucher Program AND;
- (i) The Applicant or a member of the Applicant Household is in imminent danger of life threatening injuries due to providing testimony or information regarding criminal activity to a local law enforcement agency; or
 - (ii) The Applicant or a member of the Applicant Household is a victim of physical harassment, extreme or repeated vandalism to personal property and/or extreme and/or repeated verbal harassment, intimidation or coercion which places them in imminent danger; or
 - (iii) The Applicant or a member of the Applicant Household has been or is currently a victim of Domestic Violence, Dating Violence, Stalking, or Sexual Assault, and has a reasonable belief of risk of imminent harm if he or she remains in the current Unit : or
 - (iv) The Owner and/or the BHA cannot approve the Applicant's request for Reasonable Accommodation at any of the BHA's Section 8 Moderate Rehabilitation sites

because the request would be unreasonable, an undue financial burden for the Owner, or a fundamental alteration of the program, and the Applicant's Request for Reasonable Accommodation could be resolved by being assisted under the HCVP.

(3) Verification Requirements:

Applicants will be asked to provide reliable documentation to show that their Family qualifies for Super-Priority as outlined in section 3.3.5(a)(1) and (2). Such verification may include the following items:

- (i) A letter(s) from a Qualified Healthcare Provider describing an Applicant's physical or mental condition and specifying housing conditions required because of the condition;
- (ii) For Reasonable Accommodation requests, reliable documentation from a Qualified Healthcare Provider or professional non-medical service agency, whose function it is to provide services to the disabled. Documentation should verify that the Applicant or a member of his/her Household is disabled under the applicable definitions in Federal and State law and describe the limitations attributable to the disability. Documentation must also describe how the accommodation being requested will overcome or alleviate those limitations;
- (iii) Police reports;
- (iv) Civil Rights incident reports;
- (v) Copies of restraining orders;
- (vi) Any other documentation that provides the BHA with evidence of Super Priority criteria.

c) Mitigation Vouchers – The BHA will provide three hundred (300) Mitigation Vouchers to be issued over the next five years to priority one, non-elderly disabled applicants in accordance with the Boston Housing Authority Designated Housing Plan who would have otherwise been called in for screening for a public housing unit. These applicants will be given the opportunity to apply for a Section 8 Housing Choice Mitigation Voucher at the time that they would have otherwise been called into screening for a public housing unit. If a Housing Choice Mitigation

Voucher is not immediately available these individuals will be placed on waiting list and will be drawn in accordance with the Administrative Plan based on their Mitigation Voucher application.

(d) City of Boston Interagency Council on Housing and Homelessness (ICHH) Programs Priority:

(2) The Social Innovation Financing (SIF) Program

The Social Innovation Financing (SIF) Housing Program is a supported housing program serving chronically homeless individuals in the City of Boston. The Boston Public Health Commission (BPHC) and the BHA have partnered to create this program which seeks to serve 25 chronically homeless individuals over a two year period. The BPHC will provide services through funding received from the Department of Housing and Community Development (DHCD). The BHA will provide a total of 25 vouchers over the next two years. The BPHC will identify qualified SIF individuals and directly refer to them to the BHA, providing a homeless certification and all required eligibility documents, wherein the BHA shall screen for HCVP eligibility.

The "Housing First" intervention has endeavored to place homeless adults in permanent low-barrier housing with intensive recovery supports and other wrap around services. The primary goals have to demonstrate a reduced utilization of high cost healthcare services by clients placed in permanent supportive housing while supporting them in retaining their tenancies

DHCD will fund a program to provide supportive services to SIF Program participants that will include a Clinical Manager and a staff of Case Managers. The SIF Program Case Managers will develop an Individual Service Plan ("ISP"). The BPHC shall provide a copy of the respective ISP for each eligible SIF Program Participant to the BHA and it shall become an addendum to the HCVP Family Obligations executed by the SIF Program Participant.

(3) Leading the Way Home

The Leading the Way Home Program is a form of supported housing designed to permanently solve homelessness amongst a subset of Boston homeless families residing in family emergency shelters funded by the State of Massachusetts. Households fitting this profile will be offered the following supports: (1) 18 months of support services focused on stabilization and self-sufficiency, and (2) Section 8 rental assistance

for those participating households that are willing to participate in stabilization and economic self-sufficiency activities. The BHA will provide no less than five-hundred (500) tenant based housing vouchers to qualified participants in this program. The State of Massachusetts will provide funding for the stabilization and supportive services for participants. The Massachusetts Department of Housing and Community Development (DHCD) or its subcontractor will identify and refer qualified Leading the Way Home applicants to the BHA.

(e) Priority 1

The BHA grants Priority 1 status to an Applicant whose verified circumstances, during the final eligibility interview (see section 5.3) and prior to execution of the Lease, fall within one of the following categories:

- (1) **Displacement due to a disaster**, such as flood or fire, that results in the un-inhabitability of an Applicant's Apartment or dwelling Unit not due to the fault of the Applicant and/or Household Member or beyond the Applicant's control;

Verification must include:

- (i) A copy of the incident report from the local Fire Department or other appropriate agency who deals with disasters; and
 - (ii) A copy of his/her Lease, or a statement from the property Owner, verifying that s/he is/was the tenant of record at the affected address; and
 - (iii) Verification from the Fire department, the Inspectional Services Department, the Health Department or other appropriate agency that the dwelling Unit is now uninhabitable; and
 - (iv) The cause of the disaster if known (**Note:** If the Applicant or a Household Member or guest was the cause of the disaster, approval for Priority status will be denied unless Mitigating Circumstances are established to the satisfaction of the BHA).
- (2) **Displacement Due to Domestic Violence/Dating Violence / Stalking/ Sexual Assault** which is defined as

displacement from an address where the Applicant is/was the tenant of record due to continuing actual or threatened physical violence (including sexual abuse) directed against one or more of the Household Members.

Verification must include (and will be requested by the BHA in writing):

- (i) Submission of a fully completed "Certificate of Involuntary Displacement Due to Domestic Violence/Dating Violence/ Stalking/ Sexual Assault"
OR
 - (ii) A third-party, written verification from the local police department, a social service agency, a court of competent jurisdiction, a clergy member, a physician, or a public or private facility that provides shelter or counseling to the victims of domestic violence.
 - (iii) Verification *will not* be considered valid unless it:
 - Supplies the name of the threatening or abusive Household Member or other legal occupant of the dwelling Unit,
 - Describes how the situation came to verifier's attention, **and**
 - Indicates that the threats and/or violence are of a recent (within the past six [6] months) or continuing nature if the Applicant is still residing in the dwelling where the violence has occurred or is occurring, **or**
 - Indicates that the Applicant was displaced because of the threats and/or violence and that the Applicant is in imminent danger where he/she now resides.
 - (iv) The Applicant must supply the name and address of the abuser **AND** provide documentation that the Applicant is/was a tenant of record
- (3) **Victim of hate crime.** The Applicant or a member of the Household has been a victim of one or more hate crimes **AND** the Applicant Family has vacated a dwelling Unit because of this crime **OR** the fear associated with the

crime has destroyed the peaceful enjoyment of the dwelling Unit.

"Hate crime", is defined as any criminal act coupled with overt actions motivated by bigotry and bias including, but not limited to, a threatened, attempted or completed overt act motivated at least in part by racial, religious, ethnic, handicap, gender or sexual orientation, prejudice, or which otherwise deprives another person of his/her constitutional rights by threats, intimidation or coercion, or which seeks to interfere with or disrupt a person's exercise of constitutional rights through harassment or intimidation.

Verification must include:

- (i) Submission of a fully completed "Certificate of Involuntary Displacement by Hate Crimes" or documentation from a law enforcement agency that the Applicant or a Household Member was a victim of such crime(s); **AND**
 - (ii) Has vacated the dwelling because of such crime(s); or experienced fear associated with such crime(s) and the fear has destroyed the peaceful enjoyment of their current dwelling Unit.
- (4) **Avoidance of reprisal/witness protection:** Relocation is required because: An Applicant provided information or testimony on criminal activities to a law enforcement agency; and based upon a threat assessment, a law enforcement agency recommends the relocation of the Applicant Family to avoid or minimize risk of violence against Applicant Family as reprisal for providing such information.

Verification requirements:

- (i) Submission of a fully completed "Certificate of Involuntary Displacement to Avoid Reprisal" or documentation from a law enforcement agency that the Applicant and/or a household member provided information on criminal activity; **and**
- (ii) Documentation that, following a threat assessment conducted by the law enforcement agency, the agency recommends the relocation/re-housing of the household to avoid or minimize the threat of violence or reprisal to or against the household member(s) for providing such information.

This includes situations in which the Applicant and/or Family member(s) are themselves the victims of such crimes and have provided information or testimony to a law enforcement agency.

- (5) **Court-ordered no-fault eviction:** An eviction pursuant to an Order for Judgment (or Agreement for Judgment) issued by a court because of:
- Landlord action beyond the Applicant's ability to control to prevent; and
 - The action occurred despite the Applicant having met all lawfully imposed Lease conditions; and
 - Displacement was not the result of failure to comply with United States Department of Housing and Urban Development ("HUD") and State policies in its housing programs with respect to occupancy of under-occupied and Overcrowded units or failure to accept a transfer to another Unit in accordance with a court order or policies or procedures under a HUD-approved desegregation plan.

Verification Requirements (**ALL** documents are required and failure to establish any one of the following elements will result in denial of Priority status):

- (i) Submission of a fully completed "certificate of Involuntary Displacement by Landlord Action"; and
- (ii) A copy of the Notice to Quit issued by the landlord or property manager; and
- (iii) A copy of the Summons and Complaint available from the court; and
- (iv) A copy of the Answer or other response(s) filed by the Applicant in court in response to the Complaint, if any; and
- (v) A copy of the Judgment of the Court (or an Agreement for Judgment, Order for Judgment and Findings of Fact, or Default Judgment); and
- (vi) If applicable, a copy of the execution issued by the court.
- (vii) The information contained in the above-referenced documents must clearly establish to the satisfaction of the BHA that:

- The action taken by the landlord or property manager was beyond the Applicant's ability to control or prevent;
- The action by the landlord or property manager occurred despite the Applicant having met all previously imposed conditions of occupancy;
- Displacement was not the result of failure to comply with HUD or State policies in its housing programs with respect to occupancy of under-occupied and over-crowded Apartments or failure to accept a Transfer to another Apartment in accordance with a court order or policies or procedures under a HUD-approved desegregation plan.

- (6) **Condemnation of House/Apartment:** the Applicant's housing has been declared unfit for habitation by an agency of government through no fault of the Applicant.

Verification Requirements:

- (i) Third-party, written verification from the appropriate unit or agency of government certifying that the Applicant has been displaced or will be displaced in the next ninety days, as a result of action by that agency; and
- (ii) The precise reason(s) for such displacement

- (7) **Other Government Action:** An Applicant is required to permanently move from their residence by a Federal, State or local governmental action such as code enforcement, public improvements or a development program.

Verification Requirements:

- (i) Third-party, written verification from the appropriate unit or agency of government certifying that the APPLICANT has been displaced or will be displaced in the next ninety days, as a result of action by that agency; and
- (ii) The precise reason(s) for such displacement

- (8) **For Disabled Persons only, Inaccessibility of a critical element of their current dwelling unit:** A Household Member has a mobility or other impairment that makes the person unable to use a critical element of the current

Apartment or development AND the Owner is not legally obligated under laws pertaining to Reasonable Accommodation to make changes to the Apartment or dwelling Unit that would make these critical elements accessible to the Family member with the disability.

Verification Requirements:

- (i) The name of the Family member who is unable to use the critical element;
 - (ii) A written statement from a Qualified Healthcare Provider verifying that a Family member has a Disability (but not necessarily the nature of the Disability) and identifying the critical element of the dwelling which is not accessible and the reasons why it is not accessible; and
 - (iii) A statement from the landlord or official of a government or other agency providing service to such Disabled Person explaining the reason(s) that the landlord is not required to make changes which would render the dwelling accessible to the individual as a Reasonable Accommodation.
- (9) **Homelessness:** A Household lacks a fixed, regular and adequate nighttime habitation OR the primary nighttime dwelling is one of the following:
- A supervised public or private shelter designed to provide temporary living accommodations (includes welfare hotels, congregate shelters and transitional housing);
 - A public or private place not designed for, or ordinarily used as, a regular sleeping place for human beings.

Note: Persons living with current BHA Participants or living with tenants in private or subsidized housing DO NOT qualify as homeless.

Verification Requirements:

- (i) Submission of a "Certificate of Homelessness" fully completed by an appropriate source and the Applicant's signed statement that he/she lacks a fixed, regular and adequate nighttime residence; or his/her primary nighttime residence is:
 - (A) A supervised public or private shelter designed to provide temporary housing

accommodations (i.e., welfare hotels, congregate shelters and transitional housing); or

- (B) A public or private place not designed or used as a regular sleeping place for human beings.
- (ii) A third-party written verification from a public or private facility that provides shelter for homeless individuals, the local police department, or a social services agency, certifying the Applicant's homeless status in accordance with the definition in this policy.
- (10) **Graduates of Project-Based Units Who Have Fulfilled Supportive Service Goals:** A participant in a transitional housing program for Elderly or Disabled Persons which includes a supportive services component (for example the Shelter Plus Care Program) shall be considered to be imminently in danger of homelessness. Such a program participant shall be eligible as a Priority One Applicant if:
 - (1) The person has been a tenant in such a program for not less than twelve (12) months; and
 - (2) The person no longer requires the or completed the program's services (as determined by the program service provider); and
 - (3) As a result must relocate from such housing.

3.3.6 Admission Preference

An Applicant may only apply for a Preference when the waiting list is open.

Preference points are cumulative and are added to Priority points (if any) to determine an Applicant's position on a BHA waiting list. An Applicant may qualify for more than one Preference at a time.

A Priority One Applicant with a Preference will be ranked above a Priority One Applicant with no Preferences. Preferences are cumulative, so an Applicant with more than one Preference (e.g., Veterans and Displaced) will be ranked higher within his or her Priority category than an Applicant with only one Preference.

The Preference categories are described below:

- (a) ***Elderly/Non-Elderly Disabled Person Preferences***

(1) The Boston Housing Authority has an Admissions preference for a single person Applicant, who is Elderly or Disabled over other single persons. An Applicant will be given preference over an Applicant who is a Single Person who is not an Elderly or Disabled person within each waiting list Priority category.

Note: A single woman who is pregnant at the time of admission, or a Single Person who has secured or is in the process of securing the custody of any individual(s) below the age of 18, will not be considered a Single Person for the purposes of this preference.

(2) The Boston Housing Authority has an Admissions preference for Elderly households at specific Project Based Section 8 sites where such a preference is designated in the Owner's Housing Assistance Payments Contract ("HAP").

(b) **Veterans Preference**

A "veteran", as used in this Administrative Plan shall include the spouse, surviving spouse, dependent, parent or child of a Veteran and the divorced spouse of a Veteran who is the legal guardian of a child of a Veteran.

Verification Requirement:

1 Applicants claiming a Veteran's Preference must provide a copy of the discharge documents of the Veteran for whom the Preference is claimed. The Veteran's Preference is only applicable to Veterans and/or immediate families of Veterans who were discharged under circumstances other than dishonorable.

(c) **Working Families Preference**

(1) Definition of a Working Family:

A Family where the Head of Household or other adult member is employed full time and who has been employed for the last six months. Full time is defined as working at least 32 hours a week.

(2) An Applicant shall be given the benefit of the Working Family preference if the head *and* spouse, or sole member is age 62 or older, or is a Disabled Person.

4.2 Priorities and Preferences

Certain BHA Applicants may qualify for a Priority and/or Preference, which affects the position of those Applicants on each BHA waiting list.

4.2.1 Definitions

1. **Priority** is defined as a housing-related situation that affects a Household's present residential status. The BHA gives points to Applicants with a Priority that ranks those Applicants higher on each waiting list than Applicants without Priority. An Applicant can qualify for only one Priority at any given time. Certain priorities are given more points than others are. An Applicant will always be assigned to the highest Priority for which they qualify. Specific Priority definitions and point information can be found later in this chapter in sections 4.4.3 and 4.4.5.

2. **Preference** refers to points given to BHA Applicants who are veterans, Boston Residents, employed in Boston, offered employment in Boston, a Disabled Person (Family Developments/AMPs only) or Elderly Households who apply for certain developments in accordance with State regulations and the BHA's Designated Housing Program (See Section 10.3, Designated Housing and Section 10.4 Elderly Preference). Preference points are cumulative and are added to Priority points (if any) to determine an Applicant's position on each BHA waiting list. An Applicant may qualify for more than one Preference at a time.

4.2.2 Verification

BHA will provide to each potential Applicant a description of each Priority and Preference available to Applicants. BHA will verify the Priority and/or Preference during the application process-as part of both the preliminary and final eligibility processes (See Section 4.4.3).

4.2.3 Matching of the Applicant and the Apartment Characteristics

Before applying Priorities and Preferences, BHA will determine the appropriate apartment size, and special needs requirements if any, based on Household composition and special needs required. In making the selection of a Household for an apartment with accessible features, the BHA will give preference to Households with the greatest number of Priority/Preference points, the earliest approval date for said Priority/Preference points and earliest application date that include a person with disabilities who has a specific need for the apartment features.

4.2.4 Ranking by Priority and/or Preference Points

Applicants will be ranked on each selected development's/AMPs waiting list by Priority and/or Preference points, which are described below. Date Priority and/or Preference points are granted and original Application date will further rank each Applicant.

Although the BHA has adopted specific ranking categories, the order in which they are ranked is different in the BHA's State and Federal Public Housing Programs. A chart for each program listing the ranking categories and the order in which they are ranked follows:

Note: Approved Administrative Transfers will be offered housing before all ranking clients. Approved Emergency Transfers shall be offered every other 4th unit by waiting list by bedroom size and appropriate unit type. On-site Under or Over Housed transfers shall be offered every 8th unit by development by

bedroom size when the site is at 98% occupancy. See Chapter 6.

BHA PRIORITY CATEGORIES

**Federal Housing Programs
Administrative Transfers
Supported Housing Programs**

**State Housing Programs
Administrative Transfers
Supported Housing Programs**

Priority One:

- Displaced Due to Disaster
- Displaced Due to Domestic Violence/Dating Violence/Sexual Assault/or Stalking
- Victim of Hate Crime
- Avoidance of Reprisal/Witness Protection
- Court Ordered no Fault Eviction
- Condemnation
- Urban Renewal
- Other Government Action
- Inaccessibility of Dwelling Unit
- Homelessness

Priority One:

- Displaced Due to Natural Disaster

Priority Two:

(Elderly/Disabled Program Only)

- Excessive Rent Burden
- Imminent Landlord Displacement

Priority Two:

- Urban Renewal
- Condemnation

Priority Three:

- Displaced Due to Domestic Violence/Dating Violence/ Sexual Assault/or Stalking
- Victim of Hate Crime
- Avoidance of Reprisal/Witness Protection
- Court Ordered No Fault Eviction
- Inaccessibility of Dwelling Unit
- Homelessness
- BHA Resident in Federal Program
- "Termination of Assistance" due to Lack any household member with eligible immigration status.

Priority Five:

AHVP (Alternative Housing Voucher Program)

4.4.3 Priority and/or Preference System

The following system of Priorities and/or Preferences will be used for new admissions to and transfers within BHA housing:

All requests for Priority Status must be verified by a third party Information shall be submitted on Certificates of priority status and/or another form of written verification from a reliable third party as determined by the BHA. All requests for Priority status will be reviewed prior to the Personal Interview and/or as part of the final screening process.

During the review of documents submitted for Priority status, it may be necessary to obtain additional documentation in order to complete the review. In this case, the Occupancy Department will send (or give) the Applicant a notice entitled "**Priority Status Request – Insufficient Documentation Notice**" detailing the information still needed to complete the review for Priority status.

Applicants who do not qualify for Priority status based on a review of the documents submitted are sent (or given) a notice entitled "**Notice to Applicants Denied Priority Status**" detailing the specific reason(s) for the denial of priority. This notice informs applicants of their right to appeal the denial of Priority status through the informal hearing process conducted by the BHA's Grievance and Appeals Department.

Applicants will be sorted on each waiting list in accordance with their Priority and/or Preference(s). The BHA considers residents seeking transfers as Applicants and as such they will be provided the opportunity to select the development/AMP waiting lists to which they choose to apply. The ranking categories utilized by the BHA are outlined below.

1. Emergency Transfers

For a complete listing of definitions of each Emergency Transfer Category and the verification required for each category, please refer to Section 7.2 of Chapter 7, "Transfer Policy."

Approved emergency transfers shall be offered every other fourth unit by waiting list by bedroom size and appropriate unit type. See Chapter 6.

2. Supported Housing Programs - See Chapter 10.

3. Priority Applicants

Priority status for admission shall be granted to Applicant Households whose verified circumstances at the time of an offer of an apartment (prior to execution of the lease) fall within one of the following categories:

- A. **Displacement due to a disaster**, such as flood or fire, that results in the un-inhabitability of an Applicant's apartment or dwelling unit not due to the fault of the Applicant and/or Household member or beyond the Applicant's control;

Verification must include:

1. a copy of the incident report from the local Fire Department, and
2. a copy of his/her lease, or a statement from the property owner, verifying that s/he is/was

the tenant of record at the affected address, and

3. verification from the Fire Department, the Inspectional Services Department, the Health Department or other appropriate agency that the dwelling unit is now uninhabitable.
4. the cause of the disaster if known. If the Applicant or a Household Member or guest was the cause of the disaster, approval for Priority status will be denied unless Mitigating Circumstances are established to the satisfaction of Occupancy Department Staff.

B. *Displacement due to domestic violence/Dating Violence/Sexual Assault or Stalking,* which is defined as displacement from an address where the Applicant is/was the tenant of record due to sexual assault, continuing actual or threatened physical violence (including sexual abuse) directed against one or more of the household members.

Verification must include submission of a fully completed "Certificate of Involuntary Displacement Due to Domestic Violence/Dating Violence/Sexual Assault or Stalking " or third-party, written verification from the local police department, a social service agency, a court of competent jurisdiction, a clergy member, a physician, or a public or private facility that provides shelter or counseling to the victims of sexual assault or domestic violence. Such verification will not be considered valid unless it:

- a. Supplies the name of the abuser
- b. Describes how the situation came to verifier's attention; and
- c. Indicates that the threats and/or violence are of a recent (within the past six-(6) months) or continuing nature if the Applicant is still residing in the dwelling where the violence has occurred or is occurring.
- d. Indicates that the Applicant has been displaced because of the threats and/or violence or that the Applicant is in imminent danger where he/she now resides.

The Applicant must supply the name and address of the abuser **AND** Provide documentation that the Applicant is/was a tenant of record.

C. *Victim of hate crime:* A member of the Household has been a victim of one or more hate crimes **AND** the Household has vacated a dwelling unit because of this crime **OR** the fear associated with the crime has destroyed the peaceful enjoyment of the dwelling unit;

"Hate crime", is defined as any criminal act coupled with overt actions motivated by bigotry and bias including, but not limited to, a threatened, attempted or completed overt act motivated at least in part by racial, religious, ethnic, handicap, gender or sexual orientation, prejudice, or which otherwise deprives another person of his/her constitutional rights by threats, intimidation or coercion, or which seeks to interfere with or disrupt a person's exercise of constitutional rights through harassment or intimidation.

Verification must include submission of a fully completed "Certificate of Involuntary Displacement by Hate Crimes" or documentation from a law enforcement agency that the Household Member(s) was a victim of such crime(s); **and**

- a. has vacated the dwelling unit because of such crime(s); **or**
- b. has experienced fear associated with such crime(s) and the fear has destroyed the peaceful enjoyment of their current dwelling unit.

D. Avoidance of reprisal/witness protection: Relocation is required because: (A) a Household Member provided information or testimony on criminal activities to a law enforcement agency; and (B) based upon a threat assessment, a law enforcement agency recommends the relocation of the Household to avoid or minimize risk of violence against Household Members as reprisal for providing such information.

Verification requirements:

- a. Submission of a fully completed "Certificate of Involuntary Displacement to Avoid Reprisal" or documentation from a law enforcement agency that the Applicant and/or a Household Member provided information on criminal activity; **AND**
- b. Documentation that, following a threat assessment conducted by the agency, the agency recommends the relocation/re-housing of the household to avoid or minimize the threat of violence or reprisal to or against the Household Member(s) for providing such information.

This includes situations in which the applicant and/or Household Member(s) are themselves the victims of such crimes and have provided information (testimony) to a law enforcement agency.

E. Court-ordered no-fault eviction: eviction pursuant to an Order for Judgment (or Agreement for Judgment) issued by a court because of: (a) Landlord action beyond the applicant's ability to control or prevent, and the action occurred despite the applicant's having met all previously imposed conditions of occupancy and displacement was not the result of failure to comply with HUD and State policies in its housing programs with respect to occupancy of under-occupied and overcrowded units or failure to accept a transfer to another unit in accordance with a court order or policies or procedures under a HUD-approved desegregation plan.

Verification Requirements (ALL documents are required):

- a. submission of a fully completed "Certificate of Involuntary Displacement by Landlord Action"; **and**
- b. a copy of the Notice to Quit issued by the landlord or property manager; **and**
- c. a copy of the Summons and Complaint available from the court; **and**
- d. a copy of the Answer or other response(s) filed by the Applicant in court in response to the Complaint, if any; **and**
- e. a copy of the Judgment of the Court (Agreement for Judgment, Order for Judgment and Findings of Fact, or Default Judgment); **and**
- f. if applicable, a copy of the execution issued by the court.

The information contained in the above-referenced documents must clearly establish to the satisfaction of

the BHA that:

1. the action taken by the landlord or property manager was beyond the Applicant's ability to control or prevent;
2. the action by the landlord or property manager occurred despite the Applicant Household having met all previously imposed conditions of occupancy;
3. displacement was not the result of failure to comply with HUD and State policies in its housing programs with respect to occupancy of under-occupied and over-crowded Apartments or failure to accept a Transfer to another Apartment in accordance with a court order or policies or procedures under a HUD-approved desegregation plan.
4. displacement was not as a result of non-payment of rent when there were no extenuating circumstance such as a rent increase or loss of income, therefore, the non-payment of rent is beyond the Applicant's ability to control or prevent the court-ordered eviction due to non-payment of rent. The following is a list of some of the additional required verification:
 - a. Verification of the gross income for ALL household members at the time the unit was rented and when the non-payment of rent started.
 - b. Copies of bills and proof of payment history for all utilities listed in the Applicant's or Applicant's household members' name. The payment history must show when services connected and disconnected (when applicable) and the monthly charges and payment history.
 - c. Copies of the mortgage payment history, if applicable.
 - d. Other applicable documentation to demonstrate that the non-payment eviction was due to unforeseen circumstances beyond the Applicant's ability to control or prevent the non-payment eviction.

Failure to establish any one of the above referenced elements will result in denial of Priority status.

F. *Condemnation of house/apartment:* the applicant's housing has been declared unfit for habitation by an agency of government through no fault of the Applicant.

Verification Requirements:

- a. third-party, written verification from the appropriate unit or agency of government certifying that the applicant has been displaced or will be displaced in the next ninety days, as a result of action by that agency; **and**
- b. the precise reason(s) for such displacement.

G. *Displacement by any low-rent housing project or by a public slum clearance or urban renewal project* initiated after January first, nineteen hundred and forty-seven, or other public improvement.

Verification Requirements:

- a. third-party, written verification from the appropriate unit or agency of government certifying that the applicant has been displaced or will be displaced within the next ninety days, as a

- result of action by that agency, and
- b. the precise reason(s) for such displacement.

H. Other Government action (Federal Only): A Household is required to permanently move from their residence by a Federal, State or local governmental action such as code enforcement, public improvements or a development program.

Verification Requirements:

- a. third-party, written verification from the appropriate unit or agency of government certifying that the applicant has been displaced or will be displaced in the next ninety days, as a result of action by that agency; and
- b. the precise reason(s) for such displacement.

I. For disabled individuals only, inaccessibility of a critical element of their current dwelling: A member of the Household has a mobility or other impairment that makes the person unable to use a critical element of the current apartment or development AND the owner is not legally obligated under laws pertaining to reasonable accommodation to make changes to the apartment or dwelling unit that would make these critical elements accessible to the Household Member with the disability.

Verification Requirements:

- a. The name of the household member who is unable to use the critical element;
- b. a written statement from a Qualified Healthcare Provider verifying that the household member has a Disability (but not necessarily the nature of the Disability) and identifying the critical element of the dwelling which is not accessible and the reasons why it is not accessible; and
- c. a statement from the landlord or official of a government or other agency providing service to such Disabled Persons explaining the reason(s) that the landlord is not required to make changes which would render the dwelling accessible to the individual as a reasonable accommodation.

J. Homelessness due to Applicant was displaced from his or her last permanent residence: A Household lacks a fixed, regular and adequate nighttime place of habitation and the primary nighttime dwelling is one of the following:

- A supervised public or private shelter designed to provide temporary living accommodations (includes welfare hotels, congregate shelters and transitional housing); or
- A public or private place not designed for human habitation.

Persons living with existing BHA residents or other subsidized housing, or living with residents in private housing even if only temporarily DO NOT qualify as homeless. Persons who temporarily move to a shelter for the sole purpose of qualifying for this priority shall be determined ineligible.

Verification Requirements:

a. Submission of a "Certificate of Homelessness" fully completed by an appropriate source that he/she lacks a fixed, regular and adequate nighttime residence; or his/her primary nighttime residence is:

1. a supervised public or private shelter designed to provide temporary housing accommodations (i.e., welfare hotels, congregate shelters and transitional housing); .
2. a public or private place not designed for human habitation; and

b. A third-party written verification from a public or private facility that provides shelter for homeless individuals, the local police department, or a social services agency, certifying the Applicant's homeless status in accordance with the definition in this policy.

K. AHVP – Alternative Housing Voucher Program (STATE ONLY)

L. Excessive Rent Burden (ELDERLY/DISABLED PROGRAM ONLY): The household pays more than 50% of its total monthly income for rent and utilities (excluding telephone, Internet and cable TV).

Verification Requirements:

1. Submission of a fully completed "certificate of excessive Shelter Costs" form ; and
2. Verification of the gross income for ALL household members; and
3. Copies of bills and proof of payment for all utilities listed in the Applicant's name for which s/he actually pays.

M. BHA Resident in Federal Program "Termination of Assistance" due to Lack any household member with eligible immigration status.

Verification requirements:

1. Notice of Termination of Assistance
2. Notice of Private Conference or Notice to Quit.

N. Imminent Landlord Displacement From a Unit Within the City of Boston (ELDERLY/DISABLED PROGRAM ONLY) You have not yet been evicted by Court-order BUT your landlord has notified you that you must vacate your dwelling unit through no fault of your own, unrelated to a rent increase, and you have actually vacated the dwelling unit or you will vacate the dwelling unit within the next six (6) months.

Verification requirements:

1. Submission of "Certificate of Involuntary Displacement by Landlord Action" form; and
2. Copies of any notices from the landlord to the Applicant regarding the termination of the tenancy.



MA-500

CoC Written Standards for Order of Priority

Boston CoC Written Standards for Order of Priority for CoC Funded Permanent Supportive Housing (PSH) Units

Revised August 2016

I: CONTINUUM OF CARE PROGRAM INTERIM RULE REQUIREMENT AND HUD CPD NOTICE -16-11

The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act), enacted into law on May 20, 2009, reauthorized the McKinney-Vento Homeless Assistance programs. Through the enactment of HEARTH the Department of Housing and Urban Development (HUD) published the new Continuum of Care (CoC) Program Interim Rule. The CoC Program Interim Rule requires at that the CoC, establish and consistently follow written standards for providing CoC assistance.

The Boston CoC expects that these standards be applied consistently across the entire City of Boston (the CoCs geographic region). The City of Boston and subrecipients may develop additional standards for administering assistance, but they cannot be in conflict with those established by the Continuum or the CoC Program interim rule. Included, *Attachment A*, is a Memorandum of Understanding (MOU) that each PSH project sponsor agrees to adhere to and sign to follow the below prioritization policy.

The Boston CoC has incorporated the HUD Order of Prioritization (Notice CPD-14-012) previously, the Leadership Council (the CoC Board) has voted to update the orders of Prioritization to reflect the most recent Notice (CPD-16-11) published July 2016. On September 7, 2016 the Leadership Council voted to accept the orders of prioritization that follow for all CoC funded PSH units for both families and individuals.

II. PRIORITIZING ELIGIBLE HOUSEHOLDS FOR COC PROGRAM PERMANENT SUPPORTIVE HOUSING (PSH)

Of those eligible households (see section III for PSH eligibility policy) the following populations will be prioritized within the Boston CoC for CoC Program funded PSH units. The CoC's defined target populations and prioritization order are in accordance with: the City of Boston's action plan to end homelessness, *Boston's Way Home*; the U.S. Interagency Council on Homelessness plan to end homelessness, *Opening Doors*; and the HUD Notice CPD-16-11, *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing*.

The Continuum has established the following prioritization for all CoC Program funded PSH for individuals and families. These priorities have been established because solving homelessness for the City's most vulnerable people, who have the longest time spent in homelessness and the most severe service needs, will enhance the City's goal of quickly transitioning homeless persons to permanent supportive housing and ultimately eradicating homelessness.

The following established and implemented order of priority for dedicated and prioritized PSH beds will ensure that those persons with the longest histories residing in places not meant for human habitation, emergency shelters, and in safe havens and with the most severe service needs are given first priority. The CoC identifies and verifies prioritization status (both with length of time homeless and severity of

needs) through data driven methods which include an administrative data match and process that is documented in the participant's files.

- 1. *Prioritizing chronically homeless persons in CoC Program-funded PSH beds dedicated or prioritized for occupancy by persons experiencing chronic homelessness***
 - a. First Priority- Households who are chronically homeless and; are the most vulnerable individuals and families who have the **longest history of homelessness** living in places not meant of human habitation, a safe haven, or an emergency shelter **AND** who have the **most severe service needs**
 - b. Second Priority- Chronic/long-term homeless households; who have the **longest history of homelessness**
 - c. Third Priority- Chronically homeless households who present with the **most severe services needs**
 - d. Fourth Priority- All other chronically homeless households

Through the CoCs established Coordinate Entry System- CAS- the majority of CoC-funded PSH units will be available for CH households until the CoC ends chronic homelessness. In very limited cases (typically when the units have additional funder statutorily regulated specific target populations i.e. HIV/AIDS) the non-dedicated and non-prioritized units will follow this order of priority:

- 2. *Prioritizing homeless persons in CoC Program-funded PSH beds not dedicated or not prioritized for occupancy by persons experiencing chronic homelessness***
 - a. First Priority- Homeless households with a disability with long periods of episodic homelessness and severe service needs
 - b. Second Priority- Homeless households with a disability with severe service needs
 - c. Third Priority- Homeless households with a disability coming from places not meant for human habitation, safe havens, emergency shelters without severe service needs
 - d. Fourth Priority- Homeless households with a disability coming from transitional housing

III. ELIGIBLE HOUSEHOLDS

For permanent supportive housing programs, households must meet both the HUD definition of homelessness under Category I, and have a disability. Once meeting the Category I eligibility requirements, households are then prioritized by the Boston CoCs order of priority (part II). Programs may not establish additional eligibility requirements beyond those specified in Category I and those required by funders.

Category I: Literally Homeless

- Sleeping in a place not designed for our used as a regular sleeping accommodation, including the street, a car, park, abandoned building, bus or train station, airport, camping ground etc.
- Living in a shelter designed to provide temporary living arrangements (including emergency shelter, congregate shelters, transitional housing, hotels and motels paid for by charitable organizations or by government programs)

- Exiting an institution where they: resided for less than 90 days AND were residing in an emergency shelter or places not meant for human habitation immediately prior to entering the institution



MA-500

HDX System Performance Measures

2017 HDX Competition Report

PIT Count Data for MA-500 - Boston CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count	6240	6135
Emergency Shelter Total	5151	5,337
Safe Haven Total	22	51
Transitional Housing Total	900	561
Total Sheltered Count	6073	5949
Total Unsheltered Count	167	186

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	919	769
Sheltered Count of Chronically Homeless Persons	900	731
Unsheltered Count of Chronically Homeless Persons	19	38

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	1358	1079
Sheltered Count of Homeless Households with Children	1358	1,079
Unsheltered Count of Homeless Households with Children	0	0

Homeless Veteran PIT Counts

	2011	2016	2017
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	426	222	233
Sheltered Count of Homeless Veterans	404	217	225
Unsheltered Count of Homeless Veterans	22	5	8

2017 HDX Competition Report HIC Data for MA-500 - Boston CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2017 HIC	Total Beds in 2017 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	5198	94	5027	98.49%
Safe Haven (SH) Beds	59	0	29	49.15%
Transitional Housing (TH) Beds	648	83	529	93.63%
Rapid Re-Housing (RRH) Beds	934	22	912	100.00%
Permanent Supportive Housing (PSH) Beds	4750	0	4461	93.92%
Other Permanent Housing (OPH) Beds	3184	0	1779	55.87%
Total Beds	14,773	199	12737	87.40%

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	3191	3705

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

Households with Children	2016 HIC	2017 HIC
RRH units available to serve families on the HIC	32	218

2017 HDX Competition Report
HIC Data for MA-500 - Boston CoC

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC
RRH beds available to serve all populations on the HIC	229	934

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

Summary Report for MA-500 - Boston CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	15785	16276	412	190	-222	276	83	-193
1.2 Persons in ES, SH, and TH	17261	17353	414	201	-213	282	96	-186

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

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

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	16328	-	233	-	-	125	-
1.2 Persons in ES, SH, and TH	-	17402	-	244	-	-	136	-

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	34	16	47%	5	15%	6	18%	27	79%
Exit was from ES	150	48	32%	18	12%	7	5%	73	49%
Exit was from TH	409	97	24%	33	8%	29	7%	159	39%
Exit was from SH	2	0	0%	1	50%	0	0%	1	50%
Exit was from PH	702	106	15%	42	6%	45	6%	193	27%
TOTAL Returns to Homelessness	1297	267	21%	99	8%	87	7%	453	35%

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	6492	6240	-252
Emergency Shelter Total	5325	5151	-174
Safe Haven Total	22	22	0
Transitional Housing Total	1006	900	-106
Total Sheltered Count	6353	6073	-280
Unsheltered Count	139	167	28

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	17418	17353	-65
Emergency Shelter Total	15962	15974	12
Safe Haven Total	54	88	34
Transitional Housing Total	1779	1513	-266

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

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults (system stayers)	773	389	-384
Number of adults with increased earned income	0	43	43
Percentage of adults who increased earned income	0%	11%	11%

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

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults (system stayers)	773	389	-384
Number of adults with increased non-employment cash income	485	134	-351
Percentage of adults who increased non-employment cash income	63%	34%	-28%

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

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults (system stayers)	773	389	-384
Number of adults with increased total income	485	162	-323
Percentage of adults who increased total income	63%	42%	-21%

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	264	41	-223
Number of adults who exited with increased earned income	0	14	14
Percentage of adults who increased earned income	0%	34%	34%

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

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	264	41	-223
Number of adults who exited with increased non-employment cash income	96	11	-85
Percentage of adults who increased non-employment cash income	36%	27%	-10%

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	264	41	-223
Number of adults who exited with increased total income	96	24	-72
Percentage of adults who increased total income	36%	59%	22%

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 2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	10082	12464	2382
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.	1568	3856	2288
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)	8514	8608	94

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

	Submitted FY 2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	11279	13637	2358
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.	1808	4242	2434
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.)	9471	9395	-76

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in 2016.

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2015	Current FY	Difference
Universe: Persons who exit Street Outreach	1440	792	-648
Of persons above, those who exited to temporary & some institutional destinations	16	15	-1
Of the persons above, those who exited to permanent housing destinations	36	33	-3
% Successful exits	4%	6%	2%

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

	Submitted FY 2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	1240	1513	273
Of the persons above, those who exited to permanent housing destinations	764	861	97
% Successful exits	62%	57%	-5%

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

	Submitted FY 2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	5517	5213	-304
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	5066	4969	-97
% Successful exits/retention	92%	95%	3%

2017 HDX Competition Report FY2016 - SysPM Data Quality

MA-500 - Boston 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.

2017 HDX Competition Report FY2016 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016
1. Number of non-DV Beds on HIC	4328	4785	5123	5138	1313	1226	1068	947	5814	6042	6432	7894	51	85	129		2233	2162	1993	2105
2. Number of HMIS Beds	3726	4221	4548	4578	1101	1020	896	775	3837	4090	5743	5993	51	85	119					
3. HMIS Participation Rate from HIC (%)	86.09	88.21	88.78	89.10	83.85	83.20	83.90	81.84	66.00	67.69	89.29	75.92	100.00	100.00	92.25					
4. Unduplicated Persons Served (HMIS)	9049	9645	12949	17590	1039	1406	1385	1509	4607	4798	5104	5234	1135	1067	1315		2233	2162	1993	2105
5. Total Leavers (HMIS)	6853	6686	5371	8327	604	918	781	855	462	383	520	384	860	581	808		1806	1606	1444	821
6. Destination of Don't Know, Refused, or Missing (HMIS)	6380	6254	4650	4806	133	232	154	154	189	178	277	209	23	15	44		1627	1474	1350	755
7. Destination Error Rate (%)	93.10	93.54	86.58	57.72	22.02	25.27	19.72	18.01	40.91	46.48	53.27	54.43	2.67	2.58	3.96		90.09	91.78	93.49	91.96

2017 HDX Competition Report

Submission and Count Dates for MA-500 - Boston CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2017 PIT Count	1/25/2017	

Report Submission Date in HDX

	Submitted On	Met Deadline
2017 PIT Count Submittal Date	5/5/2017	Yes
2017 HIC Count Submittal Date	5/5/2017	Yes
2016 System PM Submittal Date	5/31/2017	Yes



MA-500

Other – Notice of Project Inclusion (Q.1E-5a)



Katie Cahill-Holloway <katie.cahill-holloway@boston.gov>

Boston CoC: projects to be included in CoC 2017 application

1 message

Katie Cahill-Holloway <katie.cahill-holloway@boston.gov> Tue, Sep 12, 2017 at 11:41 AM

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Good morning Boston CoC.

Attached please find the final listing of the projects the Boston CoC intends to submit as part of its 2017 Continuum of Care application to HUD, which is due on September 28th. All projects that submitted renewal applications for existing CoC programs were selected for inclusion

8/12/2017

City of Boston Mail - Boston CoC: projects to be included in CoC 2017 application

in the overall application to HUD. Please note that this year's application contains 4 new projects that will provide housing and necessary services to support clients in housing. The application will also contain a request for CoC planning funding. If you have questions regarding your renewal project, please reach out directly to your DND Development Officer.

Best,
Katie

Katie Cahill-Holloway
Acting Deputy Director for Supportive Housing
City of Boston | Massachusetts
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<https://www.boston.gov/housing/continuum-care-program>



BOSTON'S WAY HOME
A COMMUNITY EFFORT

MA-500 Boston CoC 2017 project listing FINAL.pdf
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