

Before Starting the CoC Application

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

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2019 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2019 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.
6. Questions marked with an asterisk (*), which are mandatory and require a response.

1A. Continuum of Care (CoC) Identification

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

1A-1. CoC Name and Number: MI-505 - Flint/Genesee County CoC

1A-2. Collaborative Applicant Name: Metro Community Development

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Metro Community Development

1B. Continuum of Care (CoC) Engagement

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notice>

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

1B-1. CoC Meeting Participants.

For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:

1. participated in CoC meetings;
2. voted, including selecting CoC Board members; and
3. participated in the CoC's coordinated entry system.

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

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

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

Applicants must describe how the CoC:

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

1. The Flint/Genesee CoC solicits and considers diverse input via monthly meetings announced on the Lead Agency website, social media and via email to the CoC list serve which includes the Agenda topics, minutes and subcommittee reports so they are coming well informed. Typically 35 – 40 community partners attend regularly representing a broad array of organizations (legal, foundations, Shelters, Aids, Health Coalition, Affordable housing, CoC agencies, City, County planner, youth, HCV providers, religion, disability network, Veterans department) including those that have experienced homelessness. Open dialogue is welcomed and encouraged, and difference of opinions are healthy to solve homelessness. The Flint/Genesee CoC documents attendance via sign in logs and meeting minutes. Many members of the Flint/Genesee CoC Body attend other public meetings such as City and County Commission, and the Genesee County Community Collaborative where information is not only shared but feedback is also given. There are formerly

homeless individuals who maintain membership of the Flint/Genesee CoC as well as sit on the Executive Team. All information communicated is available in print form as well as electronic PDF, upon request. 2. Meeting documents are sent via email and posted on the website prior to the upcoming monthly CoC meetings. The documents include the meeting Agenda, Minutes, subcommittee reports, HCV reports, upcoming NOFAs, policy changes and voting. The agendas are developed by the EC based on trends, or upcoming relating to homelessness. 3. We take into consideration and implement via the work done through one of the 11 CoC subcommittees/work-groups. 4. To ensure effective communication with individuals with disabilities all meeting documents are available and sent electronically, we have several employees of the disability network who give feedback if our communication should be tweaked.

1B-2. Open Invitation for New Members.

Applicants must describe:

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

1. The Flint/Genesee County CoC invitation process consists of informal and formal strategies. The formal process happens through public and/or private invitation and announcement in the CoC meeting or letter from the CoC. The informal strategy is each community member should recruit members that would be an asset to solving homelessness. The process is continual. The Flint / Genesee County CoC utilizes the Governance Charter invitation process. The 2019 formal open invitation began with announcement on the prior month Agenda and following emails and we centered it around a Coordinated Entry theme. We invited via email, phone call, face to face meetings to extend the invitation. 3. We partner with our disability network agencies and they will let us know if something is needed for our communities' partners who have disabilities. 4. It has been a continual campaign however, the month of September will be our annual new member solicitation meeting. As we encounter new information or new situation to solve or provide answers we are looking for new members to join us to solve. This year our new members meeting had 50 participating which means 10 new members (representing new partners i.e., Michigan Dept of Corrections, two new Health Networks, the Police Department, the Flint Housing Commission, MDHHS broader coverage in existing partners) it was successful. 5. The CoC conducts several engagement functions throughout the year, Project Community Connect Homeless Awareness Week, and Point in Time and during those times we are encouraging those experiencing homelessness to let their voice be heard and make a difference by sharing their perspective.

1B-3. Public Notification for Proposals from Organizations Not Previously Funded.**Applicants must describe:**

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

1. The Flint/Genesee County CoC notifies the public that it is accepting project applications proposals from agencies that have not previously received CoC program funding via the Lead Agency's website, social media, email and CoC list serve. The City and County are also asked to post to their perspective websites. 2. To determine whether the project application will be included in the 2019 CoC Program competition, the Flint/Genesee County CoC utilized the HUD and CoC Threshold criteria provided in the 2019 HUD Rating and Ranking Tool and also application timely submission. All applicants met the HUD and CoC Threshold criteria. 3. The CoC Publicly announced it was open to proposal on July 12, 2019 via Metro Website, social media, and via email to the CoC list serve. 4. The RFP was available in print form as well as electronic PDF by request to accommodate those with disabilities. 5. The Flint / Genesee County CoC is very much open to receiving proposals from organizations that have not previously received program funding, however there were no submissions in this category. New perspectives to solving homelessness is important to strategy therefore we will host community forums much earlier in the year to educate address any concerns etc.

1C. Continuum of Care (CoC) Coordination

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

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

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

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	No
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	No
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. CoC Consultation with ESG Program Recipients.

Applicants must describe how the CoC:

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

1. The Flint / Genesee County CoC and the ESG program recipients (City of Flint, Genesee County Planning Commission and Michigan State Housing Authority Michigan) sit on several Flint/Genesee County CoC subcommittees together. The ESG Program Recipients have all participated in one or more of the following policy driven committees; Ten Year, Coordinated Entry, Governance, and CQI. The strategy is created and implemented through subcommittees and workgroup. 2. City of Flint, Genesee County and MSHDA ESP Program Recipients provide monthly spending report to the Executive Committee Chair and Fiscal Committee. Program performance is discussed in great detail at the Fiscal subcommittee meeting. 3) The Genesee County Metropolitan Planning Commission representative attends monthly CoC Meetings and was very involved in the 10 year plan to End Homelessness CoC Workgroup. The representative conveys the information to the Consolidated Plan.

The City of Flint, Genesee County Planning Commission and MSHDA are a direct HUD recipient for ESG funding. Direct HUD recipient requests proposals from applicants on an annual basis. This request is submitted in a variety of ways including announcements via CoC Meeting, CoC List Serve, and the City of Flint website. Once proposals are submitted the City of Flint has an internal review committee review each applicant and make funding recommendations. These recommendations are then brought to the Flint/Genesee CoC for approval. Once approved by the Flint/Genesee CoC the funding allocations are submitted for contract generation.

Metro Community Development, the Lead Agency for the Flint/Genesee CoC is responsible for the completion of the MSHDA Exhibit 1. The Exhibit 1 reflects program outcomes and a variety of other compliance measurements.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Yes to both

Applicants must indicate whether the CoC provided Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area.

1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Yes

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

1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.

Applicants must describe:

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

1. Staff responsible for coordinated entry shall receive training on protecting the safety and privacy of individuals who are fleeing or attempting to flee domestic violence. This training will be coordinated with the local DV provider. Currently, the Flint/Genesee CoC Emergency Transfer Plan for Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking Survivors, in accordance with the Violence Against Women Act (VAWA), allows survivors to be relocated to a different unit if they are victimized while in their current unit. 2. The Flint/Genesee CoC recognizes Housing First as a best practice. As such, all providers are required to respect a client's right to choose housing and services. A denial of a housing opportunity or specific services does not disqualify individuals and families from receiving services from other service providers. Survivor information is not entered into HMIS, but is captured in a comparable YWCA internal database. De-identified data is entered onto the prioritization list to ensure appropriate referrals and services are offered. Those referred to or from the DV provider can access homeless assistance resources available through the coordinated entry.

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

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:

- 1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and**
- 2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence.**
(limit 2,000 characters)

1. The Flint/Genesee CoC will partner with the YWCA of Greater Flint and the Michigan Coalition to End Domestic & Sexual Violence (MCEDSV) to provide

training and technical assistance. The YWCA of Greater Flint offers a range of training, presentations, activities and workshops that help build awareness of domestic violence issues as well as best practices on responding to the complex challenges faced by those who have experienced or are experiencing domestic violence, dating violence, sexual assault or stalking. MCEDSV offers a 32 hour training program entitled New Service Provider Training. New Service Provider Training is the premier training for staff new to working with survivors of domestic violence and sexual assault, and is essential for creating an informed and skilled workforce. Developed in 1996 by the current Michigan Coalition to End Domestic and Sexual Violence (MCEDSV) and the Michigan Domestic and Sexual Violence Prevention and Treatment Board (MDSVPTB), the training fulfills a critical need for high quality, standardized training for service providers. New Service Provider Training has received national acclaim as being one of the first standardized curriculum for domestic violence and sexual assault service providers. All training offered will be offered to any interested service provider including Coordinated Entry Staffing. 2. Staff responsible for coordinated entry shall receive training on protecting the safety and privacy of individuals who are fleeing or attempting to flee domestic violence.

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

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

As legally mandated, Victim Service Providers do not enter client level data into HMIS. All information is entered into an internal comparable database capable of producing reports such as APR and CAPER. On an annual basis the outcome level reports are reviewed at the Flint/Genesee CoC Meeting. The reporting review allows the CoC to assess special needs related to survivors.

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

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On
Flint Housing Commission	13.00%	Yes-Both	Yes-HCV
Michigan State Housing Development Authority	83.00%	Yes-HCV	Yes-HCV

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

Applicants must:

FY2019 CoC Application	Page 10	09/28/2019
------------------------	---------	------------

1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference—if the CoC only has one PHA within its geographic area, applicants may respond for one; or

2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

1. The Flint/Genesee County CoC has recently had meetings with the Flint Housing Commission and recently the Flint Housing Commission has attended the monthly CoC meetings. The Flint Housing Commission currently has a homeless preference for both Housing Choice Vouchers (HCV) and Public Housing. We have identified areas we can work together through coordinated entry to better serve those who are in need throughout Genesee County. The Michigan State Housing Development Authority (MSHDA) has a homeless preference for Housing Choice Voucher (HCV).

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

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

Yes

If "Yes" is selected above, describe the type of provider, for example, multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs. (limit 1,000 characters)

Currently the Flint/Genesee CoC partners with MSHDA for a moving on program. This program allows individuals and families who no longer need intensive case management to move out of PSH into other affordable housing. The Flint/Genesee CoC is also in the process of developing partnerships with LIHTC developments to provide additional affordable housing opportunities to individuals and families who are in need of affordable housing but do not have the need for intensive case management.

1C-5. Protecting Against Discrimination.

Applicants must describe the actions the CoC has taken to address all forms of discrimination, such as discrimination based on any protected classes under the Fair Housing Act and 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing. (limit 2,000 characters)

For discrimination, The Flint/Genesee County CoC utilizes our community partner Legal Services of Eastern Michigan's Fair Housing Center ("LSEMFHC"). They conduct fair housing training's, presentations, and outreach, in an effort to educate citizens and organizations about fair housing rights under the law. In early 2019, the Flint/Genesee County Continuum of Care gave LSEMFHC approval to ensure that each housing provider who is a member of the Continuum is fair housing compliant. In order to achieve that

goal their office is to first perform an extensive review of each housing provider's policies and procedures to ensure that there are no terms and conditions present that do not intentionally violate the fair housing act. If there are any terms and conditions that may seem to violate the fair housing act, their office will perform the necessary corrections needed to ensure compliance. After review of the policies and procedures for each housing provider, LSEMFHC will extend an invitation for fair housing training to each housing provider and their staff. In essence, the training will be three hours long and will feature a quiz, detailed PowerPoint presentation and handouts for note taking, with several hypothetical questions and group exercises throughout. At the conclusion of this extensive review their office will provide each housing provider that is a member of the Continuum with fair housing certification to show that they are presently compliant with fair housing laws. For the future, LSEMFHC will continue to provide fair housing training to each housing provider that is a member of the Continuum and their staff on an annual to semi-annual basis to ensure fair housing compliance due to staff turnover. The Flint/Genesee Continuum of Care will work with LSEMFHC to ensure that each housing provider who is a member of the Continuum takes part in this fair housing compliance process as part of its new anti-discrimination policy.

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

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

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

***1C-6. Criminalization of Homelessness.**

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

1. Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
2. Engaged/educated law enforcement:	<input type="checkbox"/>
3. Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
4. Implemented communitywide plans:	<input type="checkbox"/>
5. No strategies have been implemented:	<input type="checkbox"/>
6. Other:(limit 50 characters)	

	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

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

Applicants must:

1. demonstrate the coordinated entry system covers the entire CoC geographic area;
2. demonstrate the coordinated entry system reaches people who are least likely to apply for homelessness assistance in the absence of special outreach; and
3. demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner. (limit 2,000 characters)

1. The Coordinate Entry participating agencies together provide services that cover Flint /Genesee County geographic area. The Flint/Genesee County CoC Coordinated Entry System goal is to cover a broad spectrum of community organizations, faith-based organizations, shelters, VA providers, educational institutions, law enforcement, Foster Care, hospital, jails, and agencies with prevention funds. We have begun the process of engaging medical providers and law enforcement. 2. The Flint/Genesee County CoC County has multiple street outreach providers including Oakland Livingston Human Service Agency (OLHSA) the Supportive Services for Veteran Families (SSVF) grantee; Shelter of Flint the Projects for Assistance in Transition from Homelessness (PATH) grantee, Genesee County Youth Corporation (GCYC) the youth grantee, and Metro Community Development (MCD) the HUD Street Outreach grantee. 3. The Flint/Genesee CoC utilizes the VI-SPDAT, TAY-VI-SPDAT and the F-VI-SPDAT assessment to prioritize individual, youth and families experiencing homelessness with the greatest need. Today VI-SPDAT scores are given to the CE Specialist who places them on the list according to VI-SPDAT Score. She is the communicating to the agencies and they are providing feedback so that we can move our clients out of homelessness. The process is working it rewarding to know we are moving the most vulnerable clients to housing. This process has also helped us speak to the vitally important accuracy needed for data input. but we are definitely working on improving specifically the referral process. Moving forward Case conferencing is conducted bi-weekly to ensure those who have the greatest need are served in a timely manner with the services most appropriate for their needs. The assessment process provides options and recommendations that guide and inform client choices. The provider is responsible for navigating the system to get clients the appropriate help that is needed.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

1D-1. Discharge Planning Coordination.

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

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

1E. Local CoC Competition

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

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

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Did not reject or reduce any project
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

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

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

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	No

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

Applicants must describe:

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

1. From the Data collected we realized PSH beds should not decrease, the necessity of Rapid Rehousing role in prioritization and the necessity of bed for pregnant youth and more specifically youth parents.

2. During the review, rating and ranking process the Flint Genesee County CoC took into consideration the current and trending specific needs and vulnerabilities of our county. Prior to the rating and process we involved the community, we utilized data from HMIS, HDX 1.0 and 2.0, Stella, the 10 year plan, employment percentages, Coordinated Entry System policies and procedures and feedback from the HARA, interviews with current HUD agencies and support providers from a variety of organizations, health care plans, mental health, hospitals, police officers, case managers, substance abuse providers, our shelters, discussion and factored into the process. Subsequently the new projects were created through that process, TH-RRH housing for pregnant youth and youth parents, and DV supports. Also existing projects were confirmed in the process as well. The Fiscal Workgroup reviewed and established criteria to ensure vulnerabilities and needs were considered in moving the applicants forward in the competition process. When presented to the large body the community looked at projects that fell into tier two and wanted to make sure those clients would not lose their housing. Therefore, the community voted to change the rank order to move the new projects into tier2. Tier 1 and Tier 2 projects are equally important. We created time talking about our homeless response system design and improvements to make in this NOFA to enhance our system with strategic focus in mind.

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

Applicants must:

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

Process		including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	<input checked="" type="checkbox"/>	1. Email	<input checked="" type="checkbox"/>
2. Mail	<input type="checkbox"/>	2. Mail	<input type="checkbox"/>
3. Advertising in Local Newspaper(s)	<input type="checkbox"/>	3. Advertising in Local Newspaper(s)	<input type="checkbox"/>
4. Advertising on Radio or Television	<input type="checkbox"/>	4. Advertising on Radio or Television	<input type="checkbox"/>
5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>	5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>
6. Did Not Publicly Post Review and Ranking Process	<input type="checkbox"/>	6. Did Not Publicly Post CoC Consolidated Application	<input type="checkbox"/>

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

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

Reallocation: 7%

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

Applicants must:

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

1. For this NOFA we followed the NOFA process for reallocation. 2. The CoC approved the reallocation process. Through the spending report we realized the projections indicated the project would not be spent down, we begin discussing short and long term strategy in February 2019 and the long term was to reallocate. This involved meetings with the sub-recipient CEO and Director, the CoC Executive Committee and the entire CoC community. The community was aware of the strategy and approved long before the NOFA. 3. The allocation process was communicated during CoC monthly meetings and with the sub-recipient through on-on-one meetings. 4. The spending report was the leading indicator which includes red yellow and green visuals to indicate were projects that need focus, through sub recipient monitoring, APR against the application and interviews to name a few strategies used. Once identified it was brought to the CoC thought the Chair of the EC and strategies on how to

address. 5. The spending report was presented at the EC meetings/Fiscal Workgroup meeting the report project projects with red or yellow are discussed. we look at historical data because there are a few grants that the HUD grants are spent down later in the grant year, interview with the sub-recipient to determine if the projects will change or remain and projecting, if so then we move forward with communicating it will reallocated in the upcoming NOFA. Then in the process of the detailed explaining of the HUD rating and ranking tool more discussion around the reallocation. Reallocation discussions start early (1st quarter of the grant year.

DV Bonus

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

1F-1 DV Bonus Projects.

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

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

1. PH-RRH	<input type="checkbox"/>
2. Joint TH/RRH	<input type="checkbox"/>
3. SSO Coordinated Entry	<input checked="" type="checkbox"/>

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

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

Need Housing or Services	526.00
the CoC is Currently Serving	105.00

1F-2a. Local Need for DV Projects.**Applicants must describe:**

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

1. The Flint/Genesee CoC calculated the number of DV survivors needing housing or services by utilizing HMIS and the YWCA Comparable Database CAPER Report to calculate the number of DV survivors who received services thru the Emergency Shelter. 2. The number of DV survivors currently receiving services was calculated thru verbal reporting from the YWCA as well as HMIS reporting for all HMIS participating agencies throughout the CoC.

1F-3. : SSO-CE Project–CoC including an SSO-CE project for DV Bonus funding in their CoC Priority Listing must provide information in the chart below about the project applicant and respond to Question 1F-3a.

DUNS Number	836594150
Applicant Name	Metro Community Development

1F-3a. Addressing Coordinated Entry Inadequacy.**Applicants must describe how:**

- 1. the current Coordinated Entry is inadequate to address the needs of survivors of domestic violence, dating violence, or stalking; and**
 - 2. the proposed project addresses inadequacies identified in 1. above.**
- (limit 2,000 characters)**

1. The Flint/Genesee CoC Coordinated Entry System has identified services gaps that need to be closed to address the needs of survivors of domestic violence, dating violence, or stalking. The need for training on safety planning and trauma informed care has been identified and written into our Coordinated Entry policy and community partners are willing to assist, however additional funding is needed to execute. 2. Subsequently, the proposed Coordinated Entry expansion seeks would fund an additional training component to our current Coordinated Entry System.

The Flint/Genesee CoC will partner with the YWCA of Greater Flint and the Michigan Coalition to End Domestic & Sexual Violence (MCEDSV) to provide training and technical assistance. The YWCA of Greater Flint offers a range of training, presentations, activities and workshops that help build awareness of domestic violence issues as well as best practices on responding to the complex challenges faced by those who have experienced or are experiencing domestic violence, dating violence, sexual assault or stalking. MCEDSV offers a 32 hour training program entitled New Service Provider Training. New Service Provider Training is the premier training for staff new to working with survivors of domestic violence and sexual assault, and is essential for creating an informed and skilled workforce. Developed in 1996 by the current Michigan Coalition to End Domestic and Sexual Violence (MCEDSV) and the Michigan

Domestic and Sexual Violence Prevention and Treatment Board (MDSVPTB), the training fulfills a critical need for high quality, standardized training for service providers. New Service Provider Training has received national acclaim as being one of the first standardized curriculum for domestic violence and sexual assault service providers. All training offered will be offered to any interested service provider including Coordinated Entry Staffing.

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

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

Applicant Name	DUNS Number
This list contains no items	

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

2A-1. HMIS Vendor Identification. WellSky

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

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

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

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	431	27	335	82.92%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	44	0	44	100.00%
Rapid Re-Housing (RRH) beds	88	0	88	100.00%
Permanent Supportive Housing (PSH) beds	2,052	0	303	14.77%
Other Permanent Housing (OPH) beds	8	0	8	100.00%

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

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

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

1. Over the next 12 months the Flint/Genesee County CoC will work with the warming center to address any barriers that may be prohibitive to Catholic Charities' participation in HMIS. The Emergency Shelter (ES) HMIS Bed Coverage Rate is currently at 82.92% as the Seasonal Warming Center currently does not participate in HMIS. The Flint/Genesee CoC HMIS Program Coordinator, housed at Metro Community Development, will continue to work with the Warming Center to overcome barriers to ensure HMIS Participation is obtained within the next 12 months. This will include offering HMIS Training, Providing HMIS Licenses at no cost to organization and offering on-going technical support.

The Permanent Supportive Housing (PSH) HMIS Bed Coverage Rate is currently at 14.77%. This is the result of Housing Choice Vouchers (HCV) and Veterans Administration Supportive Housing (VASH) Vouchers being a part of the Permanent Supportive Housing projects listed on the Housing Inventory Count. If HCV and VASH had not been entered as PSH the HMIS Coverage Rate would have been 100%. The Flint/Genesee CoC HMIS Program Coordinator, housed at Metro Community Development, will work with VASH Case Managers to overcome barriers in HMIS Participation throughout the next 12 months. This will include offering HMIS Training, Providing HMIS Licenses at no cost to organizations and offering on-going technical support.

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

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

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

Applicants must enter the date the CoC 04/27/2019
submitted the 2019 Housing Inventory Count
(HIC) data into the Homelessness Data
Exchange (HDX).
(mm/dd/yyyy)

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

2B-1. PIT Count Date. 01/30/2019

Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).

2B-2. PIT Count Data–HDX Submission Date. 04/27/2019

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

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

Applicants must describe:

1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and

2. how the changes affected the CoC's sheltered PIT count results; or

3. state "Not Applicable" if there were no changes.

(limit 2,000 characters)

Not Applicable

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

Applicants must select whether the CoC added or removed emergency shelter, No

transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially-declared disaster, resulting in a change to the CoC's 2019 sheltered PIT count.

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

Applicants must describe:

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

Not Applicable

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

Applicants must:

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

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

Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:

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

1. The Flint/Genesee County CoC youth providers served on the Engagement Subcommittee (this subcommittee is assigned PIT Count) and were contributing in every stage from planning participation. 2. By participating in the Engagement Sub-Committee youth providers were able to assist in selecting locations most likely where youth are for the street outreach team and The Flint/Genesee CoC also collaborated with the Genesee Intermediate School District McKinney-Vento Liaison for identifying youth experiencing homelessness and their locations. 3. Youth were able to assist in coordinating youth volunteers experiencing homelessness to participate in the street count and create survey questions directly related to youth.

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

Applicants must describe the CoC's actions implemented in its 2019 PIT count to better count:

- 1. individuals and families experiencing chronic homelessness;**
- 2. families with children experiencing homelessness; and**
- 3. Veterans experiencing homelessness.**

(limit 2,000 characters)

1. For individuals and families The Flint/Genesee County CoC implemented pre-count efforts focused on identifying encampment locations as well as locations where vehicles being used as overnight sleeping accommodations may be located.

2. For families with children The Flint/Genesee County CoC implemented pre-count efforts focused on identifying encampment locations as well as locations where vehicles being used as overnight sleeping accommodations may be located.

2. For individuals and families The Flint/Genesee County CoC implemented pre-count efforts focused on identifying encampment locations as well as locations where vehicles being used as overnight sleeping accommodations may be located.

3.

The Flint/Genesee County CoC Engagement Sub-Committee is tasked with planning the local Point in Time Count (PIT). This Sub-Committee invites service providers including HUD-VASH, SSVF, mainstream benefit providers, American Legion, Veteran of Foreign Wars (VFW), VA Medical Center staff, Veteran Business Outreach Center (VBOC), Grant Per Diem (GPD) Service Providers, as well as emergency shelter provider, transitional housing providers, permanent supportive housing providers, and others to assist in planning the PIT.

Pre-Count efforts focused on identifying encampment locations as well as locations where vehicles being used as overnight sleeping accommodations may be located.

3A. Continuum of Care (CoC) System Performance

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

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

Applicants must:

Report the Number of First Time Homeless as Reported in HDX.	1,313
--	-------

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

Applicants must:

1. describe the process the CoC developed to identify risk factors the CoC uses to identify persons becoming homeless for the first time;
2. describe the CoC's strategy to address individuals and families at risk of becoming homeless; and
3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time. (limit 2,000 characters)

1. The Flint/Genesee CoC has identified several ways to identify persons becoming homeless for the first time or those with imminent risk of homelessness for the first time including education geared towards individuals and families who are facing eviction or utility shut off due to non-payment, education geared toward landlords for assistance with helping their tenants who may be behind in rental payments, and marketing of the Coordinated Entry System. 2. Currently the Flint/Genesee CoC is in the process of bringing an eviction diversion and homeless court program which will partner with the local judicial system, MDHHS, City Officials, Real Estate Companies, Legal Aid, etc. to ensure anyone who is being evicted or has misdemeanors is referred to the

Coordinated Entry System for prevention referrals. 3. The HMIS Program Coordinator and CoC Coordinator at Metro Community Development are responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.

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

Applicants must:

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

145

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

Applicants must:

1. describe the CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
 2. describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.
- (limit 2,000 characters)

1. The Flint/Genesee County CoC has adopted housing first and Rapid Re-Housing (RRH) strategies to reduce duration of homelessness. The Coordinated Entry System (CES) utilizes the VI-SPDAT, TAY-VI-SPDAT, and F-VI-SPDAT to identify and prioritize the most vulnerable clients for Permanent Supportive Housing (PSH) and 2. track RRH referrals for those with the longest lengths of time homeless. Chronically homeless persons have the highest priority in the CoC for services, literally homeless persons are then prioritized. Bi-Weekly case conferencing allows service providers to identify housing track as well as resource identification for those who are not currently housed. Currently in development is a landlord outreach program which will allow for securing units for homeless clients and facilitating prompt unit inspections so participants are able to move into housing within 30 days. 3. The CoC Coordinator and HMIS Program Coordinator at Metro Community Development is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	44%
2. Report the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	95%

3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.**Applicants must:**

1. describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;
2. provide the organization name or position title responsible for overseeing the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;
3. describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations; and
4. provide the organization name or position title responsible for overseeing the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.

(limit 2,000 characters)

1. Policies and Procedures throughout the Flint/Genesee CoC have been revised to ensure that all programs are providing low barrier, housing first services to participants experiencing homelessness throughout Genesee County.
2. The Coordinated Entry Specialist and HMIS Program Coordinator are jointly responsible for overseeing the CoC's strategies of increasing the rate at which individuals obtain permanent housing as well as the rate at which individuals and persons in families retain their permanent housing or exit to other permanent housing destinations.
3. Intensive case management, mental health services, connection to food and other mainstream benefits are available to those with an identified need. Outreach and Housing Case Managers visit participants with the intention of ensuring the retention of permanent housing.
4. The Coordinated Entry Specialist and HMIS Program Coordinator are jointly responsible for overseeing the CoC's strategies of increasing the rate at which individuals obtain permanent housing as well as the rate at which individuals and persons in families retain their permanent housing or exit to other permanent housing destinations.

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

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	13%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	4%

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

FY2019 CoC Application	Page 29	09/28/2019
------------------------	---------	------------

Applicants must:

- 1. describe the strategy the CoC has implemented to identify individuals and persons in families who return to homelessness;**
 - 2. describe the CoC's strategy to reduce the rate of additional returns to homelessness; and**
 - 3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families return to homelessness.**
- (limit 2,000 characters)**

1. The Flint/Genesee CoC data reflects a 4% return to homelessness within a 12 month period. Our implemented strategy consists of the housing case managers work with housing participants to increase their income and non-cash benefits. 2. Also provide additional wrap around services to ensure that participants do not return to homelessness upon their exit. Currently there are prevention programs offering financial assistance available throughout the CoC. The Flint/Genesee CoC is in the process of developing an eviction diversion program which will assist to reduce the return to homelessness rate. 3. The HMIS Program Coordinator, CE Specialist and CoC Coordinator housed at Metro Community Development is responsible for overseeing the CoC's strategy to reduce the return to homelessness rate.

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

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	5%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	44%

3A-5a. Increasing Employment Income.**Applicants must:**

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

1. This is one of our most urgent goals and area of improvement. The Flint/Genesee CoC strategy to increase employment income is by connecting participants to mainstream employment agencies including the local Michigan Works, temporary employment agencies. 2. working with churches that have

thriving employment programs, as well as private employment opportunities teaching clients how to sew and then employs them to make medical uniforms. Entrepreneurship by parenting with Factory Two a company for start up businesses for a nominal fee can rent a variety of business machinery and technology, and partnering with organizations such as Fountain House that provides jobs and supports for those with disabilities. 3. Currently in the planning phase the CoC recognizes the need for job fairs and as such will host a minimum of one job fair annually. The CoC will also partner with local universities who host frequent job fairs to ensure individuals experiencing homelessness are notified and invited to attend. 4. The HMIS Program Coordinator, CoC Coordinator, Outreach Coordinator, and Coordinated Entry Specialist are jointly responsible for overseeing the CoC's strategy to increase jobs and income from employment.

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

Applicants must:

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

1. the Flint Genesee County CoC has good numbers as it relates to non-employment percentages. The Flint/Genesee CoC's strategy to increase non-employment cash income includes assisting participants who qualify with the applications for the following: the SSI/SSDI Outreach, Access, and Recovery (SOAR), Supplemental Nutrition Assistance Program (SNAP) benefits, Medicaid/Medicare, Unemployment compensation, Temporary Assistance for Needy Families (TANF), and other mainstream benefits.

The HMIS Program Coordinator is responsible for for overseeing the CoC's strategy to increase non-employment cash income.

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

Applicants must describe how the CoC:

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

1. The Flint/Genesee County CoC assists participants increase employment by connecting participants to mainstream employment agencies including the local Michigan Works, temporary employment agencies, as well as private employment opportunities.
2. Our Ten Year Plan to End Homelessness and identifies employment as

critical to solving homelessness. During the rating and ranking process and looking at the increased employment income measurement the Flint/Genesee County CoC identified increasing employment needed to be remedied and had to be and is one of our top priorities. Employment is a predictor to sustainability of stability and has a significant impact on decreasing returns to homelessness. The employment agencies relationships exist on paper however the employment results do not reflect the improvement necessary which means an intervention is needed therefore we going enhance our approach. One of our Executive Committee Board members (has lived experience homelessness) has been championing this need in fact as Chair of the Engagement Committee he invited several of the employment private and public agencies to participate in the Project Community Connect event which is a resource fair for those experiencing homelessness or trying to avoid homelessness. The Flint/Genesee County has began to think outside the box and bring in a variety of employment agencies, including entrepreneurial opportunities.

Currently in the planning phase the CoC recognizes the need for job fairs and as such will host a minimum of one job fair annually. The CoC will also partner with local universities who host frequent job fairs to ensure individuals experiencing homelessness are notified and invited to attend.

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

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

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

3A-6. System Performance Measures 05/31/2019 Data-HDX Submission Date

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

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

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:
The FY 2019 CoC Application Detailed Instruction can be found at:
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>
The FY 2019 CoC Program Competition Notice of Funding Availability at:
<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

3B-1. Prioritizing Households with Children.

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

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

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

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

assistance ends; and

3. provide the organization name or position title responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of them becoming homeless.

(limit 2,000 characters)

The Flint/Genesee County CoC currently uses the Coordinated Entry Quality By Name List for prioritization. Prioritization allows for those who are the most vulnerable to receive services before those with less need. According to the Flint/Genesee County Coordinated Entry Policy & Procedures the priorities are as follows: Veterans, Unaccompanied Youth, Families with Children.

Wrap around services including case management is offered. During case management action plans are established that would align with meeting the goal of maintaining affordable housing. The action plan may include obtaining employment, increasing non-cash benefits such as Social Security or VA Disability, mental health treatment and various other steps participants may be in need of.

The HMIS Program Coordinator and Coordinated Entry Specialist are jointly responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of them becoming homeless.

3B-1b. Antidiscrimination Policies.

Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent housing (PSH and RRH)) within the CoC adhere to antidiscrimination policies by not denying admission to or separating any family members from other members of their family or caregivers based on any protected classes under the Fair Housing Act, and consistent with 24 CFR 5.105(a)(2) – Equal Access to HUD-Assisted or -Insured Housing.

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

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

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

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

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

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

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

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

Applicants must describe how the CoC increased availability of housing and services for:

1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and

2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.

(limit 3,000 characters)

The Flint/Genesee County CoC underwent a strategic planning process in 2018. The platform from which the CoC launched was the former 10-year plan. The committee first identified what was accomplished. Next they explored what was not completed and/or not addressed to the degree the community had hoped for originally. Those areas that remained areas of focus remained on the list of objectives in the design of the new strategic direction for the CoC. The process was chaired by the Executive Director of the Genesee County Youth Corporation (the CoC youth agency) and co-chaired by Shelter of Flint (the CoC women and children's shelter and lead agency for the HARA).

The membership unanimously endorsed the final project which identified focus

areas over the next ten years. In keeping with the 5-year plan developed by United State Interagency Council on Homelessness (USICH), the plan places a specific focus on strengthening the efforts in reaching youth experiencing homelessness throughout our community. The plan provides direction for the community to address the needs of pregnant and parenting youth who experience homelessness.

The proposed rapid rehousing project for youth addresses the two identified strategies above. GCYC has developed the RRHY project in collaboration with the CoC leadership to strengthen the opportunities for youth to become stably housed, increase their skills and lessen the recidivism of youth becoming

homeless again. In addition, the project is designed to support and house both young women and young men who have child(ren) at an early age. The twelve-unit RRHY will provide care to any youth experiencing homelessness, identified through the CoC coordinated entry system as eligible who meet the low barrier requirement of the project. The focus will be on youth of any gender expression with child(ren). However, single non-parenting youth remain eligible and will also be screened through the community VI-SPDAT in the coordinate entry system.

The RRHY designed by GCYC is a new youth focused project and not a modified project. However, in many ways it is an expansion of the existing 21-month transitional living project already in operation through GCYC. Youth seeking services throughout our community will now have more options to choose from. Those needing a supervised, congregate living option can be served through the existing project and those who are have child(ren) and not in need of 24 hour supervised supports can avail themselves of the new project.

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

Applicants must:

- 1. provide evidence the CoC uses to measure each of the strategies in question 3B-1d. to increase the availability of housing and services for youth experiencing homelessness;**
- 2. describe the measure(s) the CoC uses to calculate the effectiveness of both strategies in question 3B-1d.; and**
- 3. describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of both strategies in question 3B-1d. (limit 3,000 characters)**

The measure the CoC will utilize to determine the effectiveness of the availability of housing and services provided by GCYC will be the length of time that a determination of acceptance in the RRHY program by GCYC from the date the youth is first referred to the program. The program and the CoC will follow the policies of the Genesee County coordinated entry system to assure that the youth who are most in need based on the VI-SPDAT scores and assessment by a professional case manager are given priority for care in the RRHY. GCYC management staff, the HARA and the HMIS county administrator will track the measurements on a quarterly basis and meet to discuss the outcomes and if changes need to be made to increase the effectiveness.

The primary measure of the efficiency of rapid re-housing programs is the amount of time it takes to re-house the recipient of services. Efficiency will be measured by determining the length of time it takes from the date a youth is accepted in the RRHY program and the date they move into an apartment. HUD identifies the length of time to be 30 days or less. The measure created by GCYC will be in compliance with HUD standards and strive to re-house youth within 30 days.

These measures have been chosen for a variety of reasons. They are as follows: they are in compliance with HUD standards, they are similar to the outcome measures designed by those in the community providing RRH services to adults and families, they are in compliance with the approved policies within the coordinated entry system, and they are in line with best practices for other RRHY program across the state of Michigan.

3B-1e. Collaboration–Education Services.

Applicants must describe:

- 1. the formal partnerships with:**
 - a. youth education providers;**
 - b. McKinney-Vento LEA or SEA; and**
 - c. school districts; and**
- 2. how the CoC collaborates with:**
 - a. youth education providers;**
 - b. McKinney-Vento Local LEA or SEA; and**
 - c. school districts.**

(limit 2,000 characters)

While there are no formal agreements between the Flint/Genesee County CoC and educational providers or the McKinney-Vento Liaison there is continual collaboration. The McKinney-Vento Liaison at GISD is an active member of the Flint/Genesee County CoC. The local youth provider collaborates with school district and other youth education providers to provide training and marketing materials.

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

Applicants must describe policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.

(limit 2,000 characters)

All individuals and families who are experiencing homelessness who either have school aged children or attend school are referred to the McKinney-Vento Liaison at the Genesee Intermediate School District (GISD). The McKinney-Vento Liaison then works with the individual or family to determine best services for them.

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

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

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	No
Head Start	No	No
Early Head Start	No	No
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	No	No
Birth to 3 years	No	No
Tribal Home Visiting Program	No	No
Other: (limit 50 characters)		

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

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

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

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

3B-2b. Housing First for Veterans.

Applicants must indicate whether the CoC No
has sufficient resources to ensure each
veteran experiencing homelessness is
assisted to quickly move into permanent
housing using a Housing First approach.

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

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

1. People of different races or ethnicities are more likely to receive homeless assistance.	<input type="checkbox"/>
2. People of different races or ethnicities are less likely to receive homeless assistance.	<input checked="" type="checkbox"/>
3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.	<input checked="" type="checkbox"/>
5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
7. The CoC did not conduct a racial disparity assessment.	<input type="checkbox"/>

3B-3a. Addressing Racial Disparities.

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

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

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

Resources:

The FY 2019 CoC Application Detailed Instruction can be found at:

<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

The FY 2019 CoC Program Competition Notice of Funding Availability at:

<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

4A-1. Healthcare—Enrollment/Effective Utilization

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

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

4A-1a. Mainstream Benefits.

Applicants must:

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

health insurance;**4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and****5. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits.****(limit 2,000 characters)**

1. The Flint/Genesee County CoC keeps program staff up to date regarding mainstream resources through the Genesee County Community Collaborative (GCCC) which is a basic needs collaborative monthly meeting as well as the CoC monthly meetings sharing set aside on each agenda. Also numerous agencies in both collaborative bodies are MDHHS access and referral Navigation partners. 2. The information is disseminated via email to CoC and GCCC list serves, When there are major changes or shifts in any of the mainstream resources, the CEOs or Directors request time on agendas to make such announcements. During this meeting there are presentations on mainstream resources that are available, eligibility, and how to apply for these resources. Service providers, regardless of funding sources, are invited to attend the GCCC. Those presenting as well as other service providers provide flyers and applications to program representatives who are responsible for updating program staff at their respective agencies. 3. The Flint/Genesee County case managers play a pivotal role in assisting program participants. As new programs are being launched in the market, we disseminate to the CoC. The GCCC is in the process of launching a community calendar and resource information website Commonwealth, we will be sharing information there as well. 3. There are number of service providing agencies who are partners with Michigan Department of Health and Human Services (MDHHS) to provide assistance with the completion of health care applications including Medicaid, Medicare, State Emergency Relief (SER) and Food Stamps. Multiple agencies have staff who are also able to assist with the application for HealthCare.gov to ensure affordable health insurance. 4. The Flint/Genesee County CoC Coordinator and Coordinated Entry Specialist are responsible for overseeing the CoC's strategy for mainstream benefits employed by Metro Community Development.

4A-2. Lowering Barriers to Entry Data:**Applicants must report:**

1. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	11
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	11
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

4A-3. Street Outreach.**Applicants must:****1. describe the CoC's street outreach efforts, including the methods it**

uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;

2. state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;

3. describe how often the CoC conducts street outreach; and

4. describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)

The CoC collaborates with local providers, organizations and community residents to conduct street outreach that identifies persons experiencing unsheltered homelessness and connects them to provider shelters and services. Community residents are asked to notify local providers if they encounter individuals who appear to be chronically homeless. Local providers are asked to submit a homelessness verification request via paper or digital form to Metro Community Development. Metro Community Development sends Homelessness Verification requests to the street outreach team to investigate, complete the Homeless Verification and Coordinated Entry System Assessment (CESA), seek emergency housing (if feasible) and return completed forms to Metro Community Development (MCD). If emergency housing is found, the shelter provider will complete the VIS-PDAT, and HMIS entry. If emergency housing is not found, MCD completes the VI-SPDAT. MCD enters the Homeless Verification and CESA information into HMIS and upon VI-SPDAT completion, ensures the addition of individuals to the Byname and/or Quality Byname list(s). Street Outreach is available to cover 100% of Genesee County, the CoC's geographic area. The CoC Outreach Coordinator and Coordinated Entry Specialists are equipped with the documents necessary to connect persons experiencing unsheltered homelessness to the appropriate service providers, at the site of encounter. The Genesee County CoC has tailored its street outreach to persons experiencing homelessness who are least likely to request assistance by familiarizing its team with popular congregational sites for those experiencing homelessness, regularly visiting areas with significant blight and abandoned homes, consulting with community members and service providers to receive input on viewings of persons who appear to be experiencing unsheltered homelessness, and developing relationships with frequently visible, chronically homeless residents.

4A-4. RRH Beds as Reported in HIC.

Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2018 and 2019.

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	87	88	1

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

Applicants must indicate whether any new project application the CoC ranked and

FY2019 CoC Application	Page 42	09/28/2019
------------------------	---------	------------

submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting \$200,000 or more in funding for housing rehabilitation or new construction.

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

Applicants must indicate whether the CoC is requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other federal statutes.

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
FY 2019 CoC Competition Report (HDX Report)	Yes	--	09/26/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners' Preference.	No	PHA Housing Prefe...	09/28/2019
1C-4. PHA Administrative Plan Homeless Preference.	No	PHA Homeless Pref...	09/28/2019
1C-7. Centralized or Coordinated Assessment System.	Yes	CESA - CE Assessm...	09/28/2019
1E-1.Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.	Yes	NOFA NOTIFICATION...	09/28/2019
1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.	Yes	NOFA NOTIFICATION...	09/28/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	PUBLIC POSTING FY...	09/28/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	FY 2019 NOFA ANNO...	09/28/2019
1E-4.Public Posting–CoC-Approved Consolidated Application	Yes		
3A. Written Agreement with Local Education or Training Organization.	No		
3A. Written Agreement with State or Local Workforce Development Board.	No		
3B-3. Summary of Racial Disparity Assessment.	Yes	Racial Disparity ...	09/28/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No		
Other	No		
Other	No		

Applicant: Flint/Genesee County Continuum of Care

MI-505

Project: MI-505 CoC Registration FY2019

COC_REG_2019_170916

Other	No		
-------	----	--	--

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Housing Preference

Attachment Details

Document Description: PHA Homeless Preference

Attachment Details

Document Description: CESA - CE Assessment Tool

Attachment Details

Document Description: NOFA NOTIFICATION 15 DAY ACCEPTED

Attachment Details

Document Description: NOFA NOTIFICATION 15 DAY

REJECTED/REDUCED

Attachment Details

Document Description: PUBLIC POSTING FY 2019 NOFA

Attachment Details

Document Description: FY 2019 NOFA ANNOUNCEMENT

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Racial Disparity Assessment

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/16/2019
1B. Engagement	09/28/2019
1C. Coordination	09/28/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/28/2019
1F. DV Bonus	09/28/2019
2A. HMIS Implementation	09/28/2019
2B. PIT Count	09/28/2019
3A. System Performance	09/28/2019
3B. Performance and Strategic Planning	09/28/2019
4A. Mainstream Benefits and Additional Policies	09/28/2019
4B. Attachments	Please Complete

FY2019 CoC Application	Page 49	09/28/2019
------------------------	---------	------------

Submission Summary

No Input Required

2019 HDX Competition Report

PIT Count Data for MI-505 - Flint/Genesee County Coc

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	377	420	438	450
Emergency Shelter Total	227	233	321	365
Safe Haven Total	0	0	0	0
Transitional Housing Total	63	62	17	37
Total Sheltered Count	290	295	338	402
Total Unsheltered Count	87	125	100	48

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	24	42	30	51
Sheltered Count of Chronically Homeless Persons	16	23	21	41
Unsheltered Count of Chronically Homeless Persons	8	19	9	10

2019 HDX Competition Report

PIT Count Data for MI-505 - Flint/Genesee County Coc

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	45	47	45	38
Sheltered Count of Homeless Households with Children	43	43	41	38
Unsheltered Count of Homeless Households with Children	2	4	4	0

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	74	20	27	17	16
Sheltered Count of Homeless Veterans	25	16	21	12	13
Unsheltered Count of Homeless Veterans	49	4	6	5	3

2019 HDX Competition Report

HIC Data for MI-505 - Flint/Genesee County CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	323	27	296	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	44	0	44	100.00%
Rapid Re-Housing (RRH) Beds	88	0	88	100.00%
Permanent Supportive Housing (PSH) Beds	2052	0	303	14.77%
Other Permanent Housing (OPH) Beds	8	0	8	100.00%
Total Beds	2,515	27	739	29.70%

2019 HDX Competition Report

HIC Data for MI-505 - Flint/Genesee County CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	29	56	29	0

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

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC	1	30	23	23

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC	3	111	87	88

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Summary Report for MI-505 - Flint/Genesee County Coc

Measure 1: Length of Time Persons Remain Homeless

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

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

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

	Universe (Persons)		Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference	
1.1. Persons in ES and SH	1613	1146	39	136	97	21	56	35	
1.2. Persons in ES, SH, and TH	1684	1184	54	145	91	25	63	38	

b. This measure is based on data element 3.17.

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

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1597	1157	154	345	191	52	175	123
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1693	1195	169	350	181	59	181	122

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	5	2	40%	0	0%	1	20%	3	60%
Exit was from ES	181	30	17%	13	7%	15	8%	58	32%
Exit was from TH	50	12	24%	2	4%	1	2%	15	30%
Exit was from SH	0	0		0		0		0	
Exit was from PH	195	14	7%	2	1%	7	4%	23	12%
TOTAL Returns to Homelessness	431	58	13%	17	4%	24	6%	99	23%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

9/26/2019 4:34:53 PM

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	420	438	18
Emergency Shelter Total	233	321	88
Safe Haven Total	0	0	0
Transitional Housing Total	62	17	-45
Total Sheltered Count	295	338	43
Unsheltered Count	125	100	-25

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	1708	1736	28
Emergency Shelter Total	1612	1669	57
Safe Haven Total	0	0	0
Transitional Housing Total	136	97	-39

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	61	114	53
Number of adults with increased earned income	0	5	5
Percentage of adults who increased earned income	0%	4%	4%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	61	114	53
Number of adults with increased non-employment cash income	0	25	25
Percentage of adults who increased non-employment cash income	0%	22%	22%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	61	114	53
Number of adults with increased total income	0	26	26
Percentage of adults who increased total income	0%	23%	23%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	0	39	39
Number of adults who exited with increased earned income	0	2	2
Percentage of adults who increased earned income		5%	

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	0	39	39
Number of adults who exited with increased non-employment cash income	0	17	17
Percentage of adults who increased non-employment cash income		44%	

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	0	39	39
Number of adults who exited with increased total income	0	19	19
Percentage of adults who increased total income		49%	

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1614	1652	38
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.	406	339	-67
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)	1208	1313	105

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1720	1789	69
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.	435	362	-73
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.)	1285	1427	142

2019 HDX Competition Report

FY2018 - 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 FY2018 (Oct 1, 2017 - Sept 30, 2018) reporting period.

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	319	216	-103
Of persons above, those who exited to temporary & some institutional destinations	26	14	-12
Of the persons above, those who exited to permanent housing destinations	14	6	-8
% Successful exits	13%	9%	-4%

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

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1575	1466	-109
Of the persons above, those who exited to permanent housing destinations	598	649	51
% Successful exits	38%	44%	6%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	390	287	-103
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	375	272	-103
% Successful exits/retention	96%	95%	-1%

2019 HDX Competition Report

FY2018 - SysPM Data Quality

MI-505 - Flint/Genesee County Coc

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

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

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

2019 HDX Competition Report

FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	231	197	207	234	133	83	67	39	291	1821	2114	2074		3	111	87				
2. Number of HMIS Beds	231	183	193	226	133	83	67	39	291	366	365	325		3	111	87				
3. HMIS Participation Rate from HIC (%)	100.00	92.89	93.24	96.58	100.00	100.00	100.00	100.00	100.00	20.10	17.27	15.67		100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	1399	1645	1648	1681	247	235	136	97	466	464	412	395	209	185	160	149	92	72	328	321
5. Total Leavers (HMIS)	1263	1534	1563	1468	170	169	123	108	148	105	150	94	162	150	121	100	91	62	322	314
6. Destination of Don't Know, Refused, or Missing (HMIS)	2	2	12	24	8	2	18	8	7	0	1	0	10	12	13	10	0	0	0	0
7. Destination Error Rate (%)	0.16	0.13	0.77	1.63	4.71	1.18	14.63	7.41	4.73	0.00	0.67	0.00	6.17	8.00	10.74	10.00	0.00	0.00	0.00	0.00

2019 HDX Competition Report

Submission and Count Dates for MI-505 - Flint/Genesee County CoC

Date of PIT Count

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

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/27/2019	Yes
2019 HIC Count Submittal Date	4/27/2019	Yes
2018 System PM Submittal Date	5/31/2019	Yes

C. Local Preferences and Ranking

The Housing Quality and Work Responsibility Act of 1998 permanently eliminated the Federal preference requirement; however, PHAs may adopt the Federal preference language and criteria as their local and/or ranking preferences.

The PHA will select and house applicants in accordance with the following preferences and priorities, in the order listed:

1. Limitations on Admission
 - a) Types of developments and units available;
 - b) Occupancy Standards (limitation on the minimum and maximum number of household members permitted to live in dwelling units of specified sizes).
2. Selection Preferences, as follows, in the order listed.

	Preference	Ranking or Point Value
1	Applicant families whose head of household, or spouse is employed or has a bona fide offer for employment, (this preference will not be based on the amount of earned income and the PHA may not prefer higher income families over families with lower incomes to occupy a development or unit except to the extent that the PHA has identified the need to implement economic de-concentration and income targeting). Families whose head of household or spouse is sixty-two (62) years of age or disabled automatically receive the maximum level of local preference	2
2	Victims of domestic violence (spousal/child abuse)	1
3	Youth maxing out of the Foster Care System	2
4	Involuntary Displacement	1
5	Veterans	2
6	<p>Homeless</p> <p>For families experiencing homelessness, the PHA will use the PIH homeless definitions use for IMS/PIC reporting as follows:</p> <p>Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none">• An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or	3

	<ul style="list-style-type: none"> • An individual or family living in a supervised publicly or privately-operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state or local government programs for low-income individuals); or • An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution; <p>Category 4: Any individual or family who:</p> <ul style="list-style-type: none"> • Is <i>fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions</i> that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; and • Has no other residence; and • Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing 	
--	---	--

3. Date and Time of Application (in each of the above circumstances)

Applicants who meet all the eligibility requirements and who qualify for a preference will be assisted first according to the date and time of application. After all applicants with verified preferences are assisted, the PHA will then contact applicant families who are on the waiting list, according to date and time of application, and bedroom size needed.

4. Denial of Local Preference(s) claim

Applicants must provide appropriate documentation to substantiate their claim for a local preference. Families who cannot provide the appropriate documentation to the agency will be notified in writing that they do not qualify for a local preference.

The PHA will provide a written notice if an applicant does not qualify for a preference. This notice will contain a brief statement of the reasons for the determination and a statement that the applicant has the right to meet with the PHA's designee to review the determination. This request must be received by the PHA no later than five (5) calendar days from the postmarked date of the notice.

C. Local Preferences and Ranking

The Housing Quality and Work Responsibility Act of 1998 permanently eliminated the Federal preference requirement; however, PHAs may adopt the Federal preference language and criteria as their local and/or ranking preferences.

The PHA will select and house applicants in accordance with the following preferences and priorities, in the order listed:

1. Limitations on Admission
 - a) Types of developments and units available;
 - b) Occupancy Standards (limitation on the minimum and maximum number of household members permitted to live in dwelling units of specified sizes).
2. Selection Preferences, as follows, in the order listed.

	Preference	Ranking or Point Value
1	Applicant families whose head of household, or spouse is employed or has a bona fide offer for employment, (this preference will not be based on the amount of earned income and the PHA may not prefer higher income families over families with lower incomes to occupy a development or unit except to the extent that the PHA has identified the need to implement economic de-concentration and income targeting). Families whose head of household or spouse is sixty-two (62) years of age or disabled automatically receive the maximum level of local preference	2
2	Victims of domestic violence (spousal/child abuse)	1
3	Youth maxing out of the Foster Care System	2
4	Involuntary Displacement	1
5	Veterans	2
6	<p>Homeless</p> <p>For families experiencing homelessness, the PHA will use the PIH homeless definitions use for IMS/PIC reporting as follows:</p> <p>Category 1: An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; or 	3

	<ul style="list-style-type: none"> • An individual or family living in a supervised publicly or privately-operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state or local government programs for low-income individuals); or • An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution; <p>Category 4: Any individual or family who:</p> <ul style="list-style-type: none"> • Is <i>fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions</i> that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; and • Has no other residence; and • Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing 	
--	---	--

3. Date and Time of Application (in each of the above circumstances)

Applicants who meet all the eligibility requirements and who qualify for a preference will be assisted first according to the date and time of application. After all applicants with verified preferences are assisted, the PHA will then contact applicant families who are on the waiting list, according to date and time of application, and bedroom size needed.

4. Denial of Local Preference(s) claim

Applicants must provide appropriate documentation to substantiate their claim for a local preference. Families who cannot provide the appropriate documentation to the agency will be notified in writing that they do not qualify for a local preference.

The PHA will provide a written notice if an applicant does not qualify for a preference. This notice will contain a brief statement of the reasons for the determination and a statement that the applicant has the right to meet with the PHA's designee to review the determination. This request must be received by the PHA no later than five (5) calendar days from the postmarked date of the notice.

Agency/Project: _____ Client Name: _____ Email: _____ Phone: _____	Date: _____	Was VISPDAT completed? <input type="checkbox"/> Yes. Date: _____ Score: _____ <input type="checkbox"/> No. <input type="checkbox"/> Refused.
--	--------------------	--

_____ # Adults (Age 18 and Older) _____ # Children (Age 17 and Under) (use additional sheets for families of 3+)	Employed? <input type="checkbox"/> Yes. <input type="checkbox"/> No Do you have health insurance? <input type="checkbox"/> Yes. <input type="checkbox"/> No
--	--

Questions:	Head of Household (HoH)	Family Member 1 (Additional Family on Back)	Current Living Situation:
First and Last Name:			<input type="checkbox"/> Literally Homeless (In a shelter, vehicle, abandoned house, outside, etc)
Relationship to Head of Household:	SELF	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Non-Married Partner <input type="checkbox"/> Other: _____	<input type="checkbox"/> Institutional Setting (Foster care, group or nursing home, jail, psychiatric or substance treatment, etc.) *IF INSTITUTIONAL: Were you homeless the night before your stay? <input type="checkbox"/> Yes <input type="checkbox"/> No
Social Security Number:	_____ - _____ - _____ <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	_____ - _____ - _____ <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	<input type="checkbox"/> Transitional or Permanent Housing (house, apartment, with a friend or family member, halfway house, voucher-paid housing, etc.)
Are you a Veteran of the US Armed Forces?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Fleeing or attempting to flee domestic violence
Date of birth: MM/DD/YYYY	____/____/____	____/____/____	<input type="checkbox"/> Other – Please explain: _____
Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF) <input type="checkbox"/> Trans Male (FTM) <input type="checkbox"/> Gender Non-Conforming <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF) <input type="checkbox"/> Trans Male (FTM) <input type="checkbox"/> Gender Non-Conforming <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused	<input type="checkbox"/> I have a homeless pet with me needing care Length of stay in current living situation: <input type="checkbox"/> Less than 1 year <input type="checkbox"/> More than 1 year Approximate Date Homelessness Started: _____
Race (select all that apply):	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client Refused	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client Refused	Total number of months literally homeless in the past 3 years: <input type="checkbox"/> One month (this is the first month) <input type="checkbox"/> 2-11 months (____ # of months) <input type="checkbox"/> 12 months or more <input type="checkbox"/> N/A (not homeless)
Ethnicity:	<input type="checkbox"/> Hispanic-Latino <input type="checkbox"/> Non Hispanic Latino	<input type="checkbox"/> Hispanic-Latino <input type="checkbox"/> Non Hispanic Latino	Number of times in the past 3 years becoming literally homeless after a safe/stable living situation (including today)? <input type="checkbox"/> One Time <input type="checkbox"/> Three Times <input type="checkbox"/> Two Times <input type="checkbox"/> Four or More Times
Do you have a disabling condition?	<input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> No <input type="checkbox"/> Refused	<input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> No <input type="checkbox"/> Refused	

City of Residence: _____ Zip Code of Last Permanent Address: _____

County of Residence: _____

ADMINISTRATION USE ONLY:

- | | |
|--|---|
| <input type="checkbox"/> Category 1 – Literally Homeless | <input type="checkbox"/> Category 4 – Fleeing Domestic Violence |
| <input type="checkbox"/> Category 2 – Imminent Risk | <input type="checkbox"/> At-risk of Homelessness |
| <input type="checkbox"/> Category 3 – Homeless (other statutes). | <input type="checkbox"/> Stably Housed |

Genesee County Coordinated Entry System Assessment (CESA) – Page 2 for family members of HoH on Page One

Questions:	Family Member 2	Family Member 3	Family Member 4	Family Member 5
First and Last Name:				
Relationship to Head of Household:	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Non-Married Partner <input type="checkbox"/> Other: _____	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Non-Married Partner <input type="checkbox"/> Other: _____	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Non-Married Partner <input type="checkbox"/> Other: _____	<input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Non-Married Partner <input type="checkbox"/> Other: _____
Social Security Number:	_____ - _____ - _____ <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	_____ - _____ - _____ <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	_____ - _____ - _____ <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	_____ - _____ - _____ <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused
Are you a Veteran of the US Armed Forces?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of birth: MM/DD/YYYY	____/____/____	____/____/____	____/____/____	____/____/____
Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF) <input type="checkbox"/> Trans Male (FTM) <input type="checkbox"/> Gender Non-Conforming <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF) <input type="checkbox"/> Trans Male (FTM) <input type="checkbox"/> Gender Non-Conforming <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF) <input type="checkbox"/> Trans Male (FTM) <input type="checkbox"/> Gender Non-Conforming <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female (MTF) <input type="checkbox"/> Trans Male (FTM) <input type="checkbox"/> Gender Non-Conforming <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused
Race (select all that apply):	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client Refused	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client Refused	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client Refused	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client Refused
Ethnicity:	<input type="checkbox"/> Hispanic-Latino <input type="checkbox"/> Non Hispanic Latino	<input type="checkbox"/> Hispanic-Latino <input type="checkbox"/> Non Hispanic Latino	<input type="checkbox"/> Hispanic-Latino <input type="checkbox"/> Non Hispanic Latino	<input type="checkbox"/> Hispanic-Latino <input type="checkbox"/> Non Hispanic Latino
Do you have a disabling condition?	<input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> No <input type="checkbox"/> Refused	<input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> No <input type="checkbox"/> Refused	<input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> No <input type="checkbox"/> Refused	<input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> No <input type="checkbox"/> Refused

Any special notes for referral agency:

Check the box next to each agency you are giving permission to this program to share this information with.

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Metro Community Development | <input type="checkbox"/> Genesee County Youth Corporation | <input type="checkbox"/> Treatment & Training Innovations | <input type="checkbox"/> Family Promise |
| <input type="checkbox"/> Hamilton Health Network | <input type="checkbox"/> Oakland Livingston Human Services Agency | <input type="checkbox"/> Flint Odyssey House, Inc. | <input type="checkbox"/> Shelter of Flint |
| <input type="checkbox"/> Carriage Town Ministries | <input type="checkbox"/> Young Women Christian Association | <input type="checkbox"/> Genesee Health Systems | <input type="checkbox"/> Salvation Army |
| <input type="checkbox"/> My Brother's Keeper | <input type="checkbox"/> Genesee Intermediate School District | <input type="checkbox"/> Wellness Services | |
| <input type="checkbox"/> Genesee County Community Action Resource Department <input type="checkbox"/> Legal Services of Eastern Michigan <input type="checkbox"/> Catholic Charities | | | |

IF YOU ARE OPEN TO SHARING THE INFORMATION ON THIS FORM WITH ALL OF THEM CHECK HERE - ☐

Release of Information: I give permission for the above agency to share the information on this document in order to coordinate the most efficient referrals to meet my needs and those of my household. They may share the information with the partners marked above.

Signature: _____

Date: _____

Administration

Interviewer's Name _____	Agency _____	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____	Survey Location _____

Opening Script

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

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

Basic Information

First Name _____	Nickname _____	Last Name _____
In what language do you feel best able to express yourself? _____		
Date of Birth DD/MM/YYYY ____/____/____	Age _____	Social Security Number _____ Consent to participate <input type="radio"/> Yes <input type="radio"/> No

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

SCORE:

0

A. History of Housing and Homelessness

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

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

☐ **Refused**

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

SCORE:

0

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

___ Years

☐ Refused

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

☐ Refused

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

SCORE:

0

B. Risks

4. In the past six months, how many times have you...

a) Received health care at an emergency department/room?

___ ☐ Refused

b) Taken an ambulance to the hospital?

___ ☐ Refused

c) Been hospitalized as an inpatient?

___ ☐ Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?

___ ☐ Refused

e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along?

___ ☐ Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between?

___ ☐ Refused

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

SCORE:

0

5. Have you been attacked or beaten up since you've become homeless?

☐ Y ☐ N ☐ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?

☐ Y ☐ N ☐ Refused

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

SCORE:

0

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Y ☐ N ☐ Refused

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

SCORE:

0

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

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

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

SCORE:

0

C. Socialization & Daily Functioning

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

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

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

SCORE:

0

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

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

SCORE:

0

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

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

SCORE:

0

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

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

SCORE:

0

D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? ☐ Y ☐ N ☐ Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused
17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? ☐ Y ☐ N ☐ Refused
18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused
19. When you are sick or not feeling well, do you avoid getting help? ☐ Y ☐ N ☐ Refused
20. *FOR FEMALE RESPONDENTS ONLY:* Are you currently pregnant? ☐ Y ☐ N ☐ N/A or Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

0

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? ☐ Y ☐ N ☐ Refused
22. Will drinking or drug use make it difficult for you to stay housed or afford your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

0

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:
- a) A mental health issue or concern? ☐ Y ☐ N ☐ Refused
- b) A past head injury? ☐ Y ☐ N ☐ Refused
- c) A learning disability, developmental disability, or other impairment? ☐ Y ☐ N ☐ Refused
24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

0

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

SCORE:

0

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

SINGLE ADULTS

AMERICAN VERSION 2.01

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☐ Y ☐ N ☐ Refused

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

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

SCORE:

0

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

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

SCORE:

0

Scoring Summary

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

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ____ : ____ or Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

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

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

Administration

Interviewer's Name	Agency	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____:____	Survey Location _____

Opening Script

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

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

Basic Information

PARENT 1	First Name	Nickname	Last Name
	In what language do you feel best able to express yourself? _____		
	Date of Birth DD/MM/YYYY ____/____/____	Age	Social Security Number
			Consent to participate <input type="radio"/> Yes <input type="radio"/> No
PARENT 2	First Name	Nickname	Last Name
	In what language do you feel best able to express yourself? _____		
	Date of Birth DD/MM/YYYY ____/____/____	Age	Social Security Number
			Consent to participate <input type="radio"/> Yes <input type="radio"/> No
IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1. <div style="float: right;"> SCORE: <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div> </div>			

Children

1. How many children under the age of 18 are currently with you? _____ ☐ Refused
2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? _____ ☐ Refused
3. IF HOUSEHOLD INCLUDES A FEMALE: Is any member of the family currently pregnant? ☒ Y ☐ N ☐ Refused
4. Please provide a list of children's names and ages:

First Name	Last Name	Age	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.

SCORE:

IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.

0

A. History of Housing and Homelessness

5. Where do you and your family sleep most frequently? (check one)
 - ☒ Shelters
 - ☐ Transitional Housing
 - ☐ Safe Haven
 - ☐ Outdoors
 - ☐ Other (specify): _____
 - ☐ Refused

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

SCORE:

0

6. How long has it been since you and your family lived in permanent stable housing? _____ Years ☐ Refused
7. In the last three years, how many times have you and your family been homeless? _____ ☐ Refused

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

SCORE:

0

B. Risks

8. In the past six months, how many times have you or anyone in your family...

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

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

SCORE:

0

- 9. Have you or anyone in your family been attacked or beaten up since they've become homeless? ☒ Y ☐ N ☐ Refused
- 10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year? ☒ Y ☐ N ☐ Refused

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

SCORE:

0

- 11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☒ Y ☐ N ☐ Refused

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

SCORE:

0

- 12. Does anybody force or trick you or anyone in your family to do things that you do not want to do? ☒ Y ☐ N ☐ Refused
- 13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that? ☒ Y ☐ N ☐ Refused

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

SCORE:

0

C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money? ☐ Y ☐ N ☐ Refused

15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

0

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled? ☐ Y ☐ N ☐ Refused

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

SCORE:

0

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☐ N ☐ Refused

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

SCORE:

0

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted? ☐ Y ☐ N ☐ Refused

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

SCORE:

0

D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family? ☐ Y ☐ N ☐ Refused

20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused

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

22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused

23. When someone in your family is sick or not feeling well, does your family avoid getting medical help? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

0

VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past? ☐ Y ☐ N ☐ Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

0

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? ☐ Y ☐ N ☐ Refused

b) A past head injury? ☐ Y ☐ N ☐ Refused

c) A learning disability, developmental disability, or other impairment? ☐ Y ☐ N ☐ Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

0

28. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, and experience with problematic substance use? ☐ Y ☐ N ☐ N/A or Refused

IF "YES", SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

0

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking? ☐ Y ☐ N ☐ Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication? ☐ Y ☐ N ☐ Refused

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

SCORE:

0

31. YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced? ☐ Y ☐ N ☐ Refused

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

SCORE:

0

E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days? ☐ Y ☐ N ☐ Refused

33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **FAMILY LEGAL ISSUES**.

SCORE:

0

34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation? ☐ Y ☐ N ☐ Refused

35. Has any child in the family experienced abuse or trauma in the last 180 days? ☐ Y ☐ N ☐ Refused

36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week? ☐ Y ☐ N ☐ N/A or Refused

IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR **NEEDS OF CHILDREN**.

SCORE:

0

37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that? ☐ Y ☐ N ☐ Refused

38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **FAMILY STABILITY**.

SCORE:

0

39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that? ☐ Y ☐ N ☐ Refused

40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...

a) 3 or more hours per day for children aged 13 or older? ☐ Y ☐ N ☐ Refused

b) 2 or more hours per day for children aged 12 or younger? ☐ Y ☐ N ☐ Refused

41. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that? ☐ Y ☐ N ☐ N/A or Refused

IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR **PARENTAL ENGAGEMENT**.

SCORE:

0

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /2	Score: Recommendation: 0-3 no housing intervention 4-8 an assessment for Rapid Re-Housing 9+ an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
E. FAMILY UNIT	0 /4	
GRAND TOTAL:	0 /22	

Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ____ : ____ or Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

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

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

Administration

Interviewer's Name _____	Agency _____	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
Survey Date DD/MM/YYYY ____/____/____	Survey Time ____:____	Survey Location _____

Opening Script

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

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

Basic Information

First Name _____	Nickname _____	Last Name _____
In what language do you feel best able to express yourself? _____		
Date of Birth DD/MM/YYYY ____/____/____	Age _____	Social Security Number _____
		Consent to participate <input type="radio"/> Yes <input type="radio"/> No

IF THE PERSON IS 17 YEARS OF AGE OR LESS, THEN SCORE 1.

SCORE:

1

A. History of Housing and Homelessness

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

- ☐ Shelters ☐ Couch surfing ☐ Other (specify): _____
☐ Transitional Housing ☐ Outdoors
☐ Safe Haven ☐ Refused

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

SCORE:

0

2. How long has it been since you lived in permanent stable housing? _____ Years ☐ Refused

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

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

SCORE:

0

B. Risks

4. In the past six months, how many times have you...

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

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

SCORE:

0

5. Have you been attacked or beaten up since you've become homeless? ☐ Y ☐ N ☐ Refused

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

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

SCORE:

0

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Y ☐ N ☐ Refused

8. Were you ever incarcerated when younger than age 18? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **LEGAL ISSUES**.

SCORE:

0

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

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

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

SCORE:

0

C. Socialization & Daily Functioning

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

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

IF "YES" TO QUESTION 11 OR "NO" TO QUESTION 12, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

0

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

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

SCORE:

0

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

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

SCORE:

0

15. Is your current lack of stable housing...

- a) Because you ran away from your family home, a group home or a foster home? ☐ Y ☐ N ☐ Refused
- b) Because of a difference in religious or cultural beliefs from your parents, guardians or caregivers? ☐ Y ☐ N ☐ Refused
- c) Because your family or friends caused you to become homeless? ☐ Y ☐ N ☐ Refused
- d) Because of conflicts around gender identity or sexual orientation? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:

0

- e) Because of violence at home between family members? ☐ Y ☐ N ☐ Refused
- f) Because of an unhealthy or abusive relationship, either at home or elsewhere? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **ABUSE/TRAUMA**.

SCORE:

0

D. Wellness

- 16. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? ☐ Y ☐ N ☐ Refused
- 17. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused
- 18. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you? ☐ Y ☐ N ☐ Refused
- 19. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused
- 20. When you are sick or not feeling well, do you avoid getting medical help? ☐ Y ☐ N ☐ Refused
- 21. Are you currently pregnant, have you ever been pregnant, or have you ever gotten someone pregnant? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

0

NEXT STEP TOOL FOR HOMELESS YOUTH

SINGLE YOUTH

AMERICAN VERSION 1.0

22. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? ☒ Y ☐ N ☐ Refused
23. Will drinking or drug use make it difficult for you to stay housed or afford your housing? ☒ Y ☐ N ☐ Refused
24. If you've ever used marijuana, did you ever try it at age 12 or younger? ☒ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

0

25. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

- a) A mental health issue or concern? ☒ Y ☐ N ☐ Refused
- b) A past head injury? ☒ Y ☐ N ☐ Refused
- c) A learning disability, developmental disability, or other impairment? ☒ Y ☐ N ☐ Refused

26. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help? ☒ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

0

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

SCORE:

0

27. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking? ☒ Y ☐ N ☐ Refused
28. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? ☒ Y ☐ N ☐ Refused

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

SCORE:

0

Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	1 /1	Score: Recommendation: 0-3: no moderate or high intensity services be provided at this time 4-7: assessment for time-limited supports with moderate intensity 8+: assessment for long-term housing with high service intensity
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /5	
D. WELLNESS	0 /5	
GRAND TOTAL:	1 /17	

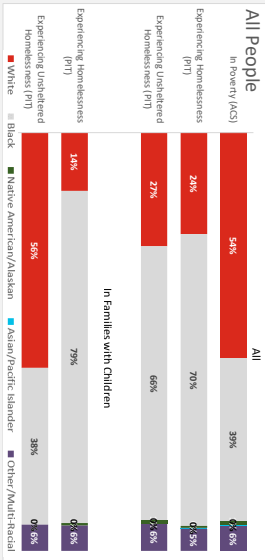
Coc Racial Equity Analysis Tool

Homelessness and poverty counts at the Coc and State level

Select your Coc

MI-505 Flint/Genesee County Coc

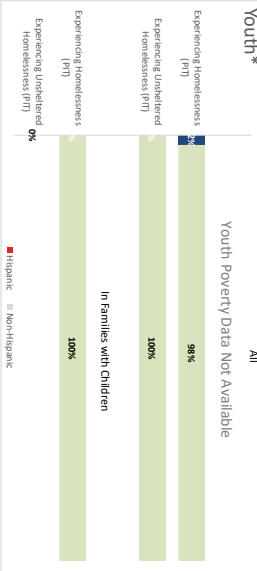
Distribution of Race



*Youth experiencing homelessness is limited to unaccompanied and parenting youth persons under 25.

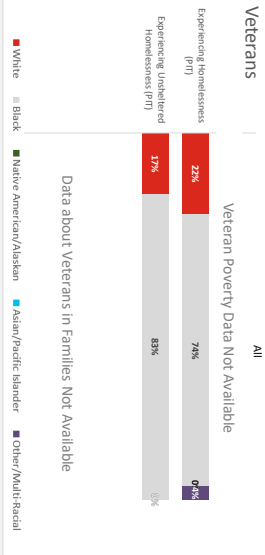


Youth *



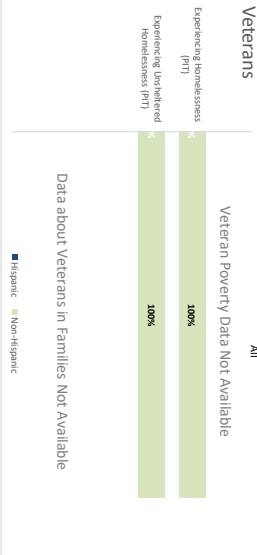
*Youth experiencing homelessness is limited to unaccompanied and parenting youth persons under 25.

Veterans



Data about Veterans in Families Not Available

Veterans



Data about Veterans in Families Not Available

Coc Data

Race and Ethnicity	All (ACS) ¹				In Poverty (ACS) ¹				Experiencing Homelessness (PRT) ²				Experiencing Sheltered Homelessness (PRT) ²				Experiencing Unsheltered Homelessness (PRT) ²			
	All		In Families with Children		All		In Families with Children		All		In Families with Children		All		In Families with Children		All		In Families with Children	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
All People	415,874		339,542		85,696		65,133		420		165		295		149		125		16	
Race																				
White	310,956	75%	258,947	76%	46,249	54%	35,151	54%	102	24%	23	14%	68	23%	14	9%	34	27%	9	56%
Black	84,922	20%	67,610	20%	33,426	39%	25,405	39%	131	79%	211	72%	125	84%	82	66%	6	38%	6	38%
Native American/Alaskan	1,819	0%	1,653	0%	633	1%	481	1%	2	0%	1	1%	1	0%	1	1%	0	0%	0	0%
Asian/Pacific Islander	4,040	1%	3,628	1%	390	0%	287	0%	1	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Other/Multi-Racial	14,137	3%	7,704	2%	4,998	6%	3,808	6%	22	5%	10	6%	14	5%	9	6%	8	6%	1	6%
Ethnicity																				
Hispanic	13,308	3%	9,225	3%	3,213	4%	2,442	4%	17	4%	13	8%	16	5%	13	9%	1	1%	0	0%
Non-Hispanic	402,566	97%	330,317	97%	82,483	96%	62,691	96%	403	96%	152	92%	279	95%	136	91%	124	99%	16	100%
Youth <25	136,937		NOT AVAILABLE		NOT AVAILABLE		NOT AVAILABLE		43		16		35		16		8		0	
Race																				
White	92,406	67%	---	---	---	---	---	---	8	19%	2	13%	7	20%	2	13%	1	13%	0	0%
Black	34,366	25%	---	---	---	---	---	---	33	77%	14	88%	27	77%	14	88%	6	75%	0	0%
Native American/Alaskan	1,187	1%	---	---	---	---	---	---	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Asian/Pacific Islander	1,187	1%	---	---	---	---	---	---	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Other/Multi-Racial	8,235	6%	---	---	---	---	---	---	2	5%	0	0%	1	3%	0	0%	1	13%	0	0%
Ethnicity																				
Hispanic	5,546	5%	---	---	---	---	---	---	1	2%	0	0%	1	3%	0	0%	0	0%	0	0%
Non-Hispanic	130,391	95%	---	---	---	---	---	---	42	98%	16	100%	34	97%	16	100%	8	100%	0	0%
Veterans	0		NOT AVAILABLE		NOT AVAILABLE		NOT AVAILABLE		27		16		21		16		100%		NOT AVAILABLE	
Race																				
White	0	0%	---	---	---	---	---	---	0	22%	---	---	13	71%	---	---	5	83%	---	---
Black	0	0%	---	---	---	---	---	---	20	74%	---	---	0	0%	---	---	0	0%	---	---
Native American/Alaskan	0	0%	---	---	---	---	---	---	0	0%	---	---	0	0%	---	---	0	0%	---	---
Asian/Pacific Islander	0	0%	---	---	---	---	---	---	0	0%	---	---	0	0%	---	---	0	0%	---	---
Other/Multi-Racial	0	0%	---	---	---	---	---	---	1	4%	---	---	1	5%	---	---	0	0%	---	---
Ethnicity																				
Hispanic	0	0%	---	---	---	---	---	---	0	0%	---	---	0	0%	---	---	0	0%	---	---

State Data

Race and Ethnicity	All (ACS) ¹				In Poverty (ACS) ¹				Experiencing Homelessness (PRT) ²			
	All		In Families with Children		All		In Families with Children		All		In Families with Children	
	#	%	#	%	#	%	#	%	#	%	#	%
All People	9,900,571		7,992,376		1,616,870		1,152,830		9,051		3,423	
Race												
White	7,823,875	79%	6,320,645	79%	1,003,986	62%	671,793	58%	3,826	42%	1,220	36%
Black	1,381,388	14%	1,077,560	13%	459,716	28%	359,312	31%	4,693	52%	1,941	57%
Native American/Alaskan	53,951	1%	43,180	1%	12,664	1%	9,233	1%	112	1%	40	1%
Asian/Pacific Islander	268,766	3%	227,140	3%	37,974	2%	25,024	2%	27	0%	9	0%
Other/Multi-Racial	372,291	4%	323,851	4%	102,530	6%	87,468	8%	393	4%	213	6%
Ethnicity												
Hispanic	467,021	5%	407,895	5%	123,640	8%	106,278	9%	497	5%	292	9%
Non-Hispanic	9,433,550	95%	7,584,481	95%	1,493,230	92%	1,046,552	91%	8,554	95%	3,131	91%
Youth <25	3,247,906		NOT AVAILABLE		790,134		NOT AVAILABLE		889		201	
Race												
White	2,378,524	73%	---	---	455,709	58%	---	---	317	36%	44	22%
Black	535,523	16%	---	---	238,643	30%	---	---	442	50%	148	74%
Native American/Alaskan	33,623	1%	---	---	3,005	3%	---	---	10	1%	1	0%
Asian/Pacific Islander	96,892	3%	---	---	28,051	3%	---	---	2	0%	7	0%
Other/Multi-Racial	215,078	7%	---	---	68,826	9%	---	---	38	5%	8	4%
Ethnicity												
Hispanic	226,561	7%	---	---	76,636	10%	---	---	54	7%	14	7%
Non-Hispanic	3,021,345	93%	---	---	213,498	90%	---	---	735	93%	187	93%
Veterans	66,722		NOT AVAILABLE		NOT AVAILABLE		NOT AVAILABLE		773		NOT AVAILABLE	
Race												
White	54,573	81%	---	---	---	---	---	---	298	39%	---	---
Black	65,712	10%	---	---	---	---	---	---	438	57%	---	---
Native American/Alaskan	3,579	1%	---	---	---	---	---	---	10	1%	---	---
Asian/Pacific Islander	1,995	0%	---	---	---	---	---	---	1	0%	---	---
Other/Multi-Racial	10,365	2%	---	---	---	---	---	---	26	3%	---	---
Ethnicity												
Hispanic	11,826	2%	---	---	---	---	---	---	24	3%	---	---

Non-Hispanic | 0 | 0% | -- | -- | -- | -- | 27 | 100% | -- | 21 | 100% | -- | 6 | 100% | -- | -- |

Sources:
1 American Community Survey (ACS) 2011-2015 5-yr estimates; Veteran CoC data comes from the ACS 2015 1-yr estimates; Total youth in the American Community Survey is a rollup of race estimates of all persons under 25.
2 Point-in-Time (PIT) 2017 data
Note: Race estimates of individuals in families with children are based on the race of the householder.

Non-Hispanic | 61,486 | 98% | -- | -- | -- | -- | -- | -- | 749 | 97% | -- | -- |