Before Starting the CoC Application

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

 The Collaborative Applicant is responsible for:

- Reviewing the FY 2015 CoC Program Competition NOFA in its entirety for specific application and program requirements.
- Using the CoC Application Detailed Instructions for assistance with completing the application in e-snaps.
- Answering all questions in the CoC Application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing so, please keep in mind that:

 - This year, CoCs will see that a few responses have been imported from the FY 2013/FY 2014 CoC Application. Due to significant changes to the CoC Application questions, most of the responses from the FY 2013/FY 2014 CoC Application could not be imported.
  - For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses.
 - For other questions, the Collaborative Applicant must be aware of responses provided by project applicants in their Project Applications.
- Some questions require that the Collaborative Applicant attach a document to receive credit. This will be identified in the question.
 - All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

 For Detailed Instructions click here.

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

1A-1. CoC Name and Number: CA-611 - Oxnard, San Buenaventura/Ventura County CoC

1A-2. Collaborative Applicant Name: County of Ventura

1A-3. CoC Designation: CA

1A-4. HMIS Lead: County of Ventura Human Services Agency

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

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

1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness in the geographic area or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question.
(limit 1000 characters)

Ventura County CoC has 5 established committees that meet regularly and are open to the public. Invitations to participate come through the CoC website and emails. CoC staff and member organizations extend invitations by promoting participation at local task force and community meetings. Veteran service providers have been incorporated into the Housing and Services committee and have contributed their knowledge, which includes ensuring housing and supportive services for all veterans and ongoing improved collaboration between VA, PHAs, VASH reps and homeless services providers. Youth advocates have also contributed knowledge towards ending youth homelessness by helping adopt ways to accurately count youth during unsheltered counts; facilitating greater community awareness of issues contributing to youth homelessness; and ensuring appropriate housing and services are available to address such issues.

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

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on the CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Interface Children and Family Services RHY Shelter	Yes	Yes	No
Pacific Clinics - TAY Tunnel	No	Yes	Yes
Many Mansions	No	Yes	No
Ventura County Dept of Education	No	Yes	No
San Buenaventura Housing Authority	No	Yes	No

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

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings within the last 12 months (between October 1, 2014 and November 15, 2015).	Sat on CoC Board as active member or official at any point during the last 12 months (between October 1, 2014 and November 15, 2015).
Interface Children and Family Services	Yes	No
The Coalition for Family Harmony	Yes	No

1B-2. Does the CoC intend to meet the timelines for ending homelessness as defined in Opening Doors?

Opening Doors Goal	CoC has established timeline?
End Veteran Homelessness by 2015	Yes
End Chronic Homelessness by 2017	No
End Family and Youth Homelessness by 2020	Yes
Set a Path to End All Homelessness by 2020	Yes

1B-3. How does the CoC identify and assign the individuals, committees, or organizations responsible for overseeing implementation of specific strategies to prevent and end homelessness in order to meet the goals of Opening Doors?
 (limit 1000 characters)

CoC encourages all members to engage in committees to address the goals of Opening Doors. Committees were tasked with ending homelessness among veterans, youth and families, and chronically homeless persons. Veteran providers (HUD VASH and SSVF) were recruited to focus on activities ending veteran homelessness. Youth and family service providers were recruited to be part of committees that focus on ending youth and family homelessness. The Coordinated Entry Committee was tasked with ending homelessness among chronically homeless persons and outreach and engagement teams, mental health providers and permanent supportive housing providers were specifically recruited for this committee. The Data & Performance committee monitors progress and is utilizing data to drive including VI-SPDAT scores to drive decision making. The Housing & Services Committee is focused on increasing housing inventory through landlord engagement and supporting development of new affordable units.

**1B-4. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for any new projects in 2015.
(limit 1000 characters)**

The CoC actively recruits non-funded entities for dual purpose of encouraging program proposals as well as engaging and aligning efforts with the CoC. CoC directly calls entities in neighboring counties to encourage their participation in Ventura County's CoC funding competition. For the FY 15 funding cycle, an RFP was released for re-allocated funding and bonus funding. The RFP was sent out to the full CoC Alliance, distributed by the United Way and released to the local press. A local newspaper and TV station profiled the release. The RFP details were also posted on the Continuum of Care website. Factors considered for including new projects include: fulfilling RFP criteria, satisfying unmet need, meeting CoC Priority, and organizational capacity. A technical workshop for new and renewal applicants was provided and one on one technical assistance was provided to applicant agencies upon request.

1B-5. How often does the CoC invite new members to join the CoC through a publicly available invitation?   Semi-Annually

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
HeadStart Program	No
Other housing and service programs funded through Federal, State and local government resources.	Yes

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

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

	Number	Percentage
Number of Con Plan jurisdictions with whom the CoC geography overlaps	6	
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	6	100.00%
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	6	100.00%
How many of the Con Plan jurisdictions are also ESG recipients?	2	
How many ESG recipients did the CoC participate with to make ESG funding decisions?	2	100.00%

How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	2	100.00 %

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

To improve coordination between Con Plan jurisdictions and CoC, HUD approved the first Regional Con Plan in the State reflecting 5 of 6 EA communities (Oxnard had just completed theirs). It identifies regional priorities for homeless and lays the foundation for joint funding, contracting, and monitoring programs and reporting to inform EA and CoC resource allocation. The new Regional Con Plan is managed by the County, who is also the CoC collaborative applicant ensuring seamless coordination; Oxnard actively monitors Con Plan activities, attends EA public hearings and workshops of other communities. Every EA jurisdiction is represented on the CoC or its subcommittees; they attend quarterly 1 ½ hr. CoC Alliance meetings, are invited via e-mail to bi-monthly CoC Board and monthly 1-2 hr. subcommittee meetings. CoC staff present 2X/yr for 30 mins. to Ventura Council Of Governments with elected officials from all jurisdictions to ensure policymakers are familiar with CoC priorities.

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

Local ESG recipients participate in CoC meetings, committees, vote to elect and sit on the CoC Board. CoC and ESG recipients analyze collectively to determine if the CoC has the right mix of housing and services and if reallocation is necessary. They established written standards, monitor projects and evaluate performance data. They use count methodologies, and HMIS performance standards. They ensure full participation in HMIS. They ensure implementation of a CES by mandating CoC funded programs participate and actively encourage and support the participation of key non-CoC funded programs. ESG funds help fund crisis housing and rapid re-housing locally. They work to implement a Housing First approach by making sure programs are implementing low barrier programs. CA State ESG seeks input from CoC on ranking and scoring of local applications. In the new cycle, State ESG will be granted to the local CoC for improved local input and monitoring of funded projects.

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

When a household presents to a homeless assistance provider in need of DV services, the provider calls one of the DV providers to expedite a safe shelter space within or beyond our county boundaries. 24 hour Hotline staff provides crisis counseling, conduct needs assessment, provide resources and help develop a safety plan. Following the interview, the Victim Service Provider arranges a safe place for the household to be picked up and taken to the one of the safe homes in a confidential location.
When a household presents directly to a DV provider the household is referred to the most appropriate shelter or support service provider. Service matching and delivery is tailored to the needs of the household. While safety of the family is the most immediate concern, a permanent housing plan quickly follows. For confidentiality purposes, the DV agencies are not integrated into the HMIS system; however, they do submit aggregate data as requested by the CoC.

1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between October 1, 2014 and March 31, 2015, and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program. (Full credit consideration may be given for the relevant excerpt from the PHA's administrative planning document(s) clearly showing the PHA's homeless preference, e.g. Administration Plan, Admissions and Continued Occupancy Policy (ACOP), Annual Plan, or 5-Year Plan, as appropriate).

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 10/1/14 to 3/31/15 who were homeless at entry	PHA has General or Limited Homeless Preference
Area Housing Authority of the County of Ventura	8.30%	Yes-HCV
Oxnard Housing Authority	10.00%	Yes-HCV
Housing Authority of the City of San Buenaventura	11.10%	Yes-Both
City of Port Hueneme Housing Authority	0.00%	No
Santa Paula Housing Authority	0.00%	No

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

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

Other sources used, or being considered, to house people experiencing homelessness include: HOPWA; CA Veterans Housing and Homeless Prevention Bond Act; CA Multifamily Housing Program; Mental Health Services Act (MHSA) Housing Program; LIHTC; Inclusionary Housing In-lieu Fees; CDBG; HOME; PATH; and RHY programs, and Family Violence Prevention & Services programs. The County and more frequently other jurisdictions condition funding they control to reserve or set aside units specifically for persons experiencing homelessness. CoC staff coordinates with other agencies' grant requests to secure housing for homeless when possible. The number of affordable housing units listed in the 2015 HIC used to house people experiencing homelessness is 246. 42 units are permanent supportive housing and the remainder extremely affordable units for persons who are homeless under HUD's definition.
Ventura County also has a HomeShare program which has expanded beyond seniors to reach the homeless population. Sober Living and Board and Care homes are also available for individuals that are interested in that setting.

1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply. For "Other," you must provide a description (2000 character limit)

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X
Implemented communitywide plans:	X
No strategies have been implemented:	

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

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

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

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

1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) and explain how the CoC plans to coordinate with the institution(s) to ensure persons discharged are not discharged into homelessness.
(limit 1000 characters)

 not-applicable

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

CoCs are required by the CoC Program interim rule to establish a Centralized or Coordinated Assessment system – also referred to as Coordinated Entry. Based on the recent Coordinated Entry Policy Brief, HUD's primary goals for coordinated entry processes are that assistance be allocated as effectively as possible and that it be easily accessible regardless of where or how people present for assistance. Most communities lack the resources needed to meet all of the needs of people experiencing homelessness. This combined with the lack of a well-developed coordinated entry processes can result in severe hardships for persons experiencing homelessness who often face long wait times to receive assistance or are screened out of needed assistance. Coordinated entry processes help communities prioritize assistance based on vulnerability and severity of service needs to ensure that people who need assistance the most can receive it in a timely manner. Coordinated entry processes also provide information about service needs and gaps to help communities plan their assistance and identify needed resources.

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

The CES is linked to street outreach and day programs in the county system so that the hardest-to-reach are prioritized for assistance in the same way as all other homeless persons. Coordination with public systems assists with identification of frequent utilizers. The VI-SPDAT is used to help determine the chronicity & medical vulnerability of homeless individuals. The VI-SPDAT identify the best type of support and housing interventions that fit their needs including Housing First models of permanent supportive housing and rapid re-housing. The CE is advertised in various ways for the most coverage that include: 1) leaving business cards of outreach workers; 2) posting information at service sites; 3) educating mainstream service providers; and 4) at events that attract homeless persons such as homeless connects, veteran stand downs, 5)meal sites & shelter programs; and 6) 2-1-1 help line. The CoC has created a by-name list of veterans and prioritized chronically homeless by acuity.

1E-2. CoC Program and ESG Program funded projects are required to participate in the coordinated entry process, but there are many other organizations and individuals who may participate but are not required to do so. From the following list, for each type of organization or individual, select all of the applicable checkboxes that indicate how that organization or individual participates in the CoC's coordinated entry process. If the organization or person does not exist in the CoC's geographic area, select "Not Applicable."   If there are other organizations or persons that participate not on this list, enter the information, click "Save" at the bottom of the screen, and then select the applicable checkboxes.

Organization/Person Categories	Participates in Ongoing Planning and Evaluation	Makes Referrals to the Coordinated Entry Process	Receives Referrals from the Coordinated Entry Process	Operates Access Point for Coordinated Entry Process	Participates in Case Conferencing	Not Applicable
Local Government Staff/Officials	X				X	
CDBG/HOME/Entitlement Jurisdiction	X			X	X	
Law Enforcement	X	X		X	X	
Local Jail(s)	X	X		X	X	
Hospital(s)	X	X		X	X	
EMT/Crisis Response Team(s)	X	X			X	
Mental Health Service Organizations	X	X	X		X	
Substance Abuse Service Organizations	X	X	X		X	
Affordable Housing Developer(s)	X	X	X	X	X	
Public Housing Authorities	X		X		X	
Non-CoC Funded Youth Homeless Organizations	X	X	X		X	
School Administrators/Homeless Liaisons	X	X		X	X	
Non-CoC Funded Victim Service Organizations	X	X	X		X	
Street Outreach Team(s)	X	X	X	X	X	
Homeless or Formerly Homeless Persons	X	X				

Veteran Service Providers	X	X	X	☐	X	☐
Faith Community	X	X	☐	☐	☐	☐
	☐	☐	☐	☐	☐	☐

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

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

1F-1. For all renewal project applications submitted in the FY 2015 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2015 CoC Program Competition?	18

How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	3

How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2015 CoC Program Competition?	15

Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2015 CoC Competition?	100.00%

1F-2. In the sections below, check the appropriate box(s) for each section to indicate how project applications were reviewed and ranked for the FY 2015 CoC Program Competition. (Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.)

Type of Project or Program (PH, TH, HMIS, SSO, RRH, etc.)	X

Performance outcomes from APR reports/HMIS	
Length of stay	X
% permanent housing exit destinations	X
% increases in income	X

Monitoring criteria	
Participant Eligibility	X
Utilization rates	X
Drawdown rates	X
Frequency or Amount of Funds Recaptured by HUD	X
Housing First/Low Barrier	X

Need for specialized population services	
Youth	
Victims of Domestic Violence	
Families with Children	
Persons Experiencing Chronic Homelessness	X
Veterans	X

None	

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

CoC considered the severity of needs & vulnerabilities of participants that are, or will be, served by the projects as outlined in its written standards. Projects serving those persons with highest needs and greatest barriers towards obtaining and maintaining permanent housing on their own were factored into the CoC's review, ranking, and selection process. For example, projects serving, and new projects proposing to serve, CH Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs were given weighted performance consideration. This also included persons with a history of high utilization of crisis services and significant health or behavioral health challenges and/or functional impairments which require a significant level of support in order to obtain & maintain permanent housing. Projects serving, or proposing to serve, higher percentages of persons coming from the streets were also prioritized.

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

The Data & Performance Committee began reviewing projects in April 2015 by reviewing project and system level performance. An LOI was requested in May 2015 & HMIS performance data was evaluated for all renewal projects. Data & Performance Committee scored projects with criteria on the LOI (exits to PH, Housing First, priority populations, cost effectiveness). Preliminary ranking and of the CoC Board recommended re-allocation of funds from 2 TH projects. An RFP was posted on the CoC website and publicized through local media. The Data committee reviewed and ranked new applications and made recommendations to the CoC Board. The final ranking of projects was posted on 11/2/15 and distributed to all members of the CoC

1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2015 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached.)   11/17/2015

1F-5. Did the CoC use the reallocation process in the FY 2015 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.)   Yes

1F-5a. If the CoC rejected project application(s) on what date did the CoC and Collaborative Applicant notify those project applicants their project application was rejected in the local CoC competition process? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.)   10/26/2015

1F-6. Is the Annual Renewal Demand (ARD) in the CoC's FY 2015 CoC Priority Listing equal to or less than the ARD on the final HUD-approved FY 2015 GIW?   Yes

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

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

The Collaborative Applicant, The County of Ventura - County Executive Office, employs two Management Analysts who monitor the performance of both CoC and ESG grants. Monitoring is accomplished through quarterly reviews of each program's HMIS generated APRs as well as a minimum of one (1) on-site monitoring visit per year. On-site monitoring includes reviewing client files for proof of eligibility, participation in Coordinated Entry, adherence to local written standards. In addition, the CoC Data Subcommittee quarterly reviews each programs cost per exit to permanent housing, bed utilization, housing stability, income increases and draw down frequency. Additionally, HMIS support staff work with CoC staff and Data Committee to review data integrity and timeliness of data entry. The Collaborative Applicant provides Training and Technical Assistance as requested and/or needed. Agencies failing to meet performance standards are offered one-on-one technical assistance.

1G-2. Did the Collaborative Applicant review and confirm that all project applicants attached accurately completed and current dated form HUD 50070 and form HUD-2880 to the Project Applicant Profile in e-snaps?   Yes

1G-3. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing?   Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or the attached MOU. page 6

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

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

2A-4. What is the name of the HMIS software used by the CoC (e.g., ABC Software)? Applicant will enter the HMIS software name (e.g., ABC Software).   Service Point

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

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

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

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

2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	$90,778
ESG	$0
CDBG	$0
HOME	$0
HOPWA	$0
Federal - HUD - Total Amount	$90,778

2B-2.2 Funding Type: Other Federal

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

2B-2.3 Funding Type: State and Local

Funding Source	Funding
City	$0
County	$233,848
State	$0
State and Local - Total Amount	$233,848

2B-2.4 Funding Type: Private

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

2B-2.5 Funding Type: Other

Funding Source	Funding
Participation Fees	$13,400
Other - Total Amount	$13,400

2B-2.6 Total Budget for Operating Year	$338,026

2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

2C-1. Enter the date the CoC submitted the 2015 HIC data in HDX, (mm/dd/yyyy): 05/12/2015

2C-2. Per the 2015 Housing Inventory Count (HIC) indicate the number of beds in the 2015 HIC and in HMIS for each project type within the CoC. If a particular housing type does not exist in the CoC then enter "0" for all cells in that housing type.

Project Type	Total Beds in 2015 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter beds	304	27	240	86.64%
Safe Haven (SH) beds	10	0	10	100.00%
Transitional Housing (TH) beds	282	15	179	67.04%
Rapid Re-Housing (RRH) beds	129	0	129	100.00%
Permanent Supportive Housing (PSH) beds	307	0	307	100.00%
Other Permanent Housing (OPH) beds	0	0	0	

2C-2a. If the bed coverage rate for any housing type is 85% or below, describe how the CoC plans to increase this percentage over the next 12 months.
(limit 1000 characters)

The reason the TH bed coverage is below 85% is twofold; 1) DV providers are not included in HMIS and 2)Rescue Mission programs are privately funded and do not participate in HMIS.
Ventura County CoC has been and continues to work with Rescue Mission programs to engage them to participate in HMIS.

2C-3. HUD understands that certain projects are either not required to or discouraged from participating in HMIS, and CoCs cannot require this if they are not funded through the CoC or ESG programs. This does NOT include domestic violence providers that are prohibited from entering client data in HMIS. If any of the project types listed in question 2C-2 above has a coverage rate of 85% or below, and some or all of these rates can be attributed to beds covered by one of the following programs types, please indicate that here by selecting all that apply from the list below. (limit 1000 characters)

VA Domiciliary (VA DOM):	
VA Grant per diem (VA GPD):	
Faith-Based projects/Rescue mission:	X
Youth focused projects:	
HOPWA projects:	
Not Applicable:	

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

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

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" during the time period of October 1, 2013 through September 30, 2014.

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	3%	4%
3.3 Date of birth	0%	0%
3.4 Race	1%	4%
3.5 Ethnicity	0%	0%
3.6 Gender	0%	0%
3.7 Veteran status	2%	1%
3.8 Disabling condition	2%	0%
3.9 Residence prior to project entry	1%	1%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	0%
3.15 Relationship to Head of Household	0%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	0%	0%

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

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

	☐
None	☐

2D-3. If you submitted the 2015 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?   6

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

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

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

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

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

Not applicable

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

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

The data collected during the PIT count is vital for both CoCs and HUD. Communities need accurate data to determine the size and scope of homelessness at the local level so they can best plan for services and programs that will appropriately address local needs and measure progress in addressing homelessness. HUD needs accurate data to understand the extent and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. This information helps inform Congress' funding decisions, and it is vital that the data reported is accurate and of high quality.

2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2015 sheltered PIT count?   Yes

2E-2. Indicate the date of the most recent sheltered PIT count (mm/dd/yyyy):   01/27/2015

2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD?   Not Applicable

2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX, (mm/dd/yyyy):   05/12/2015

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

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2015 PIT count:

Complete Census Count:	X
Random sample and extrapolation:	
Non-random sample and extrapolation:	

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

HMIS:	X
HMIS plus extrapolation:	
Interview of sheltered persons:	X
Sample of PIT interviews plus extrapolation:	

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

The sheltered count included the number of persons and households sleeping in emergency shelters and transitional housing which were listed on the Housing Inventory Chart (HIC). In addition, any persons staying in hotels or motels as a result of receiving a voucher from a social service agency were included in the sheltered count if the voucher program was listed on the HIC.

HMIS was used to gather the total number of occupied beds and the number of persons for each subpopulation. A "Data Collection Instrument" was used to collect the total number of occupied beds and the number of persons for each subpopulation for non-participating HMIS programs and for HMIS participating agencies that do not have their HMIS data complete and correct. The same questions used to collect
subpopulation data through HMIS were used for the data collection instrument. Thus, sheltered count data for all sheltered programs was gathered either through a data collection sheet or HMIS.

2F-4. Describe any change in methodology from your sheltered PIT count in 2014 to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the PIT count). (limit 1000 characters)

not-applicable

2F-5. Did your CoC change its provider coverage in the 2015 sheltered count?   No

2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2015 sheltered count. (limit 750 characters)

not applicable

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

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

Training:	X
Provider follow-up:	X
HMIS:	X
Non-HMIS de-duplication techniques:	X

2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2014 to 2015 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g., change in sampling or extrapolation method). (limit 1000 characters)

No changes made.

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

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

The unsheltered PIT count assists communities and HUD to understand the characteristics and number of people 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. CoCs are required to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, CoCs are strongly encouraged to conduct the unsheltered PIT count annually, at the same time that it does the annual sheltered PIT count. The last official PIT count required by HUD was in January 2015.

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

2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy): 01/27/2015

2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2015, was an exception granted by HUD? Not Applicable

2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy): 05/12/2015

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

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

2I-1. Indicate the methods used to count unsheltered homeless persons during the 2015 PIT count:

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

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

A homeless count and subpopulation survey instrument was used to gather unsheltered data by counters. The instrument focused on gathering responses that were used to created an unique identifier and to determine the number of persons for each subpopulation required by HUD.

During the count, volunteers were required to collect the following information concerning every homeless person counted: first initial of first name, first initial of last name, gender, race, age by code, and birth state. The information for each encounter was input into a data base. The information was used to create an identifier for each person. If the same identifier appeared more than once, it was assumed that this was the same person and the person would only be counted once.

This methodology was used to maintain consistency with previous PIT counts and because it has proven to be reliable over the past 9 years.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training and change in partners participating in the count). (limit 1000 characters)

No changes made.

2I-4. Does your CoC plan on conducting an unsheltered PIT count in 2016?   Yes

(If "Yes" is selected, HUD expects the CoC to conduct an unsheltered PIT count in 2016. See the FY 2015 CoC Program NOFA, Section VII.A.4.d. for full information.)

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

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2015 unsheltered population PIT count:

Training:	X
"Blitz" count:	
Unique identifier:	X
Survey question:	X
Enumerator observation:	
None:	

2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2014 (or 2013 if an unsheltered count was not conducted in 2014) to 2015 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual methodology (e.g., change in sampling or extrapolation method).
 (limit 1000 characters)

No change.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

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

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2014 and 2015 PIT counts as recorded in the Homelessness Data Exchange (HDX).

		2014 PIT (for unsheltered count, most recent year conducted)	2015 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		1,420	1,417	-3
Emergency Shelter Total		240	304	64
Safe Haven Total		10	11	1
Transitional Housing Total		260	145	-115
Total Sheltered Count		510	460	-50
Total Unsheltered Count		910	957	47

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

Using HMIS data, CoCs must use the table below to indicate the number of homeless persons who were served in a sheltered environment between October 1, 2013 and September 30, 2014.

		Between October 1, 2013 and September 30, 2014
Universe: Unduplicated Total sheltered homeless persons		914
Emergency Shelter Total		563
Safe Haven Total		45
Transitional Housing Total		306

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

Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors for becoming homeless for the first time.
(limit 1000 characters)

A county-wide homeless prevention strategy has been implemented that has helped identify specific risk factors based on fact-finding with general assistance, mainstream, and prevention assistance providers that include unemployment, underemployment, sudden death or illness, and temporary and permanent disability. This strategy includes a county-wide homeless RRH prevention strategy in conjunction with the CES which was implemented with CoC and ESG recipients for individuals and families and provides rental and utility cash assistance to households with the highest likelihood of becoming homeless. Distinguishing criteria includes household income at or below 30% of AMI and whether or not a household has a history of eviction and homelessness. For families who become homeless, short-term crisis housing is sought with low barriers until PH is obtained.Ongoing case management is provided to access mainstream benefits and to help prepare them to maintain their housing after they move in.

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

Describe the CoC's efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.
(limit 1000 characters)

The VI-SPDAT has been implemented including questions regarding length of time the client has been on the streets or in ES as part of CES. Client's length of homelessness, disability status, and chronicity determine the client's ranking on the CES Prioritization list. CoC also uses HMIS to record episodes of homelessness by program participants who exit ES, RRH, TH & PSH projects. The current method also uses APRs to monitor participants' Destination at Program Exit which includes the ability to drill into detailed destination data. HMIS will be used to generate the percentage of each destination data element to evaluate how many participants exit to Permanent destination and which agency is performing positively in housing stability outcomes. Data & Performance Committee monitors this system level data. CoC is increasing the supply of PSH and RRH as a strategy to reduce LOT homeless. Households with the longest LOT homeless are housed first.

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

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

3A-4a. Exits to Permanent Housing Destinations:

In the chart below, CoCs must indicate the number of persons in CoC funded supportive services only (SSO), transitional housing (TH), and rapid re-housing (RRH) project types who exited into permanent housing destinations between October 1, 2013 and September 30, 2014.

		Between October 1, 2013 and September 30, 2014
Universe: Persons in SSO, TH and PH-RRH who exited		356
Of the persons in the Universe above, how many of those exited to permanent destinations?		277
% Successful Exits		77.81%

3A-4b. Exit To or Retention Of Permanent Housing:

In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2013 and September 31, 2014.

		Between October 1, 2013 and September 30, 2014
Universe: Persons in all PH projects except PH-RRH		17
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?		15
% Successful Retentions/Exits		88.24%

3A-5. Performance Measure: Returns to Homelessness:

Describe the CoC's efforts to reduce the rate of individuals and families who return to homelessness.   Specifically, describe at least three strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)

Four implemented strategies include: 1) expanding the number of RRH programs through CoC funds, ESG funds, and state funds such as the CA Homeless Support Program; 2) providing wrap-around services with case management after households obtain PH in order to help maintain housing; 3) developing landlord liaison relationships as 1st point of contact for tenant issues and serve as mediator as needed; and 4) identifying individuals and families who return to homelessness through the CES which is imbedded into HMIS and creates a unique identifier upon entry. HMIS reports are run and data is reviewed to determine returns to homelessness. The CoC Data and Performance committee reviews reports with CoC staff then makes observations and recommendations to the CoC Board to help minimize returns to homelessness. The CoC Board and committees

3A-6. Performance Measure: Job and Income Growth.

Describe specific strategies implemented by CoC Program-funded projects to increase the rate by which homeless individuals and families increase income from employment and non-employment sources (include at least one specific strategy for employment income and one for non-employment related income, and name the organization responsible for carrying out each strategy).
(limit 1000 characters)

Every homeless person entering into a residential component of the CoC is assessed for employment as part of a Housing First approach. Each case manager identifies and provides or refers the services needed for employable residents that include pre-employment supports which involve life skills such as proper grooming and confidence-building. Other necessary services include job-readiness activities such as effective resumes and interview preparation, and job searching are obtained through referrals as noted in 3A-6a. Residents that are temporarily or not employable can be referred to temporary assistance programs such as CalWorks, CalFresh, General Relief, and Medi-Cal. These programs are administered by the Ventura County Human Services Agency Case managers help provide transportation when necessary, complete necessary paperwork, and assist residents with follow-up to ensure benefits are received.

3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income.
(limit 1000 characters)

Primary organizations include the Workforce Investment Board (WIB) of Ventura County which offers training and education programs and services that include Employer-site, on-the-job training, subsidized wages for employees in training, customized training programs, industry-specific education programs, and skills enhancement. In partnership with the Human Services Agency, there are specialized programs for youth, older workers, people with disabilities, adults, dislocated workers, Veterans. The Human Services Agency also has a Welfare to Work Program for CalWorks recipients and a child care program that provide child care payments to providers on behalf of CalWORKs recipients in approved work or training programs. In addition, the Center for Employment training provides highly subsidized and free workforce training. Goodwill also runs programs geared toward homeless reentering the workforce.

3A-7. Performance Measure: Thoroughness of Outreach.

How does the CoC ensure that all people living unsheltered in the CoC's geographic area are known to and engaged by providers and outreach teams?
(limit 1000 characters)

Coordination between outreach teams and housing and homeless assistance providers consists of targeted street outreach to all unsheltered individuals and families including those who are CH and hardest to reach. Outreach workers engage unsheltered persons by entering them into a CES by administering the VI-SPDAT which determines chronicity and medical vulnerability of homeless persons and helps identify the best type of support and housing interventions that fit their needs. For families, placement in shelters as bridge housing only occurs when a family's homelessness cannot be immediately prevented. RRH assistance is provided as quickly as possible in order to limit their stay in temporary housing. For individuals, placement in shelters as bridge housing is needed when appropriate PH is not yet available. A housing first approach is used so such persons are able to maintain their temporary housing and in order to help assure that such persons maintain their housing once obtained.

3A-7a. Did the CoC exclude geographic areas from the 2015 unsheltered PIT count where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g., deserts)?   Yes

3A-7b. What was the the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoC's unsheltered PIT count?
(limit 1000 characters)

The county was divided into Red, Yellow, or Green Areas. Red Areas were defined as areas where there were no homeless persons as determined by local community representatives and stakeholders. Only a few rural areas spread throughout the mountain regions of the county were identified by key persons as Red Areas. Yellow Areas were defined as areas where only professional outreach workers would go. These areas may prove too difficult to cover and/or unsafe for volunteer counters. Prior to the count, local professional representatives involved in the homeless count such as law enforcement or street outreach workers verified if homeless persons lived in these areas. Few areas were noted as yellow and all yellow areas were included in the count. Green Areas were defined as areas where homeless persons can be found as determined by local community representatives. All cities and much of the unincorporated areas of the county were designated as green areas.

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

Objective 1: Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

Opening Doors, Federal Strategic Plan to Prevent and End Homelessness (as amended in 2015) establishes the national goal of ending chronic homelessness. Although the original goal was to end chronic homelessness by the end of 2015, that goal timeline has been extended to 2017. HUD is hopeful that communities that are participating in the Zero: 2016 technical assistance initiative will continue to be able to reach the goal by the end of 2016. The questions in this section focus on the strategies and resources available within a community to help meet this goal.

3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

		2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons		437	515	78
Sheltered Count of chronically homeless persons		16	10	-6
Unsheltered Count of chronically homeless persons		421	505	84

3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, decrease, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2015 compared to 2014. To possibly receive full credit, both the overall total and unsheltered changes must be addressed.
(limit 1000 characters)

Total number of CH persons increased. HMIS data as noted in recent APRs, reveals that many CH persons have been permanently housed over the past year. However, the CoC believes that the number of CH persons is not as static of a population as once believed. More and more low offenders have been released from prison as a result of AB 109 which focused on overcrowding in the jail and prison system. The recent homeless count and survey reports revealed that nearly one-third of unsheltered adults were released from correctional institutions during the past year after serving a court-mandated sentence.

3B-1.2. From the FY 2013/FY 2014 CoC Application: Describe the CoC's two year plan (2014-2015) to increase the number of permanent supportive housing beds available for chronically homeless persons and to meet the proposed numeric goals as indicated in the table above. Response should address the specific strategies and actions the CoC will take to achieve the goal of ending chronic homelessness by the end of 2015.
(read only)

The CoC has begun to implement a two year plan that will increase the number of PSH beds for CH persons. The plan consists of increasing the number of PSH for CH persons by 1) encouraging PSH programs that do not serve 100% CH to serve 100% CH; 2) requiring PSH programs to fill vacant beds with CH; 3) maintaining CoC funded TH beds for youth ages 18 – 24 and victims of DV and reallocating other CoC funded TH beds to PSH for CH; 4) reallocating CoC funded SSO projects to PSH for CH; 5) supporting the creation of PSH for CH persons through non-CoC sources of funding. Such funds include state, county, and city funding sources. Support will include funding for the acquisition, rehabilitation, and new construction of units and beds for CH persons; and 6) supporting private investments such as social impact bonds or financing and private foundation grants to support the operations of a PSH for CH. CoC will offer training workshops as well as on-site technical consultation to provide assistance to PSH staff and board members. CoC will monitor the action steps noted above throughout the year through the CoC ranking and review process.

3B-1.2a. Of the strategies listed in the FY 2013/FY 2014 CoC Application represented in 3B-1.2, which of these strategies and actions were accomplished?
(limit 1000 characters)

Ventura County CoC has accomplished all strategies represented in 3B-1.2:
1) As of January 2015, All CoC funded PSH beds are prioritized for chronically homeless upon turnover.
2) Beginning in April 2015, other PSH beds in the community are being prioritized and matched through Coordinated Entry. Ongoing efforts to continue to bring in new partners on this.
3) In May 2015, the CoC Data committee recommended that TH projects not performing and not serving priority populations should be re-allocated in this funding cycle.
4) CoC has reallocated all SSO projects outside of CES and HMIS to PSH.
5) Housing and Services committee and CoC Board are collaborating and supporting creation of new PSH with non-CoC funding.

3B-1.3. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count, as compared to those identified on the 2014 Housing Inventory Count.

	2014	2015	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	86	105	19

3B-1.3a. Explain the reason(s) for any increase, decrease or no change in the total number of PSH beds (CoC Program and non CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2015 Housing Inventory Count compared to those identified on the 2014 Housing Inventory Count. (limit 1000 characters)

The reason for the increase in PSH beds is due to two new PSH projects that began in 2015.

3B-1.4. Did the CoC adopt the orders of priority in all CoC Program-funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status ?   Yes

3B-1.4a. If "Yes", attach the CoC's written standards that were updated to incorporate the order of priority in Notice CPD-14-012 and indicate the page(s) that contain the CoC's update.   pg 2

3B-1.5. CoC Program funded Permanent Supportive Housing Project Beds prioritized for serving people experiencing chronic homelessness in FY2015 operating year.

Percentage of CoC Program funded PSH beds prioritized for chronic homelessness		FY2015 Project Application
Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness.		41

Based on all of the renewal project applications for PSH, enter the estimated number of CoC-funded PSH beds in projects being renewed in the FY 2015 CoC Program Competition that are not designated as dedicated beds for persons experiencing chronic homelessness that will be made available through turnover in the FY 2015 operating year.	10

Based on all of the renewal project applications for PSH, enter the estimated number of PSH beds made available through turnover that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	10

This field estimates the percentage of turnover beds that will be prioritized beds for persons experiencing chronic homelessness in the FY 2015 operating year.	100.00%

3B-1.6. Is the CoC on track to meet the goal of ending chronic homelessness by 2017?   No

This question will not be scored.

3B-1.6a. If "Yes," what are the strategies implemented by the CoC to maximize current resources to meet this goal? If "No," what resources or technical assistance will be implemented by the CoC to reach the goal of ending chronically homeless by 2017? (limit 1000 characters)

Ventura County CoC is prioritizing PSH beds for chronically homeless and working to partner with PHAs to move stable individuals out of PSH beds to PHA units. The Housing and Services committee is working with partners to have non-CoC funded PSH fill vacancies through Coordinated Entry. Additional resources or technical assistance in creation of PSH units and ongoing engagement of landlords is needed to increase PSH inventory.

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

Objective 2: Ending Homelessness Among Households with Children and Ending Youth Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

Opening Doors outlines the goal of ending family (Households with Children) and youth homelessness by 2020. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-2.1. What factors will the CoC use to prioritize households with children during the FY2015 Operating year? (Check all that apply).

Vulnerability to victimization:	X
Number of previous homeless episodes:	
Unsheltered homelessness:	X
Criminal History:	
Bad credit or rental history (including not having been a leaseholder):	
Head of household has mental/physical disabilities:	
Length of Time Homeless	X
N/A:	

3B-2.2. Describe the CoC's plan to rapidly rehouse every family that becomes homeless within 30 days of becoming homeless on the street or entering shelter.
(limit 1000 characters)

The Coordinated Entry System plays a critical role in providing the right intervention for each homeless family to effectively house them within 30 days. The CES is designed to help families avoid entering shelters by offering assistance to families to help them remain in their housing for a short period of time in order to gain time to move them into PH. If ES is need for a family, supportive services are provided to help ensure a stay of no more than 30 days. Such services are provided within a housing first and low barrier environment. RRH assistance is provided to also ensure that a stay in ES is no more than 30 days and is flexible so families with lower barriers receive modest financial assistance and those with higher barriers receive moderate assistance. CoC has reallocated TH programs to RRH and has worked with ESG recipients to allocate more funding to RRH. PSH is targeted to CH in need ongoing subsidies and consistent support services.

3B-2.3. Compare the number of RRH units available to serve families from the 2014 and 2015 HIC.

	2014	2015	Difference
RRH units available to serve families in the HIC:	0	134	134

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

CoC policies and procedures prohibit involuntary family separation:	X
There is a method for clients to alert CoC when involuntarily separated:	
CoC holds trainings on preventing involuntary family separation, at least once a year:	
None:	

3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

PIT Count of Homelessness Among Households With Children

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: **Total PIT Count of sheltered and unsheltered homeless households with children:**	114	101	-13
Sheltered Count of homeless households with children:	67	58	-9
Unsheltered Count of homeless households with children:	47	43	-4

3B-2.5a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless households with children in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count. (limit 1000 characters)

There was a decrease in the total number of homeless households with children because Ventura County CoC had an increase in Rapid Re-Housing resources for families with children through CoC and State CalWorks funding sources. Families with children are prioritized to be housed as rapidly as possible (30 days or less).

3B-2.6. Does the CoC have strategies to address the unique needs of unaccompanied homeless youth (under age 18, and ages 18-24), including the following:

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

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

Applicant: Collaborative Applicant Ventura County-Oxnard 2013 CoC Registration
Project: CA-611 CoC Registration FY2015

CA-611
COC_REG_2015_122085

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	X
Increase housing and service options for youth fleeing or attempting to flee trafficking:	X
Specific sampling methodology for enumerating and characterizing local youth trafficking:	
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	
Community awareness training concerning youth trafficking:	X
N/A:	

3B-2.7. What factors will the CoC use to prioritize unaccompanied youth (under age 18, and ages 18-24) for housing and services during the FY2015 operating year? (Check all that apply)

Vulnerability to victimization:	
Length of time homeless:	X
Unsheltered homelessness:	X
Lack of access to family and community support networks:	X
N/A:	

3B-2.8. Using HMIS, compare all unaccompanied youth (under age 18, and ages 18-24) served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2013 (October 1, 2012 - September 30, 2013) and FY 2014 (October 1, 2013 - September 30, 2014).

	FY 2013 (October 1, 2012 - September 30, 2013)	FY 2014 (October 1, 2013 - September 30, 2104)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	68	34	-34

3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 is lower than FY 2013, explain why.
(limit 1000 characters)

Beginning in 2012, state legislation (AB 12) became effective which allowed eligible youth in foster care to extend services beyond age 18 to age 21. The legislation recognized the importance of family and permanency for youth by extending payment benefits and transitional support services.
Locally, Interface Children and Family Services opened a Drop In Center and began operating a crisis line to expand services for youth and connect them to appropriate shelter and services.
Improved coordination among youth service providers with case conferencing and planning.

3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2015 to projected funding for CY 2016.

	Calendar Year 2015	Calendar Year 2016	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	$199,175.00	$393,727.00	$194,552.00
CoC Program funding for youth homelessness dedicated projects:	$0.00	$0.00	$0.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	$199,175.00	$393,727.00	$194,552.00

3B-2.10. To what extent have youth housing and service providers and/or State or Local educational representatives, and CoC representatives participated in each other's meetings over the past 12 months?

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	5
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenille justice or out of school time) attended by CoC representatives:	2
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	2

3B-2.10a. Given the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local eduction liaisons and State educational coordinators.
(limit 1000 characters)

CoC and school district liaisons work together to develop safeguards to protect students from discrimination based on homelessness by having local education stakeholders on committees who are involved in strategic planning activities regarding homelessness and children. As a result, there is a joint process to identify families experiencing, or at risk of homelessness that often happens while complying with the immediate enrollment mandate because of the lack of, or inaccurate, paperwork. Efforts to confirm the student's living situation are grounded in sensitivity and respect bearing in mind the best interest of the student. Thus, verifying the living status of students through landlords and law enforcement is not practiced. Relationships have been established with shelters and transitional housing programs to assist in identifying students in ways not to create barriers and not embarrass families by conducting minimal investigation to verify the living situation and conditions.

3B-2.11. How does the CoC make sure that homeless participants are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. In addition, include how the CoC, together with its youth and educational partners (e.g. RHY, schools, juvenilee justice and children welfare agencies), identifies participants who are eligible for CoC or ESG programs. (limit 2000 characters)

The CoC has regular meetings with local school district liaisons and mutually provide information and resources. Together, they work with CoC and ESG funded programs to identify homeless children and youth through the coordinated entry system. Once placed in a CoC and ESG funded program, program representatives' work with liaisons through designated staff to ensure the identification of homeless youth and children. They also work together to inform homeless families of eligibility for McKinney-Vento education services which includes ensuring that families are aware of educational rights through regular school mailings and handouts at the beginning of the school year. Such materials are provided in English and Spanish and reviewed orally between families, children, youth, case managers, and liaisons. More specifically, they assure families receive a letter verifying eligibility for services, ensure transportation (bused to their school of origin if possible); formally reviews educational rights with parents; posts Educational Rights at program sites; provide mutual advocacy when educational rights are violated, have access to academic tutoring and counseling, and incorporate education in exit planning with clients. If possible, they help ensure every homeless child and youth remain enrolled in the school of their original residence prior to becoming homeless. When necessary, they give families and youth access to shelters and transitional housing programs closest to the school where they are enrolled. Also, when necessary, they work together to help enroll children escaping Domestic Violence in a school of their choice within the district and establish procedures to protect their safety and rights. CoC and ESG funded programs inform liaisons when children have exited their programs to help ensure their education continues uninterrupted.

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

Objective 3: Ending Veterans Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

Opening Doors outlines the goal of ending Veteran homelessness by the end of 2015. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2015 PIT count compared to 2014 (or 2013 if an unsheltered count was not conducted in 2014).

	2014 (for unsheltered count, most recent year conducted)	2015	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	140	103	-37
Sheltered count of homeless veterans:	22	16	-6
Unsheltered count of homeless veterans:	118	87	-31

3B-3.1a. Explain the reason(s) for any increase, decrease or no change in the total number of homeless veterans in the CoC as reported in the 2015 PIT count compared to the 2014 PIT count.
(limit 1000 characters)

Total number of vets decreased. HUD VASH vouchers and SSVF funding were two of the primary reasons as to why there was a decrease. The CoC received 11 HUD VASH vouchers in 2014 and $1,717,296 in SSVF funding that covers Los Angeles, Ventura and Santa Barbara Counties. Salvation Army (SSVF provider) anticipated serving 80 Veteran households with SSVF funds in Ventura County.

3B-3.2. How is the CoC ensuring that Veterans that are eligible for VA services are identified, assessed and referred to appropriate resources, i.e. HUD-VASH and SSVF?
(limit 1000 characters)

There are several ways: 1) having street outreach teams create a community-wide list of veterans that includes those who are chronically homeless and the hardest-to-reach; 2) implementing a coordinated entry system in which street outreach workers and other homeless services staff enter veterans into the system that helps match them to appropriate housing and services; 3) sharing the community-wide list of veterans across agencies that target and prioritize veterans eligible for VA housing programs; 4) assigning veterans to housing navigators that help identify housing and help veterans obtain and maintain permanent housing; 5) implementing a Housing First approach that moves veterans into permanent housing as quickly as possible with the right level of services; 6) ensuring that the right level of services including connections to employment and coordination with legal services if needed.

3B-3.3. For Veterans who are not eligible for homeless assistance through the U.S Department of Veterans Affairs Programs, how is the CoC prioritizing CoC Program-funded resources to serve this population?
(limit 1000 characters)

An action plan for veterans who are determined to be ineligible for VA services is initiated by the interagency group and assigned to housing navigators who implement a housing first approach. The primary housing resources include Shelter Plus Care program and permanent supportive housing units. The total number of shelter plus care certificates is 77 and the total number of permanent supportive housing units is 472. Approximately, 8% of the total number of PSH units and units subsidized by S+C turnover annually.

CoC Program-funded projects prioritize veterans and their families who cannot be effectively assisted with VA services. When it is determined a veteran cannot be effectively assisted with VA housing and services and has the same level of need as a non-veteran (as determined using a standardized assessment tool) the veteran receives priority.

3B-3.4. Compare the total number of homeless Veterans in the CoC AND the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2015 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2015	% Difference
Total PIT count of sheltered and unsheltered homeless veterans:	19	103	442.11%
Unsheltered count of homeless veterans:	13	87	569.23%

**3B-3.5. Indicate from the dropdown whether   No
you are on target to end Veteran
homelessness
by the end of 2015.**

This question will not be scored.

**3B-3.5a. If "Yes," what are the strategies being used to maximize your
current resources to meet this goal? If "No," what resources or technical
assistance would help you reach the goal of ending Veteran
homelessness by the end of 2015?
(limit 1000 characters)**

The CoC is working collaboratively with all Veteran Service providers to
prioritize resources and work towards goal of ending Veteran Homelessness in
the County. The CoC has accepted Vets@Home technical assistance to assist
with this collaborative effort and increasing housing resources for ending
veteran homelessness. The primary challenge is finding willing landlords in the
current rental market. Our community is experiencing a high cost/low vacancy
rental market and there is ongoing efforts to develop relationships with landlords
and increase the housing inventory.

4A. Accessing Mainstream Benefits

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

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

4A-2. Based on the CoC's FY 2015 new and renewal project applications, what percentage of projects have demonstrated that the project is assisting project participants to obtain mainstream benefits, which includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?

FY 2015 Assistance with Mainstream Benefits

Total number of project applications in the FY 2015 competition (new and renewal):	17
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 3a, 3b, 3c, 4, and 4a on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	16
Percentage of renewal and new project applications in the FY 2015 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	94%

**4A-3. List the healthcare organizations you are collaborating with to facilitate health insurance enrollment (e.g. Medicaid, Affordable Care Act options) for program participants. For each healthcare partner, detail the specific outcomes resulting from the partnership in the establishment of benefits for program participants.
(limit 1000 characters)**

The CoC is in a Medicaid expansion State which is California.
The County of Ventura's Human Services Agency subcontracts with Community Action of Ventura County (CAVC), a homeless service provider, to provide Med-Cal Outreach and Enrollment Assistance to the following subpopulations: 1) Chronically Homeless; 2) Substance Abusers; and 3) The Mentally Ill. CAVC has met its mandate over the past 18 months to enroll 120 participants each month.

In addition, Ventura County's Healthcare for the Homeless, conducts mobile One-Stops throughout Ventura County. The program enrolls an average of 20 participants per week into Covered California insurance programs, including Medi-Cal.

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

Educational materials:	X
In-Person Trainings:	X
Transportation to medical appointments:	X
Not Applicable or None:	

4B. Additional Policies

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

4B-1. Based on the CoC's FY 2015 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH) and SSO (non-Coordinated Entry) projects in the CoC are low barrier? Meaning that they do not screen out potential participants based on those clients possessing a) too little or little income, b) active or history of substance use, c) criminal record, with exceptions for state-mandated restrictions, and d) history of domestic violence.

FY 2015 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2015 competition (new and renewal):	17
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2015 competition:	17
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2015 competition that will be designated as "low barrier":	100%

4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), RRH, SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2015 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

FY 2015 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2015 competition (new and renewal):	17
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2015 competition:	17
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2015 competition that will be designated as Housing First:	100%

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

Direct outreach and marketing:	X
Use of phone or internet-based services like 211:	X
Marketing in languages commonly spoken in the community:	X
Making physical and virtual locations accessible to those with disabilities:	X
Not applicable:	

4B-4. Compare the number of RRH units available to serve any population from the 2014 and 2015 HIC.

		2014	2015	Difference
RRH units available to serve any population in the HIC:		0	129	129

4B-5. Are any new proposed project applications requesting $200,000 or more in funding for housing rehabilitation or new construction?

Yes

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

Following the County of Ventura Section 3 plan. Implementation of this policy is carried out by awarding of contracts to contractors, vendors and suppliers to create employment and business opportunities for residents of Ventura County. Covered project expenditures must be directed toward qualified Section 3 residents and contractors must comply with regulations the same as direct recipients.
Many Mansions will follow the Section 3 policy that includes establishing a preference policy for hiring low and very low income persons, advertise and recruit from job and career centers, following the established policy for Section 3 contracts greater than $100,000.

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

4B-7a. If "Yes" in Question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)

N/A

4B-8. Has the project been affected by a major disaster, as declared by President Obama under Title IV of the Robert T. Stafford Act in the 12 months prior to the opening of the FY 2015 CoC Program Competition?   No

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

N/A

4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD in the past two years (since the submission of the FY 2012 application)? This response does not affect the scoring of this application.   Yes

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

This response does not affect the scoring of this application.

CoC Governance:	X
CoC Systems Performance Measurement:	X
Coordinated Entry:	X
Data reporting and data analysis:	X
HMIS:	X
Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	X
Maximizing the use of mainstream resources:	
Retooling transitional housing:	
Rapid re-housing:	
Under-performing program recipient, subrecipient or project:	X
Not applicable:	

4B-9b. If TA was received, indicate the type(s) of TA received, using the categories listed in 4B-9a, the month and year it was received and then indicate the value of the TA to the CoC/recipient/subrecipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

This response does not affect the scoring of this application.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance
NAEH System Design Clinic	10/14/2015	5
Vets @ Home	10/28/2015	5
Bowman-HMIS	09/01/2015	5

4C. Attachments

Instructions:

For guidance on completing this form, please reference the FY 2015 CoC Application Detailed Instructions, the CoC Application Instructional Guides and the FY 2015 CoC Program NOFA. Please submit technical questions to the HUDExchange Ask A Question.

 For required attachments related to rejected projects, if the CoC did not reject any projects then attach a document that says "Does Not Apply".

Document Type	Required?	Document Description	Date Attached
01. 2015 CoC Consolidated Application: Evidence of the CoC's Communication to Rejected Projects	Yes	Re-allocated proj...	11/02/2015
02. 2015 CoC Consolidated Application: Public Posting Evidence	Yes	CoC Consolidated ...	11/17/2015
03. CoC Rating and Review Procedure	Yes	CoC Rating and Re...	11/09/2015
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	CoC Rating and Re...	11/12/2015
05. CoCs Process for Reallocating	Yes	CoC Process for R...	11/12/2015
06. CoC's Governance Charter	Yes	CoC Governance Ch...	11/09/2015
07. HMIS Policy and Procedures Manual	Yes	HMIS Policy and P...	11/02/2015
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Admin Plan AH...	11/12/2015
10. CoC-HMIS MOU (if referenced in the CoC's Goverance Charter)	No	CoC HMIS MOU	11/02/2015
11. CoC Written Standards for Order of Priority	No	Ventura County Wr...	11/02/2015
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes	No		
13. Other	No		
14. Other	No		
15. Other	No		

Attachment Details

Document Description: Re-allocated project Letters

Attachment Details

Document Description: CoC Consolidated Application Public Posting

Attachment Details

Document Description: CoC Rating and Review Procedure

Attachment Details

Document Description: CoC Rating and Review Public Posting Evidence

Attachment Details

Document Description: CoC Process for Reallocating

Attachment Details

Document Description: CoC Governance Charter

Attachment Details

Document Description: HMIS Policy and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Admin Plan AHA, Ventura, Oxnard

Attachment Details

Document Description: CoC HMIS MOU

Attachment Details

Document Description: Ventura County Written Standards

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

Page	Last Updated
1A. Identification	11/12/2015
1B. CoC Engagement	11/18/2015
1C. Coordination	11/18/2015
1D. CoC Discharge Planning	11/12/2015
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1F. Project Review	11/18/2015
1G. Addressing Project Capacity	11/18/2015
2A. HMIS Implementation	11/12/2015
2B. HMIS Funding Sources	11/12/2015
2C. HMIS Beds	11/18/2015
2D. HMIS Data Quality	11/18/2015
2E. Sheltered PIT	11/18/2015
2F. Sheltered Data - Methods	11/12/2015
2G. Sheltered Data - Quality	11/12/2015
2H. Unsheltered PIT	11/18/2015
2I. Unsheltered Data - Methods	11/18/2015
2J. Unsheltered Data - Quality	11/18/2015
3A. System Performance	11/18/2015
3B. Objective 1	11/18/2015
3B. Objective 2	11/12/2015
3B. Objective 3	11/12/2015
4A. Benefits	11/12/2015
4B. Additional Policies	11/12/2015
4C. Attachments	11/17/2015
Submission Summary	No Input Required

county of ventura

COUNTY EXECUTIVE OFFICE
MICHAEL POWERS
County Executive Officer

J. Matthew Carroll
Assistant County Executive Officer

Paul Derse
Assistant County Executive Officer/
Chief Financial Officer

Catherine Rodriguez
Assistant County Executive Officer/
Labor Relations & Strategic Development

Shawn Atin
Human Resources Director

October 26, 2015

Mark Gisler, Executive Director
The Salvation Army, Santa Barbara
650 South Petit
Ventura, CA 93004

Dear Mr. Gisler,

On behalf of the Continuum of Care (CoC) Board, I am writing to inform you that the decision was made to reallocate funding from the two lowest ranked projects to new priority projects through an RFP. The Salvation Army Transitional Living Center (TLC) and one other transitional housing project were not recommended for renewal based upon performance data from FY14 APR, the target population served and project scoring information outlined in the FY15 CoC NOFA. The review and scoring process was the same for all projects ranked in the Continuum. The recommendations of the Data and Review Committee were approved after considerable discussion and review of your supporting documentation requesting reconsideration.

A reduction in funding was not considered because the FY15 CoC NOFA is the most highly competitive process in the history of the program. If HUD does not renew a project, it would result in a permanent loss of funding for the Continuum of Care as a whole and the CoC Board was unwilling to take that risk with either of these projects. Despite the recommendation regarding the TLC, Salvation Army remains eligible to apply for priority projects such as Rapid Re-Housing and Permanent Supportive Housing. All applications received in response to the RFPs issued on behalf of the CoC will be evaluated in relation to other proposals, and will assess criteria and other factors outlined in the NOFA.

The Salvation Army may choose to apply for the renewal in e-SNAPS despite the CoC Board's decision. If the CoC rejects the application, Salvation Army can appeal that decision formally through steps found beginning on page 58 of the FY15 CoC NOFA.

In closing, please know that the CoC Board's decision was a difficult one as members are truly appreciative of your organization's commitment and dedication to serve the most vulnerable in our community. Unfortunately, in order to enhance our chances of preserving funding, painful decisions had to be made to align with the NOFA priorities. If you have further questions, please don't hesitate to contact Tara Carruth of my staff at 805 654-3838.

Sincerely,

Christy Madden
Sr. Deputy Executive Officer

county of ventura

COUNTY EXECUTIVE OFFICE
MICHAEL POWERS
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Assistant County Executive Officer

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Catherine Rodriguez
Assistant County Executive Officer/
Labor Relations & Strategic Development

Shawn Atin
Human Resources Director

October 26, 2015

Mick Baer, Executive Director
Khepera House
330 Ventura Avenue
Ventura, CA 93001

Dear Mr. Baer,

On behalf of the Continuum of Care (CoC) Board, I am writing to inform you that the decision was made to reallocate funding from the two lowest ranked projects to new priority projects through an RFP. Khepera House L.I.F.E. and one other transitional housing project were not recommended for renewal based upon performance data from FY14 APR, the target population served and project scoring information outlined in the FY15 CoC NOFA. The review and scoring process was the same for all projects ranked in the Continuum. The recommendations of the Data and Review Committee were approved after considerable discussion and review of your supporting documentation requesting reconsideration.

A reduction in funding was not considered because the FY15 CoC NOFA is the most highly competitive process in the history of the program. If HUD does not renew a project, it would result in a permanent loss of funding for the Continuum of Care as a whole and the CoC Board was unwilling to take that risk with either of these projects. Despite the recommendation regarding the Khepera House L.I.F.E. Program remains eligible to apply for priority projects such as Rapid Re-Housing and Permanent Supportive Housing. All applications received in response to the RFPs issued on behalf of the CoC will be evaluated in relation to other proposals, and will assess criteria and other factors outlined in the NOFA.

Khepera House may choose to apply for the renewal in e-SNAPS despite the CoC Board's decision. If the CoC rejects the application, Khepera House can appeal that decision formally through steps found beginning on page 58 of the FY15 CoC NOFA.

In closing, please know that the CoC Board's decision was a difficult one as members are truly appreciative of your organization's commitment and dedication to serve the most vulnerable in our community. Unfortunately, in order to enhance our chances of preserving funding, painful decisions had to be made to align with the NOFA priorities. If you have further questions, please don't hesitate to contact Tara Carruth of my staff at 805 654-3838.

Sincerely,

Christy Madden
Sr. Deputy Executive Officer

COUNTY OF VENTURA CALIFORNIA

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Homeless Services Continuum of Care

It is the **mission** of the County-wide Continuum of Care (the CoC) to facilitate an end to homelessness in Ventura County by coordinating funding, housing, and service strategies that prevent and end homelessness, in accordance with the guidelines defined in the HEARTH Act, and applicable rules, and the recommended activities in the 2013 Recalibrated County of Ventura 10-Year Plan to End Homelessness. For more details on the CoC and its Standing Committees, click on the button on the left, **"Continuum of Care Committees."**

HUD Continuum of Care Planning Calendar — Grant Funding Cycle 2015

2015 CoC NOFA

2015 CoC Final Ranking of Projects

2015 NOFA Ranking and Selection Criteria

Request for Proposals (RFP) – Coordinated Entry System

Request for Proposals (RFP) – Permanent Supportive Housing/Rapid Re-Housing

2015 Ventura County (CA 611) Continuum of Care Collaborative Application

2015 Ventura County (CA 611) CoC Project Priority Listing

Recalibrated 10-Year Plan to End Homelessness 📄

Click on the link to read the recently updated 10-Year Plan to End Homelessness in Ventura County, report updated May 2013 to include acknowledgements and additional attachment)

Ventura County Homeless Count and Subpopulation Survey

• 2015
• 2014
• 2013

Information for Homeless Assistance Providers

Click on the links below for information on local grant opportunities for homeless assistance service and housing providers and other resources on preventing and ending homelessness

» Ventura County Homeless Management Information System (HMIS): Working Together to End Homelessness 🔗

» CoC Start-up Conference for FY 2012 Grantees - October 15, 2013 📄

COMMUNITY DEVELOPMENT
HOUSING - HOMEOWNER AND RENTAL
FAIR HOUSING
HUD GRANTS
HUD PLANS & REPORTS
HOMELESS GRANTS CONTINUUM OF CARE
CONTINUUM OF CARE COMMITTEES
POLICIES AND GUIDELINES
LINKS
REDEVELOPMENT AGENCY

Subject: 2015 CoC Consolidated Application and Priority Listing Posting

Good Afternoon,

Please see this link to view the public posting of the 2015 Continuum of Care Consolidated Application and Project Priority Listing.

http://www.ventura.org/community-development/homeless-grants

Please let me know if you have any questions or feedback. We will be working on final edits and hope to submit by the end of the day tomorrow.

Thank you!
Tara

Tara L. Carruth
HUD Homeless Grants Management
County of Ventura, County Executive Office
800 S. Victoria Avenue, L#1940
Ventura, CA 93009
805-654-3838 (phone)
805-654-5106 (fax)

Letter of Intent (LOI)

2015 Renewal Applicants

for
Continuum of Care (CoC)
U.S. Department of Housing and Urban Development (HUD)
Homeless Assistance Programs

County of Ventura Continuum of Care

Letter of Intent are due Monday May 18, 2015 at 5pm
Submit to:
Tara Carruth
805-654-3838
County Executive Office
By email: tara.carruth@ventura.org
By Mail: 800 S. Victoria Ave L#1940
Ventura, CA 93009

The County of Ventura Continuum of Care (CoC) is requiring agencies interested in renewing projects for funding in the 2015 HUD Continuum of Care Program Consolidated Application to submit a Letter of Interest (LOI). An LOI is required for all projects to be considered for inclusion in the 2015 Continuum of Care (CoC) Consolidated Application to the U.S. Department of Housing and Urban Development (HUD). HUD will review applications and make the final funding recommendations.

Renewal applicants are required to complete this LOI by answering all questions and providing the required documentation to pass the threshold. Renewal applicants passing the threshold will be recommended for submission of their application in e-snaps and inclusion in the HUD CoC competition. An Independent Review Panel, selected from within the CoC membership, will review the LOI using the approved 2015 Continuum of Care Application Renewal Project Evaluation Process. Threshold review includes, but not limited, to each applicant's performance based on the Annual Performance Reports (APR) generated from HMIS data and HUD threshold requirements; ability to spend grant funds and submission of claims per the specified timeframe; monitoring issues; and HMIS data quality.

Projects are considered eligible for renewal in the 2015 CoC competition if:

- The current contract will expire in calendar year 2016
- The project has been included in the final 2015 Grant Inventory Worksheet (GIW);
- The project has met all performance spending and capacity requirements;
- The project has met any other requirements outlined in the 2015 HUD CoC Notice of Funding Availability (NOFA).

The CoC reserves the right not to renew grants that have exhibited serious capacity issues in prior grants (including performance and financial problems); do not sufficiently participate in HMIS; have unresolved monitoring issues; and/or do not meet the priorities of the CoC.

Background Information

The U.S. Department of Housing and Urban Development (HUD) states that one of the primary responsibilities of the CoC is to develop a review process for selection and ranking criteria for prioritizing renewal and new projects for CoC funding. This is especially important for those communities that submit multiple renewal and new project requests to compete for funding.

In addition, HUD states that communities should have a mechanism for ranking and selecting projects that demonstrate decisions were based on pre-established selection criteria that were logical and fair. Criteria may include capacity to implement and manage the proposed project, experience working with the target population, cost effectiveness, etc. Communities should emphasize and rank projects based on the project's ability to articulate achievable outcome measures against which the project can be evaluated in future years. This is especially important as projects come up for renewal funding and communities must assess performance.

HUD also notes that it is important that renewal projects meet minimum project eligibility, capacity, timeliness, and performance standards identified in the NOFA or they will be rejected from consideration for funding. When considering renewal projects for award, HUD will review information in the Line of Credit Control System (LOCCS); Annual Performance Reports (APRs); and information provided from the local HUD/CPD Field Office, including monitoring reports and A-133 audit reports as applicable; as well as performance standards on prior grants. Projects will be assessed on the following criteria using a pass/fail basis:

(1) The project applicant's performance against plans and goals established in the initial application as amended;

(2) Project applicants must demonstrate all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met;

(3) The project applicant's performance in assisting program participants to achieve and maintain independent living and record of success; and

(4) Evidence that a project applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site may result in a rejection of the application from the competition. HUD reserves the right to reduce or reject a funding request from the project applicant for the following reasons:

   (a) Outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon;

   (b) Audit finding(s) for which a response is overdue or unsatisfactory;

   (c) History of inadequate financial management accounting practices;

   (d) Evidence of untimely expenditures on prior award;

   (e) History of other major capacity issues that have significantly impacted the operation of the project and its performance;

   (f) Timeliness in reimbursing subrecipients for eligible costs. HUD will consider a project applicant as meeting this standard if it has drawn down grant funds at least once per month; or

   (g) History of serving ineligible persons, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes.

Exhibit 1

Instructions: Please complete one letter for each renewal application.

Lead Agency Information

CCR #:
DUNS #:
Agency Name:
Agency Address:
City: State: Zip:
Phone: Fax: email:

Grant/Application Contact Person:
Phone: email:

Agency Director:
Phone: email:

Project Information:
Name of Project:
Project Address:
Grant amount:
Grant Term:
Expiration Date:

Program Type:

Primary Population:
Total Number of Units:
Total Number of Beds:

Name and Signature of Person who will complete the LOI:

_____   _____

I certify, on behalf of my agency, that all information contained in this application is accurate and true, based on our current project records for the project. I understand that falsifying information or failing to provide accurate information will have a negative impact on my overall review and may result in removal from the Continuum of Care Application to HUD.

_____
Executive Director/CEO/President   Date

Exhibit 2:
Rating and Performance Measures

HUD encourages the following rating and performance measures to be used to determine which projects to accept or reject. Please respond to each rating and performance measure. Incomplete information will not be accepted.

I. HUD APR Performance Results

The Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program interim rule states that HUD may terminate the renewal of any grant and require the recipient to repay the renewal grant if the recipient fails to submit a HUD Annual Performance Report (APR) within 90 days of the end of the program year or if the recipient submits an APR that HUD deems unacceptable or shows noncompliance with the requirements of the grant and this part. The recipient's submission of the APR helps HUD review whether the recipient is carrying out the project in the manner proposed in the application. Recipients agree to submit an APR as a condition of their grant agreement. This requirement allows HUD to ensure that recipients submit APRs on grant agreements that have expired as a condition of receiving approval for a new grant agreement for the renewal project.

> Did your agency submit a HUD Annual Performance Report (APR) for this project within 90 days of the end of the last program year? ☐ Yes ☐ No

Performance Measures

HUD states that CoCs must clearly demonstrate project participants' success in remaining in permanent supportive housing as reported in 12 month period for all APRs from all CoC-funded permanent supportive housing projects within the CoC. HUD's national goal is **at least 80 percent** of participants remain in CoC-funded permanent housing or exited to permanent housing (subsidized or unsubsidized).

HUD also states that CoCs must clearly demonstrate the overall percentage of program participants obtaining employment income. The overall percentage of program participants obtaining employment income must meet HUD's national goal of **at least 20 percent** or higher and the program participants with other income should be **at least 54 percent** as reported in a 12 month period for all project APRs or the CoC must show an increase from the previous year to the current year.

All PH project application for renewal must meet or exceed project quality goals established by HUD and CoC guidelines. According to your most recent APR:

For Permanent Housing

1. What was the % of persons who remained in the permanent housing project as of the end of the operating year or exited to permanent housing (subsidized or unsubsidized)? _____

    If the percentage was lower than 80%, please explain why.

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

NOTE: Please answer question 2 or 3 below based on which of these two questions that you chose to answer in your 2014 renewal application (see section 6A. Standard Performance Measures)

2. What was the % of persons age 18 through 61 who maintained or increased their earned income as of the end of the operating year or project exit? _____

    If the percentage was lower than 20%, please explain why.

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

3. What was the % of persons age 18 and older who maintained or increased their total income (from all sources) as of the end of the operating year or project exit? _____

    If the percentage was lower than 54%, please explain why.

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

4. What was the percentage of project participants obtained mainstream benefits (non-cash benefits)? _____

    If the percentage was lower than 56%, please explain why.

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

5. What percentage of project participants came from the street or other locations not meant for human habitation, emergency shelters, or safe havens? _____

If the percentage was lower than 60%, please explain why.

This is a new project and has not started yet: ☐
This is not applicable to this project: ☐

In addition, PH providers should provide a response to the questions below:
- Does your program implement a housing first approach? ☐ Yes ☐ No
    - Are applicants to your program required to have income prior to admission? ☐ Yes ☐ No
    - Are applicants required to be "clean and sober" or "treatment compliant" prior to admission? ☐ Yes ☐ No
    - Are tenants able to be evicted for not following through on services and/or treatment plan? ☐ Yes ☐ No

- Does your program fill vacant beds with only chronically homeless persons? _____

    If not, please explain.

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

For Transitional Housing

1. What was the percentage of persons who exited to permanent housing (subsidized or un-subsidized) during the operating year _____

    If the percentage was lower than 80%, please explain why.

2. What was the % of persons age 18 through 61 who increased their earned income as of the end of the operating year or project exit? _____

    If the percentage was lower than the 20%, please explain why.

3. The % of persons age 18 and older who increased their total income (from all sources) as of the end of the operating year or project exit._____

    If the percentage was lower than the 54%, please explain why.

II. Financial Reporting and Claims Submission

A renewal project's demonstrated ability to drawdown and spend grant funds timely will be a factor in evaluating performance of each grant. HUD will recapture grant funds remaining unspent at the end of the previous grant period when it renews a grant.

1. Are your monthly claims submitted timely (i.e. by the end of the month following the service month)? ☐ Yes ☐ No

   If the answer is no, please explain your response.

      This is a new project and has not started yet: ☐
      This is not applicable to this project: ☐

2. Has the project returned any funds in the last 3 years?

Year	Amount Returned	Reason for Return
2013		
2012		
2011		

      This is a new project and has not started yet: ☐
      This is not applicable to this project: ☐

3. Cost effectiveness

   HUD states that the project must be cost-effective and not deviate substantially from the norm in that locale for the type of activity including case management and other supportive services.
   Is your project cost-effective concerning case management and other supportive services?
   ☐ Yes ☐ No

   Please explain your response.

      This is a new project and has not started yet: ☐
      This is not applicable to this project: ☐

   • What are the total costs of your project?
   • Please list all of the revenue sources and amounts to offset the total costs of your project.

III. HMIS Participation and Data Quality

The Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program interim rule places a high emphasis on having a functioning and comprehensive HMIS in the CoC jurisdiction as it is critical to gathering unduplicated, aggregated data on homelessness in the community for both the CoC and ESG Programs.

1. Does this project provide client level data to HMIS?   ☐ Yes ☐ No

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

    2. If the project is providing participant data in the HMIS – indicate the total number of participants served by the project, and the total number of clients reported in HMIS.

    Total number of participants served by the project: _____
    Total number of clients reported in the HMIS: _____

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

    3. If the project is not providing participant data in the HMIS – indicate reason(s) for non-participation. Cite specific law.

    ☐ Federal law prohibits   ☐ State law prohibits
    ☐ New project not yet in operation   ☐ Other (please specify prohibition)

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

    4. For those participant records that were reported in the HMIS, indicate the percentage of values that were missing ("Null or Missing Values") and/or unknown ("Don't Know or Refused"). If there were no unknown values, note a "0" value.

    * Indicate the percentage of unduplicated client records with null or missing values during the last 10 days of January 2015:

    *You may attach HMIS reports in place of filling out the table below.

Universal Data Element	Records with no values (%)	Records where value is refused or unknown (%)
* Social Security Number		
* Date of Birth		
* Race		
* Ethnicity		
* Gender		
* Veteran Status		
* Disabling Condition		
* Residence Prior to Program Entry		
* Entry Date		
* Exit Date		
* Destination		
* Length of Time on Street, ES or SH		

This is a new project and has not started yet: ☐
This is not applicable to this project: ☐

5. Point-in-Time Count of Households Served on the Last Wednesday in

	HH with Children	HH w/o Children	HH w/ Children Only	Total
January (2015				
April (2015				
July (2014)				
October (2014				

This is a new project and has not started yet: ☐
This is not applicable to this project: ☐

IV. Independent Audit

Please submit your organization's most recent audits for the last two years (conducted within the last three years) by a certified CPA, including the management letter with this LOI.

V. Match

Match must equal 25 percent of the total grant request including Admin costs but excluding leasing costs (i.e., any funds identified for Leased Units and Leased Structures). Match must be met on an annual basis. HUD requires match letters to be submitted with the e-snaps application. Match contributions can be cash, in-kind, or a combination of the two; and, match must be used for an eligible cost as set forth in Subpart D of CoC Program interim rule. For an in-kind match, the recipient may use the value of property, equipment, goods, or services contributed to the project, provided that, if the recipient or sub recipient had to pay for such items with grant funds, the costs would have been eligible. If third party services are to be used as match, the third party service provider that will deliver the services must enter into a memorandum of understanding (MOU) before the grant is executed documenting that the third part will provide such services and value towards the project.

- Will your agency be able to provide the match requirement for your renewal project?
  ☐ Yes ☐ No

VI. Leveraging

HUD Continuum of Care Homeless program funding is limited and can provide only a portion of the resources needed to successfully address the needs of homeless families and individuals. HUD encourages applicants to use supplemental resources, including state and local appropriated funds, to address homeless needs. Leveraging includes all funds, resources, and/or services that the applicant can secure on all cash matching behalf of the client being served by the proposed project. Leveraging includes any other services, supplies, equipment, space, etc. that are provided by sources other than the CoC.

- Will your agency be able to provide the leveraging requirement (up to 150%) for your renewal project? ☐ Yes ☐ No

VII. HUD and CoC Monitoring Findings

HUD requires that CoCs review any monitoring findings.

6. Has your agency received an audit finding on your most recent A-133 or Single Audit?
   ☐ Yes ☐ No

If Yes, please explain the finding.
    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

7. Has your agency received a fiscal monitoring finding on your most recent DPSS monitoring?
☐ Yes ☐ No

If Yes, please explain the finding.

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

VIII. Clients Survey/Feedback

HUD encourages client surveys particularly exit surveys.

- Does your renewal program conduct exit surveys or interviews with clients?
  ☐ Yes ☐ No

  In no, please explain why.

  This is a new project and has not started yet: ☐
  This is not applicable to this project: ☐

IX. Fiscal and Program Issues

- Does your organization currently have any unresolved fiscal, reporting, or program issues with any of its funding sources? ☐ Yes ☐ No

  If yes, please explain.

      This is a new project and has not started yet: ☐
      This is not applicable to this project: ☐

- Have any funds been returned to any funders within the last 24 months? ☐ Yes ☐No
  If yes, please explain.

  This is a new project and has not started yet: ☐
  This is not applicable to this project: ☐

X. Housing Quality Standards

All housing leased with CoC funds or where rental assistance payments are made with CoC funds must meet applicable Housing Quality Standards (HQS).

- Does your project meet applicable Housing Quality Standards
  ☐ Yes ☐ No

  Please briefly explain your inspection process for HQS.

  This is a new project and has not started yet: ☐
  This is not applicable to this project: ☐

XI. Review CoC Membership Involvement

HUD states that a successful CoC will have involvement from a variety of organizations representing the public and private sectors, as well as interested individuals within the CoC jurisdiction(s). These organizations should have an active role in the CoC.

- Describe what local Continuum of Care committees, subcommittees, and/or working groups that your agency participates in on a regular basis. Please include the names and titles of those participating as well as their level of involvement/participation.

  This is a new project and has not started yet: ☐
  This is not applicable to this project: ☐

XII. Participation in Centralized/Coordinated Entry System

The CoC program interim rule requires CoCs to use a coordinated entry system (CES), including a standardized assessment tool. The coordinated assessment (entry) is intended to prioritize resources for those with the greatest need, match people with the services that are most likely to help them exit homelessness, reduce the time it takes for clients to access services, and ensure that limited resources are allocated efficiently.

Are you a current participant or do you agree to participate in the CoC's coordinated entry/assessment system? ☐ Yes ☐ No

Do you agree to fill your PSH vacancies through the CES? ☐ Yes ☐ No

Exhibit 3
HEARTH Act Compliance

This section of the LOI asks questions of all renewal projects to ensure compliance with the requirements of the HEARTH Act. (Please note, this section does not encompass all changes under the HEARTH Act and it is recommended that all projects should review the Act in its entirety).

I. Participation of Homeless Individuals

(1) Each recipient and subrecipient must provide for the participation of not less than one homeless individual or formerly homeless individual on the board of directors or other equivalent policymaking entity of the recipient or subrecipient, to the extent that such entity considers and makes policies and decisions regarding any project, supportive services, or assistance provided under this part. This requirement is waived if a recipient or subrecipient is unable to meet such requirement and obtains HUD approval for a plan to otherwise consult with homeless or formerly homeless persons when considering and making policies and decisions.

(2) Each recipient and subrecipient of assistance under this part must, to the maximum extent practicable, involve homeless individuals and families through employment; volunteer services; or otherwise in constructing, rehabilitating, maintaining, and operating the project, and in providing supportive services for the project.

- Does your agency provide for the participation of not less than one homeless individual or formerly homeless individual on the board of directors or other equivalent policymaking entity of the recipient or subrecipient, to the extent that such entity considers and makes policies and decisions regarding any project, supportive services, or assistance provided under this part. This requirement is waived if a recipient or subrecipient is unable to meet such requirement and obtains HUD approval for a plan to otherwise consult with homeless or formerly homeless persons when considering and making policies and decisions? ☐ Yes ☐ No

    If not, please provide an action plan/timeline on when your agency will be compliant with this requirement.

    This is a new project and has not started yet: ☐
    This is not applicable to this project: ☐

- Does your agency, to the maximum extent practicable, involve homeless individuals and families through employment; volunteer services; or otherwise in constructing, rehabilitating, maintaining, and operating the project, and in providing supportive services for the project? ☐ Yes ☐ No

If not, please provide an action plan/timeline on when your agency will be compliant with this requirement.

This is a new project and has not started yet: ☐
This is not applicable to this project: ☐

II. Families with children Under age 18

Does the project accept all families with children under age 18 without regard to the age of any child? In general, under the HEARTH Act, any project sponsor receiving funds to provide emergency shelter, transitional housing, or permanent housing to families with children under age 18.

Note there is an exception outlined in the Act: Project sponsors of transitional housing receiving funds may target transitional housing resources to families with children of a specific age only if the project sponsor: (1) operates a transitional housing program that has a primary purpose of implementing evidence based practice that requires that housing units be targeted to families with children in a specific age group; and (2) provides assurances, as the Secretary shall require, that an equivalent appropriate alternative living arrangement for the whole family or household unit has been secured.

☐ Yes. Project certifies that is accepts all families with children under age 18 without regard to the age of any child.

☐ No. Project does not comply with this requirement. A narrative is attached explaining how the project will comply with this HEARTH Act requirement.

☐ No. Project does not comply with this requirement but qualifies for an exception because it is implementing an evidence based practice that requires housing units targeted to families with children in a specific age group. A narrative is attached explaining how the project will comply with the exception, including identification of the evidenced based practice being utilized.

☐ N/A. Project does not serve families.

☐ N/A. Project is new and has not started yet.

III. Transitional Housing Lease Agreement

Transitional housing means housing, where all program participants have signed a lease or occupancy agreement, the purpose of which is to facilitate the movement of homeless individuals and families into permanent housing within 24 months or such longer period as HUD determines necessary. The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended.

- Do program participants have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended? ☐ Yes ☐ No

 If no, please explain why.

 This is a new project and has not started yet: ☐
 This is not applicable to this project: ☐

IV. Discrimination Policy

Federal and California State laws note that discrimination can be based on race, color, national origin or gender. Discrimination can also be based on age, religion, disability, familial status or sexual orientation.

Does your program deny services to potential recipients based on any of the following:

- Age   ☐ Yes ☐ No
- Color   ☐ Yes ☐ No
- Disability   ☐ Yes ☐ No
- Familial Status   ☐ Yes ☐ No
- Gender   ☐ Yes ☐ No
- Marital Status   ☐ Yes ☐ No
- National Origin   ☐ Yes ☐ No
- Race   ☐ Yes ☐ No
- Religion   ☐ Yes ☐ No
- Sexual Orientation   ☐ Yes ☐ No

If you answered "yes" to any of the above, please explain why.

V. Faith-based Activities

- Does your proposed renewal program use direct program funds to support or engage in any explicitly religious activities, including activities that involve overt religious content, such as worship, religious instruction, or proselytization, or any manner prohibited by law? ☐ Yes ☐ No

VI. § 578.95 Conflicts of Interest

Please read and initial to signify understanding and compliance.

(a) Procurement. For the procurement of property (goods, supplies, or equipment) and services, the recipient and its subrecipients must comply with the codes of conduct and conflict-of-interest requirements under 24 CFR 85.36 (for governments) and 24 CFR 84.42 (for private nonprofit organizations). **Initial** _____

(b) Continuum of Care board members. No Continuum of Care board member may participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefits to the organization that the member represents.

(c) Organizational conflict. An organizational conflict of interest arises when, because of activities or relationships with other persons or organizations, the recipient or subrecipient is unable or potentially unable to render impartial assistance in the provision of any type or amount of assistance under this part, or when a covered person's, as in paragraph (d)(1) of this section, objectivity in performing work with respect to any activity assisted under this part is or might be otherwise impaired. Such an organizational conflict would arise when a board member of an applicant participates in decision of the applicant concerning the award of a grant, or provision of other financial benefits, to the organization that such member represents. It would also arise when an employee of a recipient or subrecipient participates in making rent reasonableness determinations under § 578.49(b)(2) and § 578.51(g) and housing quality inspections of property under § 578.75(b) that the recipient, subrecipient, or related entity owns. **Initial** _____

(d) Other conflicts. For all other transactions and activities, the following restrictions apply:
(1) No covered person, meaning a person who is an employee, agent, consultant, officer, or elected or appointed official of the recipient or its subrecipients and who exercises or has exercised any functions or responsibilities with respect to activities assisted under this part, or who is in a position to participate in a decision-making process or gain inside information with regard to activities assisted under this part, may obtain a financial interest or benefit from an assisted activity, have a financial interest in any contract, subcontract, or agreement with respect to an assisted activity, or have a financial interest in the proceeds derived from an assisted activity, either for him or herself or for those with whom he or she has immediate family or business ties, during his or her tenure or during the one-year period following his or her tenure. **Initial** _____

Ranking and Selection Criteria for the Fiscal Year 2015
Continuum of Care Program Competition (NOFA)

BACKGROUND FROM THE NOFA

For the 2015 CoC Program Competition, approximately $1.83 billion is available for FY 2015. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects in the FY 2015 funding process, HUD continues to require Collaborative Applicants to rank all projects in two tiers. *(HUD has stated that Tier 2 will 15% this year. Strong emphasis on performance and encouraging CoCs to reallocate under-performing projects).*

The CoC must assign a unique rank to each project that it intends to submit to HUD for FY 2015 funding except for the PSH Bonus project. HUD strongly advises CoCs to rank higher those project applications the CoC determines are high priority, high performing, and meet the needs and gaps as identified by the CoC.

Each CoC must comprehensively review both new and renewal projects within its geographic area, using CoC-approved scoring criteria and selection priorities, to determine the extent to which each project is still necessary and addresses the listed policy priorities. Funds for projects that are determined to be underperforming, obsolete, or ineffective should be reallocated to new projects that are based on proven or promising models.

Reallocation this cycle will include the opportunity to reallocate funds to new permanent housing projects (PSH/RRH) as well as to HMIS and Coordinated Entry Systems.

CoCs should consider the policy priorities established in the NOFA in conjunction with local priorities to determine the ranking of new projects created through reallocation, CoC planning, UFA costs, and renewal project requests.

HUD'S POLICY AND PROGRAM PRIORITIES

(1) Strategic Resource Allocation
(2) Ending Chronic Homelessness—increasing beds, targeting chronic homeless, Housing First
(3) Ending Family Homelessness—Rapid Re-Housing
(4) Removing Barriers to CoC Resources—Coordinated Assessment, carefully review TH models for cost-effectiveness, performance and move towards
(5) Maximizing use of mainstream resources
(6) Building Partnerships
(7) Other Priority Populations

HUD'S PROJECT RANKING CRITERIA FOR THE COC PROGRAM COMPETITION FROM 2014 NOFA

Within the rank order established by the CoC, HUD will first select projects from **Tier 1** in the following order by CoC score:

(1) Renewal Permanent Housing projects, RRH and PSH
(2) Renewal HMIS
(3) New PSH projects created through reallocation for 100 percent chronically homeless
(4) New Rapid Re-housing projects created through reallocation for homeless households with children
(5) Renewal Safe Haven
(6) Renewal Transitional Housing
(7) SSO projects for centralized or coordinated assessment system;

Rationale for Preliminary Rankings

- Closely followed HUD's priorities and guidelines for ranking projects.

- Examine under-performing projects and consider reallocation

- Projects/agencies engagement in Continuum of Care efforts and Coordinated Entry will be weighed when ranking projects

- Projects that serve chronically homeless—those programs with dedicated CH beds were ranked higher on the list than programs without dedicated beds. Programs that described they would target chronically homeless for non-dedicated beds as they became available were ranked higher on the list.

- Projects implementing Housing First model ranked higher

- Transitional Housing programs ranked lower on list based on HUD's priority of permanent housing projects.

- Cost/Benefit ratios were considered when ranking projects within the project component (PH, PSH, TH)

PERFORMANCE MEASURES FROM THE 2015 NOFA

The following performance measures will be considered when evaluating the performance of renewal projects.

Housing Stability. Achieving housing stability – the ability to obtain and maintain permanent supportive housing or permanent housing – is critical for the homeless.

At least 80 percent of Project participants either remained in permanent housing, or exited from transitional housing to permanent housing (as reported in the most recently submitted APR).

Jobs and Income Growth. CoC Program-funded projects should assist project participants to maintain or increase income, which is one way to ensure housing stability and decrease the possibility of returning to homelessness.

Project Applicants must clearly demonstrate that participants in their project maintained or increased employment income during program participation as reported in all APRs.. **Maximum points will be awarded to applicable projects where 20 percent or more of participants in the projects have employment income.**

Project Applicants must clearly demonstrate that participants in all CoC Program-funded projects maintained or increased their income from sources other than employment (as recorded in all APRs). **Maximum points will be awarded to projects where 54 percent or more of participants in funded project have income from sources other than employment**

Mainstream Benefits. CoC Program-funded projects should assist project participants to obtain mainstream benefits, which is one way to ensure housing stability and decrease the possibility of returning to homelessness.

Project Applicants must clearly demonstrate that participants in project increased their mainstream benefits during program participation (as reported in all APRs). **Maximum points will be awarded to projects where at least 56 percent of participants obtain mainstream benefits.**

Rapid Re-Housing. Rapid re-housing allows the homeless to be provided permanent housing quickly without spending long periods in shelter or transitional housing. CoCs are evaluated based on the extent in which they are implementing a rapid re-housing model to reduce the number of homeless households with children.

Project Applicants must clearly demonstrate a plan to increase in the number of homeless households with children assisted through rapid re-housing programs between 2013 and 2015.

Ventura County Policy on Project Ranking and Tiering

Section I: Ventura County Policy on Project Re-Allocation, Ranking and Tiering

A. Policy Objectives:

In developing our local policy governing project ranking, re-allocation and tiering, Ventura County CoC's objectives are to:
- Comply with HUD requirements;
- Preserve funding for high performing projects;
- Shift investments from lower performing projects, which are at risk of losing HUD funding to new projects that help advance our community's goal of reducing homelessness and are in line with HUD priorities.

B. Project Review and Ranking Policy:

The Ventura County CoC will invite submissions for new and renewal projects and will conduct a review and ranking following the procedures stated in Sections III and IV.

The general approach to rating and ranking will be to organize projects into three groups, following the priority order established by HUD:
1) renewal PH and RRH;
2) new PH and RRH;
3) renewal transitional housing

Within each type, projects will be scored using a score system specific to that program type and placed within their ranked order, with renewal PSH and RRH in the first group (ordered by score), the new PSH and RRH in the second group (ordered by score), and the renewal Transitional Housing in the third group (ordered by score).

C. Tiering Policy

Once the rank order of projects has been determined the projects at the bottom of the list will fall into Tier 2 (15%). The CoC reserves the option of re-ordering the project list to place projects in Tier 2 to best position Ventura County to receive the maximum overall funding.

As HMIS is a HUD mandated requirement in order to receive Continuum of Care funding, it is strongly recommended as one of the top priorities in Tier 1 in order to secure funding for this authorized activity. Per HUD guidance, HMIS will be placed in Tier 1.

The CoC Planning Grant will be placed into Tier 2 because it is not a renewal project.

Section II: Process for Rating and Ranking of Renewal Projects

A: Rating and Ranking Process

A Letter of Intent (LOI) was issued by the CoC on May 4, 2015 to gather relevant performance and threshold documentation from each renewal project. LOIs were due to CoC staff by May 18' 2015.

All renewal projects will be ranked using an objective scoring system as approved as recommended by the CoC Data and Performance Committee. CoC Staff will use data provided through the LOI process (for both TH and PH renewals) to calculate a score for each renewal and use the results to develop the Project Priority Listing for review and approval by the CoC Board as recommended through the CoC Data and Performance Committee.

B. Scoring Criteria for Renewal Permanent Housing (PSH and RRH)

The scoring system will have a maximum of 100 points with 80 points for project performance and 20 points for threshold factors. Data to assess both performance and threshold criteria will be obtained from the information submitted by the applicants in their LOI response.

The performance measures will be based on those established by HUD and tracked through HMIS data:
- at least 80 percent of project participants either remained in permanent housing , or exited to another permanent housing location;
- at least 20 percent or more of project participants have employment income or SSI/SSDI for those who are not employable;
- at least 54 percent of project participant increased their income from sources other than employment in an operating year;
- at least 56 percent of project participants obtained mainstream benefits

Some renewing PH projects will not have an APR because they have not yet been operational for a full year. These projects will receive 0 points for performance. Their overall score will place them in the bottom of the group of PSH and RRH renewals but they will be placed in Tier 1 because PH renewals as a group will be the first on the Project Priority List.

C. Scoring Criteria for Renewal Transitional Housing

The scoring system will have a maximum of 100 points with 80 points for project performance and 20 points for threshold factors. Data to assess both performance and threshold criteria will be obtained from the information submitted by the applicants in their LOI response.

Priority will be given to Transitional Housing which falls in line with serving HUD priority populations.

D. HMIS Renewal

Consistent with previous CoC applications, HMIS renewals will be exempt from the full Letter of Intent (LOI) but will be assessed for performance and spending in alignment with HUD requirements. As noted in Section II, the HMIS renewal will be placed in Tier 1.

Section III: New Projects

The CoC Board will examine recommendations from the CoC Data and Performance Committee and CoC staff to determine the amount of funding available for reallocation. Additionally, the CoC may apply for Permanent Supportive Housing Bonus funding when available.

Reallocated funds and new bonus funds will be awarded through a Request for Proposal (RFP) process for open competition for projects that provide permanent supportive housing to chronically homeless and or RRH for homeless families.
The RFP will be structured to award funds to projects that 1) meet Ventura County's CoC priorities; and 2) are most competitive and likely to receive HUD funding. In addition, projects must meet HUD's threshold and quality requirements. The RFP will require applicants to submit project narrative, applicant capacity and financial information sufficient to assess all of these factors.

To evaluate whether projects meet the HUD threshold and quality standards, the projects will be reviewed by the CoC Data and Performance Committee.

To evaluate project quality and fit with Ventura County objectives and develop a ranked order, the CoC will convene an unbiased project review panel to review each new project. Projects will be scored based on a 100 point system. The panel will then hold one meeting to review and average their scores and arrive at a proposed final ranking for new projects, including a recommendation of which project should be submitted as the permanent supportive housing bonus. The panel may also recommend that projects should either increase or decrease their funding request to maximize the use of available reallocated or bonus funds.

The final ranking of new projects as determined by the Panel will be discussed and approved by the CoC Board to determine the order on the Project Priority Listing.

Section IV: Final Project Priority List and Notification to Applicants

Once the rating and ranking processes for new and renewal applicants are complete, CoC staff will integrate the results of the scoring/ranking processes and create the final proposed Project Priority Listing for review by the CoC Board. The proposed final list will be approved and notice sent to the applicants of the final results.

Attachment A

Permanent Supportive Housing (PSH) Performance Measures - Max. 80 Points
- at least 80 percent of project participants either remained in permanent housing or exited to another PH
- at least 20 percent or more of project participants have employment income (or at least 20 percent or more of project participants have other income sources such as SSI and/or SSDI, for those who are not employable);
- at least 54 percent of project participants increased their income from sources other than employment in a given operating year;
- at least 56 percent of project participants obtained mainstream benefits

Projects meeting:
    All 4 performance measures will receive 80 points.
    3 of 4 performance measures will receive 60 points.
    2 of 4 performance measures will receive 40 points.
    0 or 1 performance measures will receive 0 points.

Threshold Renewal Points	Source Document	Max Points
LOI Submission		**-2**
Late submission	Submission Documentation	-1
Incomplete Submission	Submission Documentation and LOI review	-1
Agency not using Housing First	LOI	-10
Project Performance*		**8**
APR submitted on time	LOI	1
Bed Utilization	LOI-APR (Q10 and Q11 of APR)	3
Leverage and Match	LOI	2
Null Missing Values in HMIS	LOI/Data quality reports in HMIS	2
Agency Performance		**6**
HUD Monitoring (2)/CoC Monitoring(2)	LOI	4
Fiscal audit (2)	LOI	6
CoC Strategic Participation		**6**
Attendance & Participation CoC Alliance and Committees (3) Coordinated Entry System (3)	CoC Attendance Documentation—documented attendance of CoC alliance and committee meetings by agency staff/board member. Participation in Coordinated Entry	6
TOTAL		**20**

*New projects will receive a median score for those items not available.

Attachment B

The following will be applied for the performance measures scored for TH Projects renewals.

TH Performance Measures - Max. 80 Points

- at least 80 percent of project participants either remained in permanent housing or exited to another PH
- at least 20 percent or more of project participants have employment income (or at least 20 percent or more of project participants have other income sources such as SSI and/or SSDI, for those who are not employable);
- at least 54 percent of project participants increased their income from sources other than employment in a given operating year;
- at least 56 percent of project participants obtained mainstream benefits

Projects meeting:

All 4 performance measures will receive 80 points.

3 of 4 performance measures will receive 60 points.

2 of 4 performance measures will receive 40 points.

0 or 1 performance measures will receive 0 points.

*Underperforming projects will be discussed in detail with CoC Data and Performance Committee and recommendations will be made for reallocation to the CoC Board when appropriate.

Threshold Renewal Points	Source Document	Max Points
LOI Submission		-2
Late Submission	Submission Documentation	-1
Incomplete Submission	Submission Documentation and LOI Review	-1
Project Performance*		**8**
APR submitted on time	LOI	1
Bed Utilization	LOI-APR (Q10 and Q11 of APR)	3
Leverage and Match	LOI	2
Null Missing Values in HMIS	LOI/Data quality reports in HMIS	2
Agency Performance		**6**
HUD Monitoring (2)/CoC Monitoring(2)	LOI	4
Fiscal audit (2)	LOI	6
CoC Strategic Participation		**6**
Attendance & Participation CoC Alliance and Committees (3) Coordinated Entry System (3)	CoC Attendance Documentation—documented attendance of CoC alliance and committee meetings by agency staff/board member. Participation in Coordinated Entry	6
TOTAL		20

2015 Scoring Sheet

Project Name	
Grant Term	
Performance Measures (80)	
Threshold Renewal Points (-2)	
LOI submission	
Late submission (-1)	
Incomplete submission (-1)	
Project Performance (8)	
APR submitted on time (1)	
Bed Utilization (3)	
Leverage (1)/Match (1)	
Data Quality in HMIS (2)	
Agency Performance (6)	
HUD monitoring (2)/CoC Monitoring (2)	
Fiscal audit (2)	
CoC Strategic Participation (6)	
Attendance and Participation in CoC Alliance and Committees (3)	
Participation in Coordinated Entry System (3)	
TOTAL	

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Homeless Services Continuum of Care

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It is the mission of the County-wide Continuum of Care (the CoC) to facilitate an end to homelessness in Ventura County by coordinating funding, housing, and service strategies that prevent and end homelessness, in accordance with the guidelines defined in the HEARTH Act and applicable rules, and the recommended activities in the 2011 Federal Strategic Plan to End Homelessness. For more details on the CoC and its Standing Committees, click on the button on the left, "Continuum of Care Committees."

Request for Proposals (RFP) – Permanent Supportive Housing Rapid Re-housing

HUD Continuum of Care Planning Calendar – Grant Funding Cycle 2015

2015 CoC Final Ranking of Projects

2015 NOFA Ranking and Selection Criteria

2015 CoC NOFA

2015 Continuum of Care (CoC) NOFA - Click on this link to see HUD's Final Funding Determinations for Tier 1 and Tier 2

2015 Continuum of Care Collaborative Application
The Continuum of Care Application and Project Listings were analyzed and uploaded on February 3, 2016 at 12:59pm.

2015 Continuum of Care (CoC) NOFA - HUD's 2015 CoC NOFA was released on November 20, 2015. The Ventura County-wide CoC met to discuss the NOFA and our CoC priorities for funding recommendations. The group contemplated the priorities agreed to by HUD in Section 4 of the NOFA. HUD's Homeless Policy and Program Priorities. The group agreed that the only requests for new projects that would be considered during this cycle were those created by reallocation of existing CoC-funded renewal projects. Click on the link to read the schedule for the Ventura County NOFA process.

- HUD FY 2015 Continuum of Care NOFA competition

Results/Review for Results: Update to the 2011 Ten-Year Plan to End Homelessness
Click on the link to read the recently approved 10-Year Plan to End Homelessness in Ventura County report represented May 2013 to introduce and incorporate new elements and additional attachments.

Ventura County Homeless Count and Subpopulation Survey

- 2015

Boards and Commissions
Public Meetings/Documents
- Agendas/Minutes

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Request for Proposals (RFP) – Permanent Supportive Housing/Rapid Re-Housing
Ventura County Continuum of Care (CoC)
Issued September 29, 2015

INTRODUCTION

As the Collaborative Applicant for the Ventura County Continuum of Care, the County of Ventura's County Executive Office is accepting proposals for new Permanent Supportive Housing and/or Rapid Re-Housing projects under Continuum of Care Homeless Assistance funding from the U.S. Department of Housing and Urban Development (HUD).

DEADLINE

Proposals must be submitted via e-snaps and emailed to the County of Ventura's County Executive Office **by 4:59 p.m. on Monday, October 12, 2015.** Submission procedures are described below.

BACKGROUND

HUD publishes a CoC Notice of Funding Availability (NOFA) for each funding year. The 2015 NOFA was published on September 17, 2015. A single, consolidated submission of all selected projects in Ventura County will be submitted to HUD by the Collaborative Applicant no later than **Wednesday, November 18, 2015 (early submittal in order to earn 3 bonus points on CoC Application)**. Funding will be derived from Federal Fiscal Year 2015 allocations of HUD funds and is subject to funding approval by HUD.

NEW PROJECT REQUIREMENTS

The Ventura County Continuum of Care seeks one or more qualified applicants to administer Permanent Supportive Housing and/or Rapid Re-Housing for homeless households and be consistent with the guidance provided by the U.S. Department of Housing and Urban Development (HUD) including, but not limited to, using a Housing First approach.

New projects through the permanent housing bonus up to $452, 237 or new projects from reallocated funding up to $261,700 for the following types of new projects:

a. New permanent supportive housing projects that will serve 100 percent chronically homeless families and individuals

Permanent Supportive Housing projects must include on-site supportive services from applicant or partner agency.

b. New rapid re-housing projects that will serve homeless individuals and families coming directly from the streets or emergency shelters, and includes persons fleeing domestic violence situations.

Rapid re-housing assistance may cover move-in costs, deposits, and the rental and/or utilities (typically six months or less) to move individuals and families immediately out of homelessness

and stabilize in permanent housing. The amount and duration may vary and can come in the form of a full or a shallow subsidy. While most of our existing programs provide short-term assistance, best practices suggest that extending assistance allows communities to reach a broader spectrum of homeless clients for stabilization while permanent sources of income are secured.

Match and leveraging of these funds are required. As described by HUD:

"Match and Leverage are two distinct categories of program funds that are acquired from other sources not associated with this grant request. Match funds must be used for program eligible costs only and must be equal or greater than 25 percent of the total grant request for all eligible costs with the exception of leasing costs."

Administration costs that cannot exceed seven percent of the grant request. Thus, a 25% match is required for these budgeted expenses.

In order for the CoC to receive one point for leveraging, the amount of leveraging must be at least 150% of the total request for all new and renewal projects. Thus, a qualified applicant is required to submit at least 150% of the total funding request as leveraging.

"Leverage funds can be used for any program related costs and there is no minimum requirement."

To be considered as meeting project quality threshold, new permanent housing—permanent supportive housing and rapid re-housing—project applications must meet the following criteria:

a. Whether the type, scale, and location of the housing fit the needs of the program participants

b. Whether the type and scale of the supportive services fit the needs of the program participants—this includes all supportive services, regardless of funding source

c. Whether the specific plan for ensuring program participants will be individually assisted to obtain the benefits of the mainstream health, social, and employment programs for which they are eligible to apply meets the needs of the program participants

d. Whether program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs; and,

e. Whether at least 75 percent of the proposed program participants come from the street or other locations not meant for human habitation, emergency shelters, safe havens, or fleeing domestic violence.

PROJECT SELECTION PROCESS

Projects responding to this RFP will be reviewed and selected by the Continuum of Care Board on **October 15, 2015**. Proposals will be reviewed in reference to organizational capacity, project approach and design and cost effectiveness.

ADDITIONAL INFORMATION

The FY15 CoC NOFA may be found at:

https://www.hudexchange.info/resources/documents/Revised-FY-2015-CoC-Program-NOFA.pdf

The regulations for the Continuum of Care program may be found at:

https://www.hudexchange.info/coc/coc-program-law-regulations-and-notices/

All parties intending to apply for funding are strongly encouraged to review the program regulations, including those organizations that are currently or were previously funded. Proposals which do not conform to the regulations will not be considered for funding. Please contact Tara Carruth at (805) 654-3838 or tara.carruth@ventura.org or Tim Hawkins at (805) 658-4342 or tim.hawkins@ventura.org with questions about HUD programs.

SUBMISSION PROCEDURE

Please use e-snaps to prepare and submit a project proposal. Ensure to provide complete responses.

E-snaps can be accessed at: https://esnaps.hud.gov

In addition, please email one PDF copy of the complete e-snaps application with **a cover letter signed by the organization's authorized representative** to tara.carruth@ventura.org.

AWARD OF FUNDS

The project(s) selected by the Continuum of Care Board will be notified on October 16, 2015. If the bonus funding is awarded by HUD, grant funds are estimated to be made available by HUD by **the first half of calendar year 2016**. The timing of awards and grant-making by HUD is outside of the control of the County of Ventura. Therefore, agencies seeking and receiving new funding must be aware of all operating year start and end dates and must make arrangements to cover any period of which a HUD funding award is pending, delayed, or not awarded.

FY15 CoC Strategic ReAllocation Proposals

Khepera House ($53,165): Transitional Housing for Substance Abuse (6 beds for men) Program for transitional housing for men in recovery with emphasis on helping clients gain employment training and transition to permanent housing.

Performance Measures from APR report to HUD (7/1/14-7/1/15): served 16 individuals
- Housing Stability: 54%
- Total Income Increased: 6%
- Earned Income Increased: 0%

Salvation Army TLC ($208,535): Transitional Housing for Families (41 beds)
Performance Measures from APR to HUD (2/1/14-2/1/15) served 68 individuals
- Housing Stability: 67%
- Total Income Increased: 33%
- Earned Income Increased: 28%

Salvation Army did send updated data showing an improvement last quarter of 79% Housing Stability. It is unclear how this significant improvement was achieved. The agency is currently understaffed.

RAIN ($351,831): Transitional Housing for Singles and Families (65 beds)—focus on employment
Performance Measures from APR to HUD: (1/2/14-1/2/15) served 156 individuals
- Housing Stability Measure: 81%
- Total Income Increased: 33%
- Earned Income Increased: 56%

HUD National Goals for Transitional Housing set by FY14 NOFA:
- Housing Stability: 80%

From FY15 NOFA:
Strategic ReAllocation: *Reviewing the Efficacy of Transitional Housing. Recent research shows that transitional housing is generally more expensive than other housing models serving similar populations with similar outcomes. HUD also recognizes that transitional housing may be an effective tool for addressing certain needs— such as housing for underage homeless youth, safety for persons fleeing domestic violence, and assistance with recovery from addiction. HUD strongly encourages CoCs and recipients to carefully review the transitional housing projects within the geographic area for cost-effectiveness, performance, and for the number and type of eligibility criteria to determine if rapid re-housing might be a better model for the CoC's geographic area.*

Project Renewal Threshold. A CoC must consider the need to continue funding for projects expiring in CY 2016. Renewal projects must meet minimum project eligibility, capacity, timeliness, and performance standards identified in this NOFA or they will be rejected from consideration for funding.
(1) When considering renewal projects for award, HUD will review information in LOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants, and will assess projects using the following criteria on a pass/fail basis:

(a) Whether the project applicant's performance met the plans and goals established in the initial application as amended;

(b) Whether the project applicant demonstrated all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met;

(c) The project applicant's performance in assisting program participants to achieve and maintain independent living and record of success, except HMIS-dedicated projects are not required to meet this standard; and

(d) Whether there is evidence that a project applicant has been 33 unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site.

(2) HUD reserves the right to reduce or reject a funding request from the project applicant for the following reasons: (a) Outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon; (b) Audit finding(s) for which a response is overdue or unsatisfactory; (c) History of inadequate financial management accounting practices; (d) Evidence of untimely expenditures on prior award; (e) History of other major capacity issues that have significantly affected the operation of the project and its performance; (f) History of not reimbursing subrecipients for eligible costs in a timely manner, or at least quarterly; and (g) History of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes.

Recommendations:

The following scenarios are staff recommendations in order of staff preference. Data committee should review information presented above and discuss scenario's below to provide recommendations to the CoC Board.

Scenario 1:
- Reallocate Salvation Army and Khepera House $261,700
- Strategize with RAIN ($351,831) to target HUD priority populations for TH (Transitional Age Youth, Domestic Violence, Households in recovery).
- Put out RFP for Coordinated Entry System and Permanent Housing (RRH or PSH)

Scenario 2:
- Reallocate all Transitional Housing $613,531
- RFP for HMIS and Coordinated Entry System
- RFP for Permanent Housing options

Scenario 3:
- Renew Salvation Army TLC Project
- Reallocate Khepera House $53,165 to Rapid Re-Housing or other PH

Meeting Notes

Continuum of Care (CoC) Board
Friday September 25, 2015
9:00 a.m. – 10:00 a.m.

Ventura County Executive Office
800 S. Victoria Ave, Ventura

Attendees:
Carolyn Briggs
Susan Englund
Martin Hernandez
Amy Luoma
Mike Nigh
Carmen Ramirez
Mike Taigman
Nancy Wharfield
Kevin Clerici

Continuum of Care Board Business   COC Board Members

1. Review/Approve Ranking of COC Projects   CoC Staff

    Staff reviewed with CoC Board the recommendations of Data Committee and CoC staff.
    (see attached staff report on recommendations)

    Review on project performance and emphasis on 2015 NOFA

    Acknowledgement by CoC Board members that HUD is backing us into a corner to make
    a re-allocation.

    Acknowledgment of CoC Board members that if projects are not renewed by HUD
    (Salvation Army and Khepera House) this funding will be a permanent loss to the CoC.

    Board requests information about RAIN Transitional Housing. Is this program amenable
    to aligning with HUD's priorities to strengthen their application? Staff reports that
    discussions with HSA staff have occurred and they are amenable to partnering to
    strengthen their application.

    Discussion by CoC Board about the impact of losing the Salvation Army TLC program. In
    response to questions by Board members, staff affirmed that all agencies were notified of
    Data Committee recommendations. Salvation Army provided supplemental information,
    although recommendations were not changed. The program has funding through
    January 2016.

2. Review/Approve Data Committee's Recommendations for Reallocation   CoC Staff

Recommendation from CoC Data Committee and CoC Staff:

Reallocate Salvation Army TLC and Khepera House $261,700

Strategize with RAIN ($351,831) to target HUD priority populations for TH (Transitional Aged Youth, Domestic Violence and Households in recovery) Lower barriers to entry to continue to be competitive for funding. RAIN is currently exiting 81% to Permanent Housing.

Issue an RFP for Permanent Housing (PSH and RRH) and Coordinated Entry System along with RFP for Permanent Housing Bonus funds as part of CoC NOFA.

Martin Hernandez moved to recommend Data Committee and staff's recommendations for funding reallocation. Mike Nigh seconded. Vote passed 7-1.

Yes: Martin Hernandez, Susan Englund, Mike Nigh, Nancy Wharfield, Carolyn Briggs, Mike Taigman, Amy Luomo

No: Kevin Clerici

Abstained: Carmen Ramirez

Meeting adjourned with next meeting scheduled on October 15, 2015 as part of 2 day System Design Clinic.

3. Discussed timeline of current 2015 COC NOFA Cycle   Staff/Board Members

Adjourn

Next Meeting Date – Thursday, October 15, 2015

Meeting Notes
Continuum of Care (CoC) Board
Thursday October 15, 2015
8:30 a.m. – 9:00 a.m.

Ventura County Behavioral Health
Shasta Conference Room
1911 Williams Ave., Oxnard

Continuum of Care Board Business

1. <u>Selection of, and Approval of Projects Submitting Responses to Continuum of Care Request</u> for Proposals Under Reallocated Funding in the Amount of $261,700 and Bonus Funding in the amount of $452,237.

   - CoC Board reviewed staff report & Data Committee recommendations regarding new projects for reallocation and bonus funds.
   - CoC Board directs staff to look into other CES funding possibilities. Ideas include: MHSA, Probation Re-alignment funds, Healthcare system, local governments supporting 211 Hub.
   - CoC Board votes unanimously to approve HMIS expansion for Coordinated Entry capacity project and Turning Point Foundation Rapid Re-Housing project for re-allocated funds.
   - CoC Board votes unanimously to approve Many Mansions PSH project for chronically homeless individuals.

2. <u>Authorization for Collaborative Applicant Staff to Submit Collaborative Application in</u> Accordance with the Boards Project Selection in the Amount of $2,312,029 No Later Than November 18, 2015.
   - CoC Board votes unanimously to move forward with full CoC Application.

3. Next meeting on November 23rd. Board will set 2016 priorities/strategies.

Available Re-Allocation Funds: $261,700
Total requests: $373,768

Staff recommendation to fund HMIS and fund Turning Point Foundation at reduced level for this cycle. Staff recommends setting Rapid Re-Housing as a priority for funding with upcoming State/County/Oxnard Emergency Solutions Grant (ESG) funding cycle as well as researching other available funding sources for RRH.

County of Ventura Human Services Agency HMIS CES Expansion Project	$150,000 budget $37,500 match	Project proposal to contract with Bowman (HMIS provider) to enhance HMIS capacity for Coordinated Entry System (CES). • Matching clients with services • Improve efficiency of moving clients out of homelessness • Improve coordination among providers
Turning Point Foundation Homeless to Home Rapid Re-Housing	**$223,768** Rental: $91,752 Supportive Services: $119,516 HMIS: $12,500 Cash match: $61,000; Leverage: $300,000 VCBH	Rapid Re-Housing project targeting homeless individuals through street outreach. Assistance will be provided to households that have been homeless the longest. 1-3 months of rental assistance Housing First Participates in CES Will fund 48 units of scattered site housing Performance Measures: • 80% exit to Permanent housing • 80% placed in PH within 30 days • 50% increase total income

Permanent Supportive Housing Bonus: $452,237
Staff recommends funding this project. Project should include Supportive Services in the budget. Supportive services are eligible for renewal funding while construction costs are not renewable.

Many Mansions Ormand Beach Villas	**$432,237** Construction **+$89,184** Supportive Services	New Construction for a 40 unit apartments with 8 CoC funded units dedicated to chronically homeless singles/families. Housing First Participates in CES Performance Measure: • 88% remain permanently housed • 38% increase total income

Staff to apply to use Planning Grant funds (non-renewable) to expand on capacity of increasing housing inventory and unifying efforts of housing navigators/locators.

County Executive Office/CoC Collaborative Applicant	$90,447 Planning Grant	Apply for consultant to assist with streamlining CES. Housing Navigation, build relationships with landlords, fill units through CES

HUD Continuum of Care Planning Calendar – Grant Funding Cycle 2015

MONTH	DATE	RESPONSIBLE	ACTION
September	28	County	RFP Release - The CoC Collaborative Applicant (County Executive Office) will release a Request for Proposal if the CoC Board decides to reallocate any current projects or apply for CoC bonus project funding.
September	29	County/Applicant	Training and Technical Assistance – NOFA, e-snaps and application workshop. County Hall of Administration, Room 233.
October	12	Applicant	All Request for Proposal responses **due to County by 4:00 p.m.**
October	15	CoC Board	RFP Awardee Selection
October	16	County	Notify RFP respondents of funding recommendations & post on website.
October	20	Applicant	Complete New and Renewal HUD CoC Applications **submitted via e-snaps by 11:59 p.m.**
November	5	County	Notification of Rejected Applications.
November	16	County	Post CoC Consolidated Application on CoC website.
November	18	County	Submit Collaborative Application to HUD.

Ventura County officials seek proposals for housing homeless

BY: From staff reports
POSTED: 8:06 PM, Oct 1, 2015
UPDATED: 8:26 PM, Oct 1, 2015
TAG: price of paradise (/topic/price+of+paradise)

VENTURA, Calif. - County officials are seeking proposals for projects that boost the supply of housing for homeless individuals.

Applicants are asked to focus on those who have lacked shelter for a prolonged time and often have multiple barriers to gaining housing, such as lack of income, mental illness and substance abuse.

The county is eligible for funding of up to $2.3 million from the U.S. Department of Housing and Urban Development, including $1.5 million for existing projects.

The application deadline is 4:59 p.m. Oct. 12. Officials are seeking proposals on behalf of the Countywide Continuum of Care, a group of agencies and individuals concerned about homelessness.

Visit http://bit.ly/1iG9P3n (http://bit.ly/1iG9P3n) or call Tara Carruth at 654-3838 for more information or to apply.

(http://www.vcstar.com/news/paradise?utm_source=utm_campaign%
3Dparadise_story_embed&utm_medium=utm_medium%
3Dstory_embed&utm_campaign=utm_campaign%3Dstory_embeds)

Ventura County Continuum of Care (CoC)

Meeting Notes — September 11, 2015
Board Meeting

VCCF Nonprofit Center - VCCF Board Room
4001 Mission Oaks Blvd., Camarillo

Board Member Attendees:
Sommer Barwick
Carolyn Briggs
Kevin Clerici
Susan Englund
Martin Hernandez
Amy Luoma
Pam Marshall
Mike Nigh
Drew Powers
Mike Powers
Carmen Ramirez, Esq.
Mike Taigman
Nancy Wharfield, MD

1. Overview of Mission and Goals of the CoC   Christy Madden/Tara Carruth

   Staff welcomed members to the newly reformed CoC Board and explained that significant effort was given to find members that were decision makers throughout the County, that could represent wide geographic diversity across the County, and that could influence systematic change.

   Staff explained the roles and responsibilities of the CoC Board including receiving recommendations for subcommittees and making decisions on those recommendations - including final funding recommendations.

   Staff defined HUD's current priorities (Veterans, Families, Chronic Homeless w/ Disabilities, and the most vulnerable) then presented the eligible components (program types) under CoC funding (Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), Transitional Housing (TH), Safe Havens (SH), the Homeless Management Information System (HMIS) and Coordinated Entry Systems (CES)).

   Staff presented the roles and responsibilities of each subcommittee (Housing and Services, Data Quality, HMIS Steering, and Public Information and Advocacy). Staff also clarified how the Executive Committee was populated by the chairpersons from each of the subcommittees.

<u>Future Action</u>: Board will elect Chairperson and Vice Chair at next meeting (date TBD).

2. National Alliance to End Homelessness (NAEH) System Design Clinic   Tara Carruth

   Staff presented an overview of the upcoming System Design Clinic calendared for October 14-15.
   - Data will help educate agency Directors, select community leaders and the CoC Board. The information is intended to help create a system for change.
   - The ultimate goal is to design an effective emergency response system.

   A review of the pre-work and surveys being gathered for the Clinic was conducted.

3. 2015 Notice of Funding Availability (NOFA) process for CoC   Tara Carruth

   Staff spelled out the mission and goals of the CoC including a brief timeline for the upcoming NOFA, expected September 18, 2015. Projected renewal amounts were presented, as well as the possibility for additional bonus funds. In Staff's opinion, the CoC has a better chance of being awarded bonus funds this year as compared to the prior year when bonus funding was denied because more projects following "Housing First" and increased Coordinated Entry.

   Staff reviewed the program goals across each type of program.

   Staff defined the Housing First model detailed in President Obama's *Opening Doors*.

   Staff reviewed the scoring criteria categories that the Data Quality Committee used to rank the CoC projects.

   Board members inquired about the reliability of the data inputted into HMIS by individual agencies and the ability of agencies to potentially misrepresent their program successes. Staff described the different mechanisms put in place by HMIS to counteract the potential for fraudulent activity and stated that additional staff was hired by the County to bolster the Collaborative Applicant's ability to monitor programs.

Adjourn – 2:10 P.M.

<u>Next Meeting Date – TBD</u>

Meeting Notes

Continuum of Care (CoC) Board
Friday September 25, 2015
9:00 a.m. – 10:00 a.m.

Ventura County Executive Office
800 S. Victoria Ave, Ventura

Attendees:
Carolyn Briggs
Susan Englund
Martin Hernandez
Amy Luoma
Mike Nigh
Carmen Ramirez
Mike Taigman
Nancy Wharfield
Kevin Clerici

<u>Continuum of Care Board Business</u>   COC Board Members

1. Review/Approve Ranking of COC Projects   CoC Staff

   Staff reviewed with CoC Board the recommendations of Data Committee and CoC staff.
   (see attached staff report on recommendations)

   Review on project performance and emphasis on 2015 NOFA

   Acknowledgement by CoC Board members that HUD is backing us into a corner to make
   a re-allocation.

   Acknowledgment of CoC Board members that if projects are not renewed by HUD
   (Salvation Army and Khepera House) this funding will be a permanent loss to the CoC.

   Board requests information about RAIN Transitional Housing. Is this program amenable
   to aligning with HUD's priorities to strengthen their application? Staff reports that
   discussions with HSA staff have occurred and they are amenable to partnering to
   strengthen their application.

   Discussion by CoC Board about the impact of losing the Salvation Army TLC program. In
   response to questions by Board members, staff affirmed that all agencies were notified of
   Data Committee recommendations. Salvation Army provided supplemental information,
   although recommendations were not changed. The program has funding through
   January 2016.

2. Review/Approve Data Committee's Recommendations for Reallocation   CoC Staff

   Recommendation from CoC Data Committee and CoC Staff:

   Reallocate Salvation Army TLC and Khepera House $261,700

   Strategize with RAIN ($351,831) to target HUD priority populations for TH (Transitional Aged Youth, Domestic Violence and Households in recovery) Lower barriers to entry to continue to be competitive for funding. RAIN is currently exiting 81% to Permanent Housing. Approve reduction in RAIN funding to be re-allocated to Rapid Re-Housing.

   Issue an RFP for Permanent Housing (PSH and RRH) and Coordinated Entry System along with RFP for Permanent Housing Bonus funds as part of CoC NOFA.

   Martin Hernandez moved to recommend Data Committee and staff's recommendations for funding reallocation. Mike Nigh seconded. Vote passed 7-1.

   Yes: Martin Hernandez, Susan Englund, Mike Nigh, Nancy Wharfield, Carolyn Briggs, Mike Taigman, Amy Luomo

   No: Kevin Clerici

   Abstained: Carmen Ramirez

   Meeting adjourned with next meeting scheduled on October 15, 2015 as part of 2 day System Design Clinic.

3. Discussed timeline of current 2015 COC NOFA Cycle   Staff/Board Members

Adjourn

Next Meeting Date – Thursday, October 15, 2015

Meeting Notes
Continuum of Care (CoC) Board
Thursday October 15, 2015
8:30 a.m. – 9:00 a.m.

Ventura County Behavioral Health
Shasta Conference Room
1911 Williams Ave., Oxnard

Continuum of Care Board Business

1. Selection of, and Approval of Projects Submitting Responses to Continuum of Care Request for Proposals Under Reallocated Funding in the Amount of $261,700 and Bonus Funding in the amount of $452,237.

   - CoC Board reviewed staff report & Data Committee recommendations regarding new projects for reallocation and bonus funds.
   - CoC Board directs staff to look into other CES funding possibilities. Ideas include: MHSA, Probation Re-alignment funds, Healthcare system, local governments supporting 211 Hub.
   - CoC Board votes unanimously to approve HMIS expansion for Coordinated Entry capacity project and Turning Point Foundation Rapid Re-Housing project for re-allocated funds.
   - CoC Board votes unanimously to approve Many Mansions PSH project for chronically homeless individuals.

2. Authorization for Collaborative Applicant Staff to Submit Collaborative Application in Accordance with the Boards Project Selection in the Amount of $2,312,029 No Later Than November 18, 2015.
   - CoC Board votes unanimously to move forward with full CoC Application.

3. Next meeting on November 23rd. Board will set 2016 priorities/strategies.

2015 CoC NOFA Priority Listing October 2015

Annual Renewal Demand (ARD) for 2015			$1,859,792			**CH = Chronically Homeless**		**HF =Housing Firs**
Planning Funds			$90,477					
Grantee Name	**Project Name**	**Project Type**	**Grant Amount**	**Number Beds / Served**	**Population Served**	**HF?**	**CH ?**	**Project Location**
Tier 1								
Many Mansions	Casa de Paz	PSH	$62,316	16	mental illness - no children	yes	yes	Simi Valley
Many Mansions	Esseff Village	PSH	$40,760	15	disabled - mental or physical	yes	yes	T.O.
Many Mansions	D Street Apartments	PSH	$19,118	5	youth under 25 and mental illness	yes	yes (3)	Oxnard
County of Ventura Human Services Agency	Rapid Re-Housing	RRH	$81,829	48	families	Yes	no	County-wide
Many Mansions	Richmond Terrace	PSH	$63,412	13	mental illness	Yes	no	T.O.
Ventura County Behavioral Health	East County / Oxnard Shelter Plus Care	PSH	$257,121	22	Mental Illness	yes	yes	SV, T.O., Oxn
Turning Point Foundation	Stephenson Place Permanent Housing	PSH	$27,197	9	Vets, DV, Substance Abuse, MI	Yes	yes	Ventura
Turning Point Foundation	Wooley House II PSH	PSH	$31,962	8	Vets, Substance Abuse, MI	Yes	yes	Oxnard
Turning Point Foundation	Wooley House I Permanent Housing	PSH	$36,672	7	Vets, Substance Abuse, MI	Yes	yes	Oxnard
Hsg Authority of the City of San Buenaventura	Shelter Plus Care	PSH	$115,509	13	mental illness - no children	Yes	yes	Ventura
County of Ventura Human Services Agency	HMIS Project	HMIS	$90,778	N/A	N/A	N/A	N/A	County-wide
Many Mansions	Peppertree Apartments	PSH	$61,052	11	mental illness - can incl children	yes	yes	Simi Valley
County of Ventura County Executive Office	Community Action -VC PSH	PSH	$125,814	8	chronically homeless	yes	yes	Ventura
CEO/ Lutheran Social Services	Rapid Re-Housing - Expansion Project	RRH	$90,477		families	Yes	no	County-wide
Turning Point Foundation	Our Place Safe Haven	SH	$168,977	10	Veterans, Subst. Abuse, MI	Yes	yes	Ventura
County of Ventura Human Services Agency	RAIN Project Transitional Living Center	TH	$280,740	67	families and individuals	Yes	no	County-wide
Tier 2 ($278,968) + PSH Bonus ($452,237)								
County of Ventura Human Services Agency	HMIS expansion for CES	HMIS	$150,000	N/A	N/A	N/A	N/A	County-wide
Turning Point Foundation	Rapid Re-Housing FY15 (new project)	RRH	$128,968	48?	singles	Yes	Yes	Ventura
Many Mansions	Ormand Beach Villas	PSH	$452,237	8	CH Singles/Families	Yes	Yes	Oxnard
Planning Grant								
County of Ventura Executive Office	System Oversight for CES	N/A	$90,447	N/A	N/A	N/A		countywide

Ventura County CoC's Process for Re-Allocation

1. Ventura County CoC's Data and Performance Committee reviews performance of projects annually with CoC staff. The Committee began this process in April 2015. A Letter of Intent was sent out to all renewal projects in May 2015 requesting information about project performance, drawdowns, bed utilization, exits to PH, cost-effectiveness). Data from all LOI's were reviewed and scored using the scoring tool from the CoC's ranking and review policy. The preliminary ranking and scoring of all projects was shared by Data Committee with the full CoC Alliance after sharing with CoC-funded providers the first week of September 2015. This information was presented to the CoC Board (an open meeting) on September 11, 2015 and the CoC Board voted to approve reallocation of two TH projects with a small reduction in another on September 25, 2015.

2. Transitional Housing projects that exited less than 80% of participants to permanent housing were ranked low on the priority listing. Projects that were not implementing a low barrier/Housing First model also received lower scores. Projects that were not performing were recommended by staff and CoC Data Committee for reallocation. Strategies for re-allocation were discussed by committee members, staff and presented to CoC Board for review and approval.

3. Public CoC Board meetings were held to discuss reallocation of funding and recommendations. The CoC Board approved re-allocating funding from 2 Transitional Housing projects and reducing the funding of another on September 25, 2015. The CoC released a RFP on September 28, 2015 to request proposals for CES and PH (RRH). New applications were reviewed by CoC Staff and Data Committee. Scoring and ranking was completed and presented to CoC Board for approval. The final ranking of projects was posted on November 2nd on the CoC Website.

HUD Continuum of Care Planning Calendar – Grant Funding Cycle 2015

MONTH	DATE	RESPONSIBLE	ACTION
September	28	County	RFP Release - The CoC Collaborative Applicant (County Executive Office) will release a Request for Proposal if the CoC Board decides to reallocate any current projects or apply for CoC bonus project funding.
September	29	County/Applicant	Training and Technical Assistance – NOFA, e-snaps and application workshop. County Hall of Administration, Room 233.
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Ventura County

Continuum of Care ALLIANCE

Bylaws

THIRD REVISION
JULY 2015

Table of Contents

Bylaws of the Ventura County Continuum of Care Alliance

ARTICLE I – GOVERNANCE
The purpose of this governance structure is to ensure orderly operations of the Ventura County Continuum of Care Alliance. This governance structure complies with CoC Interim Rule § 578.7(a)(3), the specifics of which are included in Exhibit A.

ARTICLE II – ORGANIZATION
The name of this organization shall be "The Ventura County Continuum of Care Alliance," and shall hereinafter be referred to in these bylaws as "the Alliance." The Alliance, its Board, and Standing Committees serve the geographic entirety of the County of Ventura and its ten cities. These jurisdictions comprise the City of Oxnard/San Buenaventura/Ventura County CoC (CA-611).

The primary contact and mailing address of the Alliance is the County of Ventura, County Executive Office, Community Development Division, 800 South Victoria Avenue, L#1940, Ventura, CA 93009. The Community Development Division serves as staff to The CoC.

ARTICLE III – PURPOSE
Sec. 1   MISSION STATEMENT: It is the mission of the Alliance to facilitate an end to homelessness in Ventura County by coordinating funding, housing, and service strategies that prevent and end homelessness, in accordance with the guidelines defined in the HEARTH Act, and applicable rules, and the recommended activities in the 2013 Recalibrated County of Ventura 10-Year Plan to End Homelessness.

Sec. 2   VALUES: To respect the inherent dignity and worth of the individual and to promote individual self-sufficiency, positive self-esteem, and personal growth that will help homeless and those at-risk of homelessness achieve and maintain stable sources of income, housing, and social relationships.

Sec. 3   GUIDING PRINCIPLES: The Alliance has established the following guiding principles in order to carry out its goals and objectives:

   i.   Be a collaborative of City staff, County staff, other public agency staff, private non-profit organizations, and other community organizations who are committed to preventing and ending homelessness in the County of Ventura;

   ii.   Have a clear and logical governance process, structures and lines of accountability.

   iii.   Implement a community-based collaborative and coordinated system utilizing best practices to assist persons experiencing homelessness and those of at risk of homelessness to obtain housing, mainstream resources, and supportive services necessary to achieve self-sufficiency;

   iv.   Ensure funding resources are maintained; leverage additional funds; assure fair

distribution of resources throughout Ventura County based on areas of greatest need; in support of the mission and goals of this Body and the Updated 10-Year Plan to End Homelessness;

v.   Ensure compliance with federal requirements for the Continuum of Care program

vi.   Operate an open, accessible, inclusive Continuum of Care that includes all stakeholders and allies needed to achieve the goals of the 10-Year Plan.

vii.   Monitor the Continuum of Care's performance in meeting the goals of preventing and ending homelessness as defined in the 10-Year Plan and recommend actions as needed to improve performance.

ARTICLE IV – MEMBERSHIP

Sec. 1   The Continuum of Care Alliance. Representatives from relevant organizations within a geographic area shall establish a Continuum of Care for the geographic area. Membership on the Continuum of Care, including at least those sectors identified below, as relevant to the geographic area, is open to organizations and individuals who support the mission of the Alliance.

Sectors per the CoC Rule
Advocates
Affordable Housing Developers
Businesses
Faith-Based Organizations
Governments
Homeless / Formerly Homeless
Hospitals (public and private)
Law Enforcement
Mental Health Agencies (including substance abuse)
Nonprofit Homeless Assistance Providers
Organizations That Serve Veterans
Public Housing Agencies
School Districts (including organizations that serve unaccompanied youth)
Social Service Providers
Universities (public & private)
Victim Service Providers
Additional Sector
Legal Aid/Attorneys

Sec. 2   The Continuum of Care Alliance Board. The Continuum of Care must establish a board to act on behalf of the Continuum using the process established as a requirement by § 578.7(a)(3) and must comply with the conflict-of-interest requirements at § 578.95(b). The board must be representative of all homeless subpopulations; and include at least one person with lived homeless experience.

The Board is a subset of the Alliance membership. Its responsibilities are spelled out in this document.

Those seeking membership on the Board shall approach the Nominating Committee of the Alliance (Article VI, Section 6) to request such appointment.

    i.   In accordance with § 578.95 Conflicts of interest, representatives from agencies that receive Continuum of Care (CoC), Emergency Solutions Grant (ESG), or State EHAP funding shall not be Board members unless representatives from the subpopulations served by these organizations cannot be recruited as board members.

    ii.   All Board Members shall have the right speak at meetings and to vote on matters before the Board, subject to the limitations of this Article.

    iii.   Board Members are expected to attend meetings regularly to ensure representation of their sector and to specify if their comments represent their personal views.

    iv.   Board Members are expected to review materials in advance of meetings in order to actively engage in discussion of agenda topics.

    v.   Board Members may be removed from membership for good cause upon a two-thirds vote of the members at any meeting. Members removed from membership may reapply to the Nominating Committee for reappointment to the Board in accordance with Section 2 above. Reasons for removal include misconduct, inability to perform required duties, two consecutive unexcused absences, insubordination, and violations of law.

ARTICLE V – OFFICERS
The principal Officers of the Board shall be the Chair and Vice-Chair. The duties and responsibilities of these Officers are as follows:

Sec. 1   CHAIR
    A.   The Chair shall be duly elected by the Board.
    B.   The Chair shall govern the affairs of the Alliance in keeping with these bylaws.
    C.   The Chair shall conduct all general, special and emergency meetings of the Board; review and protect the Mission of the Alliance; conduct and approve a planning process that furthers the Mission of the Alliance;

advocate for the Mission of the Alliance; and speak, or assign someone to speak, on behalf of the Alliance.

Sec. 2   VICE CHAIR

A.   The Vice Chair shall be duly elected by the Board.
B.   The Vice Chair shall be responsible for governing the affairs of the Alliance when the Chair is unavailable.

Sec. 4   ELECTIONS AND TERMS OF OFFICE

A.   The Chair and Vice Chair shall be elected for a one-year term each July by a majority vote of those Members present. Those persons duly elected shall be seated immediately.
B.   In the event that the Chair's position becomes vacant, the Vice-Chair shall be elevated to the position of Chair and that vacancy shall be filled as outlined below.
C.   In the event that the Vice Chair's position becomes vacant, the Alliance may elect such qualified person as necessary to fill the vacancy. The person elected shall serve the unexpired term of the previous Officer, and is subject to re-election.
D.   Any Member in good standing may be nominated to serve as Chair or Vice Chair.
E.   Elected officers will serve a maximum of three, one-year terms.

ARTICLE VI – GOVERNANCE STRUCTURE

Sec. 1   INTERAGENCY COUNCIL ON HOMELESSNESS (IACH)
The Ventura Council of Governments (VCOG) in their role as Interagency Council on Homelessness for the County of Ventura will receive reports from the Board no less than annually. It is anticipated that the IACH will take these reports on the progress to prevent and end homelessness back to their respective jurisdictions (the 10 Cities and County Board of Supervisors) for their consideration.

Sec. 2   THE VENTURA COUNTY CONTINUUM OF CARE ALLIANCE

A. The Alliance will provide leadership, advocacy and support for the Standing Committees in their roles to help prevent and end homelessness.
B. Alliance members are encouraged to participate in one of the Standing Committees or other working groups in the Continuum, such as a local task force.
C. The Alliance will receive information from the Standing Committees on a quarterly basis and provide updates to the Alliance Board, on a semi-annual basis, or as needed.

Sec. 3   EXECUTIVE COMMITTEE OF THE CONTINUUM OF CARE

A. The Executive Committee shall be composed of the Chairs of each of the CoC Committees.
B. The Executive Committee, assisted by CoC Staff, shall contribute to the

development of and approve the agenda for each Continuum of Care and Board meeting.

C. CoC Staff will distribute agendas, minutes, and facilitate with postings to the Alliance website.

D. The Executive Committee, CoC Board or CoC Staff shall provide an Annual Report to the IACH (VCOG) on the state of homelessness and priority needs and issues affecting homeless persons, including availability of and access to affordable housing and progress to addressing the goals in the 10 Year Plan to End Homelessness.

Sec. 4   THE CONTINUUM OF CARE ALLIANCE BOARD (BOARD)

A. The Board shall be composed of, at a minimum, the Chair, Vice-Chair, an appointee from each of the four Standing Committees, and person with lived homeless experience.

B. Members of the Board may not participate in or influence decisions concerning the award of a grant or other financial benefits to the organization that member represents (578.95). Members will recues themselves from such decisions.

C. The Board shall maintain an uneven number of members who serve staggered terms of 2 years.

D. The Board shall be made up of a minimum of 5 members and no more than 13 members.

E. The Board shall meet at minimum bi-monthly. The Continuum of Care Alliance may contribute to the development of the agenda for each Board meeting by requesting, at a regularly scheduled CoC Alliance meeting, that items be placed on the Board agenda for their consideration.

F. The Board shall have the power to act on funding recommendations presented to the Board by the Alliance or by the Data and Performance Evaluation Standing Committee.

G. The Board shall perform other duties such as approving policies, performance standards and other items presented to the Board by the Continuum of Care or its Standing Committees.

Sec. 5 STANDING COMMITTEES

A. The Alliance shall have four Standing Committees, as described below. The duties and roles of the Standing Committees shall include, but not be limited to the following:

1. Housing and Service System Coordination
   a. Work with public and private agencies to evaluate the residential and non-residential programs and services that make up the Ventura County homeless continuum of care system.
   b. Promote coordination between organizations who serve the homeless and at-risk homeless populations.

     c. Provide education and advocacy on behalf of the target population to promote the mission of the Alliance.

  2. Data Performance and Evaluation
     a. In collaboration with the HMIS Lead Agency, establish and oversee a process to evaluate performance of CoC and Emergency Solutions Grant member agencies.
     b. Review applications and make funding recommendations to the CoC Alliance Board to promote the most effective and efficient allocation of these grant funds.

  3. Homeless Management Information System (HMIS) Governance
     a. The HMIS Lead Agency (Human Services Agency of County of Ventura) facilitates the Ventura County HMIS Standing Committee.
     b. The HMIS Lead Agency drafts annual goals and a strategic plan in accordance with the Ventura County 10 Year Plan to End Homelessness and the CoC Strategic Plan, for approval by the HMIS Steering Committee.
     c. A CoC and HMIS MOU details the roles and responsibilities of the HMIS lead agency and the CoC Collaborative Applicant.
     d. HMIS Steering Committee membership includes broad representation of the service provider types in the Continuum's HMIS.
     e. All major HMIS initiatives including HMIS Policies and Procedures are reviewed and approved by the Steering Committee and then presented to the Alliance Board for approval.
     f. Provide information and guidance on issues related to the implementation of the HMIS to the Alliance.
     g. Regularly monitor HMIS data quality, performance metrics, and operational standards.

  4. Public Information and Outreach
     a. Inform members of the Alliance on progress towards meeting goals of the 10-Year Plan and any initiatives that impact the County's homeless housing providers and service agencies.
     b. Develop public information messages and strategies to raise awareness of issues around homelessness in the County.
     c. Facilitate community meetings to present updates on key issues such as the results of the annual Point-in-Time Count, key information regarding annual HUD priorities for ending homelessness, and issues critical to our community such as winter warming shelters and affordable housing needs.

B. Each Standing Committee shall be composed of a chairperson or co-chairs appointed by such committee, and shall have an unlimited membership including representation from the community at large.
C. Each Committee shall meet at a minimum on a quarterly basis, but as

frequently as monthly, if necessary for the purposes of the group.

    D. Each Committee will develop a meeting schedule and select a central meeting location for all meetings.

    E. Each Committee shall report the results of its meetings to the Alliance in the form of agendas and notes for posting on the Alliance website.

    F. Chairs of each committee will serve a 2 year term

Sec. 6   COLLABORATIVE APPLICANT

The Collaborative Applicant is the agency selected by the Alliance to develop and submit an application in response to HUD's CoC NOFA. It must be a legal eligible agency that can enter into a contractual agreement with HUD. The Collaborative Applicant provides information about the Alliance planning body, governance structure, overall performance, and the strategic planning process in the CoC Application (formerly Exhibit 1). This part of the CoC Application is scored and will determine the order in which CoCs are funded. The Collaborative Applicant also collects Project Applications from all projects within the geographic area and applies for funding for CoC planning activities.

The County of Ventura, County Executive Office, and Community Development Department has been selected as the Collaborative Applicant for the City of Oxnard/San Buenaventura/Ventura County CoC (CA-611)

Sec. 7   AD HOC COMMITTEES

Ad Hoc committees shall function to address time-specific goals and/or basic needs of the organization. Initially, the following Ad Hoc Committees shall be created or maintained:

    A. Nominating Committee – The Nominating Committee shall be selected from the Alliance membership and approved by the Alliance. Responsibilities include annually evaluating membership of the Alliance Board and soliciting new members for sectors with expiring terms. Applications will be accepted, reviewed and recommendations for appointments presented to the full Continuum of Care in April of each fiscal year with terms effective July 1st.

    B. Coordinated Entry System – Tasked with establishing and operating a centralized or coordinated assessment system that will provide a comprehensive assessment of the needs of individuals and families for housing and services.

    C. Point in Time Count – A committee tasked with planning for and conducting the annual point-in-time count of homeless persons within the geographic area.

ARTICLE VII – CODE OF CONDUCT

Sec. 1   TREAT PEOPLE WITH RESPECT

Members acting on the Alliance's behalf shall aim to be honest and ethical in their dealings with each other, with community members, partners, and the

public. The Alliance aims to treat all people with respect, and to foster a productive environment free of harassment, intimidation and discrimination.

Sec. 2   RESPECT CONFIDENTIALITY
Members acting on the Alliance's behalf must respect and maintain the confidentiality of sensitive information they have gained due to their association with the Alliance, its Board, or its Standing Committees. This may include personal information about community members or members of the general public.

Sec. 3   REPRESENT THE BEST INTERESTS OF THE COC ALLIANCE
Members acting on the Alliance's behalf should aim to advance the Alliance's mission and should not do anything to bring the Alliance into disrepute.

ARTICLE VIII – MEETINGS OF THE COC ALLIANCE BOARD

Sec. 1   MEETING FREQUENCY
The Alliance Board shall meet bi-monthly for the purpose of transacting the business of the Alliance.

Sec. 2   PUBLIC MEETINGS
All CoC Alliance Board meetings will be open to the public.

Sec. 3   MEETING NOTICES
Notice of regular meetings of the Board shall be made available at least 72 hours prior to the date of the meeting.

Sec. 4   SPECIAL AND EMERGENCY MEETINGS
Special and emergency meetings of the Board may be called at any time, or upon the request of the Continuum of Care Alliance or its Standing Committees. A minimum of 24-hour prior notice in writing (fax, mail, or e-mail) must be provided.

Sec. 5   MEETING MINUTES
Minutes of the Board meetings shall be maintained by staff to the Alliance Board. Minutes shall include, at a minimum, the date, time and place of the meeting, the names of all who are in attendance, the topics discussed, the decisions reached and actions taken, any reports made, and any other information as may be deemed necessary by the Chair. Agendas and minutes from Board and agendas and notes from Standing Committees shall be posted on the Alliance website managed and administered by the Collaborative Applicant.

Sec. 6   QUORUM
A quorum shall consist of 50% of the appointed Board members for Board meetings. No official business may be officially transacted without a quorum.

Sec. 7   VOTING
          All Members of the Board may vote. Each may have only one vote for any one
          motion on the floor. Except as otherwise specified in these bylaws, a majority of
          votes shall carry or defeat a motion. Proxy voting will not be permitted.

Sec. 8   CONFLICT OF INTEREST
          Conflicts of interest, and even the appearance of a conflict of interest, must be
          avoided. Members of the Board may not participate in or influence decisions
          concerning the award of a grant or other financial benefits to the organization
          that member represents (578.95). Members will recues themselves from such
          decisions.

ARTICLE IX – MISCELLANEOUS

Sec. 1   TERM YEAR: The term of The Board shall be July 1 through June 30.

Sec. 2   AMENDMENT OF BYLAWS: These bylaws may be amended upon a two-thirds
          vote of the Members present, provided that each member shall have been mailed
          or emailed, or otherwise provided, at least seven (7) days prior to the meeting, a
          copy of the proposed amendment.

Sec. 3   EFFECTIVE: These bylaws shall be effective immediately and perpetually upon
          the approval of a two-thirds majority vote of the Board.

ARTICLE X – ADOPTION OF BYLAWS

The above Bylaws represent the current Bylaws of The Continuum of Care.

As certified this __7____ day of __July_____, ___2015____.

By _Susan Efune_____
          CoC Board

Attest:
By _____
          CoC Staff

Purpose of and Legal Authority for the CoC Interim Rule

This interim rule implements the Continuum of Care program authorized by the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act). Section 1504 of the HEARTH Act directs HUD to establish regulations for this program. (See 42 U.S.C. 11301.) The purpose of the Continuum of Care program is to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and State and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effective utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

This Exhibit outlines the governance for the Ventura County CoC, its Board, and its four Standing Committees as mandated by the HEARTH Act and the Continuum of Care Interim Rule.

> The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act), enacted into law on May 20, 2009, which codifies in law the Continuum of Care planning process (Section 1504).
>
> 24 CFR Part 578, Interim Continuum of Care Rule, which implements the Continuum of Care program authorized by the HEARTH Act.
> Subpart B - Establishing and Operating a Continuum of Care
> § 578.5 Establishing the Continuum of Care and
> § 578.7 Responsibilities of the Continuum of Care

§ 578.5 Establishing the Continuum of Care.

(a) The Continuum of Care. Representatives from relevant organizations within a geographic area shall establish a Continuum of Care for the geographic area to carry out the duties of this part. Relevant organizations include nonprofit homeless assistance providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve veterans and homeless and formerly homeless individuals.

(b) The board. The Continuum of Care must establish a board to act on behalf of the Continuum using the process established as a requirement by § 578.7(a)(3) and must comply with the conflict-of-interest requirements at § 578.95(b). The board must:
   (1) Be representative of the relevant organizations and of projects serving homeless subpopulations; and
   (2) Include at least one homeless or formerly homeless individual.

(c) Transition. Continuums of Care shall have 2 years from the effective date of interim rule **[AUGUST 30, 2012]** to comply with the requirements of paragraph (b) of this section.

§ 578.7 Responsibilities of the Continuum of Care.

(a) Operate the Continuum of Care. The Continuum of Care must:

(1) Hold meetings of the full membership, with published agendas, at least semi-annually;

(2) Make an invitation for new members to join publicly available within the geographic at least annually;

(3) Adopt and follow a written process to select a board to act on behalf of the Continuum of Care. The process must be reviewed, updated, and approved by the Continuum at least once every 5 years;

(4) Appoint additional committees, subcommittees, or workgroups;

(5) In consultation with the collaborative applicant and the HMIS Lead, develop, follow, and update annually a governance charter, which will include all procedures and policies needed to comply with subpart B of this part and with HMIS requirements as prescribed by HUD; and a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board;

(6) Consult with recipients and subrecipients to establish performance targets appropriate for population and program type, monitor recipient and subrecipient performance, evaluate outcomes, and take action against poor performers;

(7) Evaluate outcomes of projects funded under the Emergency Solutions Grants program and the Continuum of Care program, and report to HUD;

(8) In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and operate either a centralized or coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services. The Continuum must develop a specific policy to guide the operation of the centralized or coordinated assessment system on how its system will address the needs of individuals and families who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking, but who are seeking shelter or services from nonvictim service providers. This system must comply with any requirements established by HUD by Notice.

(9) In consultation with recipients of Emergency Solutions Grants program funds within the geographic area, establish and consistently follow written standards for providing Continuum of Care assistance. At a minimum, these written standards must include:

(i) Policies and procedures for evaluating individuals' and families' eligibility for assistance under this part;

(ii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive transitional housing assistance;

(iii) Policies and procedures for determining and prioritizing which eligible individuals and families will receive rapid rehousing assistance;

(iv) Standards for determining what percentage or amount of rent each program participant must pay while receiving rapid rehousing assistance;

(v) Policies and procedures for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance; and

(vi) Where the Continuum is designated a high-performing community, as described in Subpart G, policies and procedures set forth in 24 CFR 576.400(e)(vi), (e)(vii), (e)(viii), and (e)(ix).

(b) Designating and operating an HMIS. The Continuum of Care must:

(1) Designate a single Homeless Management Information System (HMIS) for the geographic area;

(2) Designate an eligible applicant to manage the Continuum's HMIS, which will be known as the HMIS Lead;

(3) Review, revise, and approve a privacy plan, security plan, and data quality plan for the HMIS.

(4) Ensure consistent participation of recipients and subrecipients in the HMIS; and

(5) Ensure the HMIS is administered in compliance with requirements prescribed by HUD.

(c) Continuum of Care planning. The Continuum must develop a plan that includes:
(1) Coordinating the implementation of a housing and service system within its geographic area that meets the needs of the homeless individuals (including unaccompanied youth) and families. At a minimum, such system encompasses the following:

(i) Outreach, engagement, and assessment;

(ii) Shelter, housing, and supportive services;

(iii) Prevention strategies.

(2) Planning for and conducting, at least biennially, a point-in-time count of homeless persons within the geographic area that meets the following requirements:

(i) Homeless persons who are living in a place not designed or ordinarily used as a regular sleeping accommodation for humans must be counted as unsheltered homeless persons.
(ii) Persons living in emergency shelters and transitional housing projects must be counted as sheltered homeless persons.
(iii) Other requirements established by HUD by Notice.

(3) Conducting an annual gaps analysis of the homeless needs and services available within the geographic area;

(4) Providing information required to complete the Consolidated Plan(s) within the Continuum's geographic area;

(5) Consulting with State and local government Emergency Solutions Grants program recipients within the Continuum's geographic area on the plan for allocating Emergency

Solutions Grants program funds and reporting on and evaluating the performance of Emergency Solutions Grants program recipients and subrecipients.
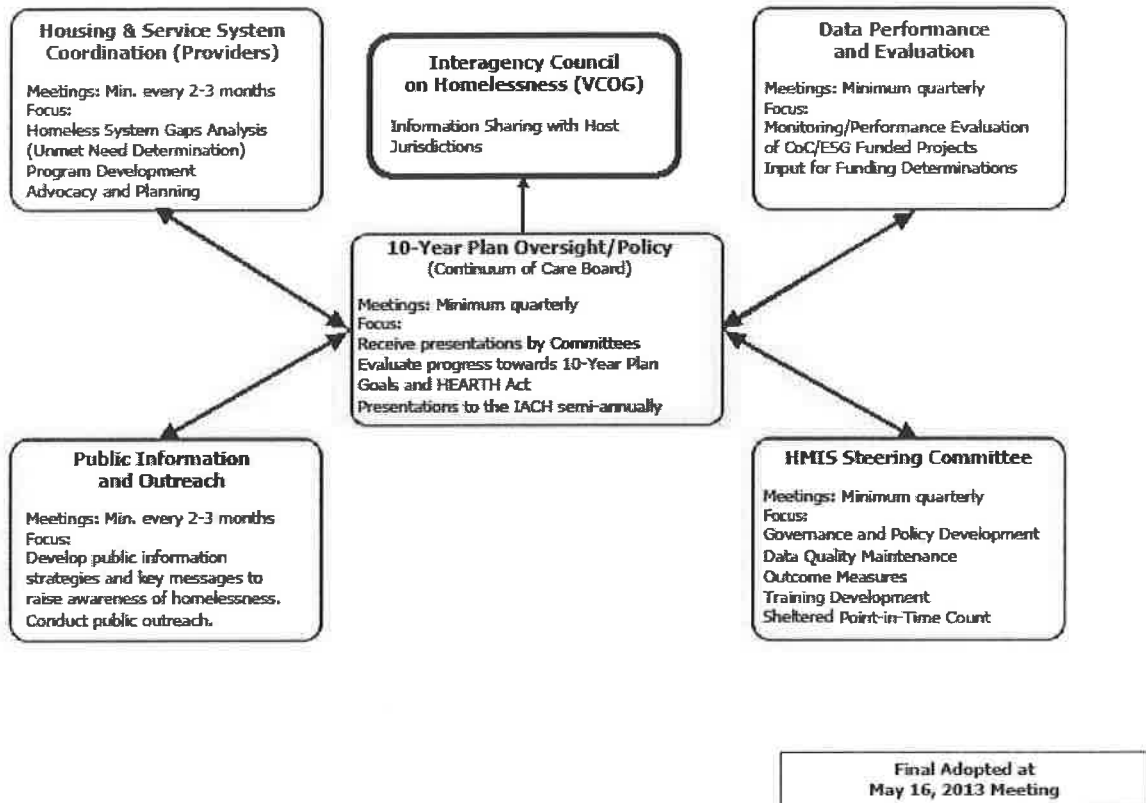
The full Interim Rule may be found at:
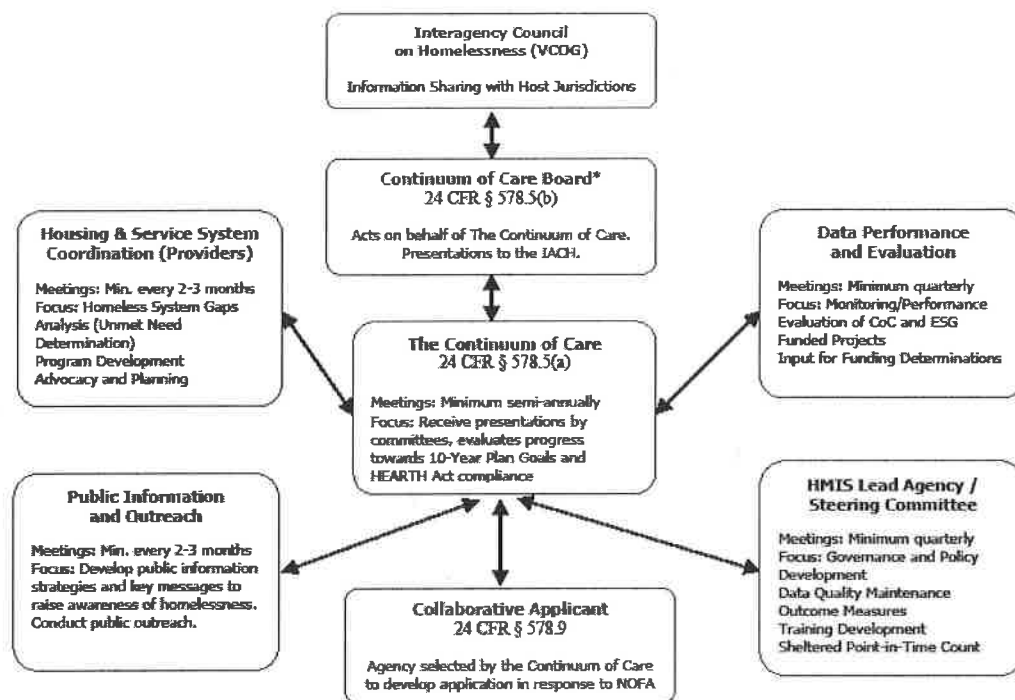https://www.onecpd.info/resource/2033/hearth-coc-program-interim-rule/

The following governance structure was adopted by this Board on May 16, 2013.

Ventura County Continuum of Care Governance

Housing & Service System Coordination (Providers)

Meetings: Min. every 2-3 months
Focus:
Homeless System Gaps Analysis
(Unmet Need Determination)
Program Development
Advocacy and Planning

Interagency Council on Homelessness (VCOG)

Information Sharing with Host Jurisdictions

Data Performance and Evaluation

Meetings: Minimum quarterly
Focus:
Monitoring/Performance Evaluation of CoC/ESG Funded Projects
Input for Funding Determinations

10-Year Plan Oversight/Policy
(Continuum of Care Board)

Meetings: Minimum quarterly
Focus:
Receive presentations by Committees
Evaluate progress towards 10-Year Plan Goals and HEARTH Act
Presentations to the IACH semi-annually

Public Information and Outreach

Meetings: Min. every 2-3 months
Focus:
Develop public information strategies and key messages to raise awareness of homelessness.
Conduct public outreach.

HMIS Steering Committee

Meetings: Minimum quarterly
Focus:
Governance and Policy Development
Data Quality Maintenance
Outcome Measures
Training Development
Sheltered Point-in-Time Count

Final Adopted at
May 16, 2013 Meeting

EXHIBIT C – VENTURA COUNTY COC REVISED GOVERNANCE STRUCTURE

Ventura County Continuum of Care Governance

Interagency Council on Homelessness (VCOG)

Information Sharing with Host Jurisdictions

Continuum of Care Board*
24 CFR § 578.5(b)

Acts on behalf of The Continuum of Care. Presentations to the IACH.

Housing & Service System Coordination (Providers)

Meetings: Min. every 2-3 months
Focus: Homeless System Gaps Analysis (Unmet Need Determination)
Program Development
Advocacy and Planning

Data Performance and Evaluation

Meetings: Minimum quarterly
Focus: Monitoring/Performance Evaluation of CoC and ESG Funded Projects
Input for Funding Determinations

The Continuum of Care
24 CFR § 578.5(a)

Meetings: Minimum semi-annually
Focus: Receive presentations by committees, evaluates progress towards 10-Year Plan Goals and HEARTH Act compliance

Public Information and Outreach

Meetings: Min. every 2-3 months
Focus: Develop public information strategies and key messages to raise awareness of homelessness. Conduct public outreach.

HMIS Lead Agency / Steering Committee

Meetings: Minimum quarterly
Focus: Governance and Policy Development
Data Quality Maintenance
Outcome Measures
Training Development
Sheltered Point-in-Time Count

Collaborative Applicant
24 CFR § 578.9

Agency selected by the Continuum of Care to develop application in response to NOFA

*   To avoid any real or perceived conflicts of interest, membership on the COC Board consists of persons representing organizations that DO NOT currently receive or intend to apply for funding through the COC, ESG or EHAP, unless representatives from the subpopulations served by these organizations cannot be recruited as board members.

Final First Revision for
October 17, 2013 Meeting

VENTURA COUNTY

HOMELESS MANAGEMENT INFORMATION SYSTEM
(VC HMIS)

POLICIES AND PROCEDURES

February 2014

Table of Contents

1. PROJECT SUMMARY

A. Background: The Congressional Directive

A Homeless Management Information System (HMIS) refers to a system for tracking the use of homeless programs and producing an unduplicated count of the people using those programs. For FY2001, Congress directed the U.S. Department of Housing and Urban Development (HUD) to ensure that homeless programs using federal funds participate in local systems to track the use of services and housing.[1]

The Ventura County HMIS programs include:

Homeless Assistance Programs under HEARTH

- Continuum of Care
  1. Permanent Housing - (Permanent Supportive Housing and Rapid Re-Housing)
  2. Transitional Housing
  3. Supportive Services Only

- Emergency Solutions Grant (ESG)
  1. Emergency Shelter
  2. Homeless Prevention
  3. Rapid Re-Housing

Non-HUD Funded Homeless Service Programs

Programs that receive other sources of funding are not required to participate in HMIS, but are strongly encouraged to do so to contribute to a better understanding of homelessness in our communities.

To follow Congress' directive, HUD has told communities to assess their own needs and select the HMIS software that best meets those needs. HUD has provided substantial technical assistance to the Ventura County HMIS to support the planning process.

The VC HMIS is not connected to any federal or national data collection facility and data is not passed electronically to any other national database for homeless or low-income individuals.

B. Operating Procedures

Operating Procedures will provide specific policies and steps necessary to control the operational environment and enforce compliance in the areas of:

1. Provider Participation
2. User Authorization
3. Collection of Client Data
4. Release of Client Data
5. Workstation Security
6. Training
7. Technical Support

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[1] See HUD Strategy for Homeless Data Collection Conference Report (H.R. Report 106-988), which indicated that "local jurisdictions should be collecting an array of data on homelessness in order to prevent duplicate counting of homeless persons and to analyze their patterns of use of assistance, including how they enter and exit the homeless assistance system and the effectiveness of the systems. HUD is directed to take the lead in working with communities toward this end and to analyze jurisdictional data within three years."

C. Organization: The Ventura County HMIS (VC HMIS)

Ventura County Human Services Agency (HSA) is the Lead Organization for the Ventura County HMIS. Ventura County HMIS has the "responsibility to establish, support and manage HMIS in a manner that will meet HUD's standards for minimum data quality, privacy, security, and other requirements for organizations participating in HMIS."

Ventura County HMIS's goal is to go beyond the HUD mandate of producing unduplicated counts of homeless persons. Our charter is to provide a comprehensive case management system that allows the Participating Agency User to draw on the collected information to make informed program decisions.

D. Mission Statement & Vision

Mission: The Ventura County HMIS goal is to go beyond the HUD mandate of producing unduplicated counts of homeless persons. Our mission is to provide a comprehensive case management system to advance the provision of quality services for homeless persons, improve data collection, and promote more responsive policies to end homelessness in Ventura County.

HMIS is designed to be an integrated network of homeless and other service providers that use a central database to collect, track and report uniform information on client needs and services. This system will not only meet Federal requirements but also enhance service planning and delivery.

Vision: To develop, implement and administer a countywide information management system that collects client level data on homeless persons and *those at risk of homelessness (per the HEARTH Act Definition)*. This HMIS system will generate reports, inform community service planning processes, increase service delivery efficiencies and, with the client's consent, provide a mechanism to share client needs for service among partnered agencies.

E. Software

Ventura County HMIS has chosen Bowman's ServicePoint product for our HMIS. The modules that are supported as of September 2013 are:
- ServicePoint, which includes:
    - ClientPoint
    - ResourcePoint
    - ShelterPoint
    - ActivityPoint
    - SkanPoint
- CallPoint
- EligibilityPoint

The software functionality tracks/records:
- Outcome Management:
    - Households
    - Entry/Exit
    - Assessments
    - Services
    - Goals
    - Referrals
- Client Demographic Data Collection (HUD)

- Client Case Management
- Information and Referral Capabilities
- Bed Maintenance, Tracking and Assignment Module
- Customized Reporting Capability
- Real Time Data Entry
- Activities Management
- Case Notes Management
- Advanced Security Features

2. PARTICIPATION REQUIREMENTS

A. Adherence to Policies

All users and agency representatives must agree to the policies in this document in order to participate in the VC HMIS. A signed agreement to do so is required of all users and Participating Agencies. This section details technical, staffing assignments and training that must be fulfilled prior to being granted access to the system.

The Policies and Procedures manual and all attachments may be amended as needed at any time. Participating Agencies will be notified of any Policies and Procedures manual changes.

B. Participation Agreements

Participating Agencies are those agencies that connect to the VC HMIS for the purposes of data entry, data editing and data reporting. Relationships between the VC HMIS and Participating Agencies are governed by any standing agency-specific agreements and/or contracts already in place. Ventura County HMIS manages the **Partner Agency User Agreement** and the contents of the Policies and Procedures Manual. All Participating Agencies are required to abide by the policies and procedures outlined in this manual.

Prior to obtaining access to the VC HMIS, every agency must adopt the following documents:

- Ventura County Homeless Management Information System Partner Agency User Agreement (PAUA) – The agreement made between the Participating Agency User and the VC HMIS which outlines agency responsibilities regarding their participation in the HMIS. This document is legally binding and encompasses all state and federal laws relating to privacy protections and data sharing of client specific information.
- Ventura County HMIS Client Informed Consent & Release of Information Authorization (ROI) must be implemented and monitored by agencies and would require clients to authorize in writing the entering and/or sharing of their personal information electronically with other Participating Agencies throughout the Ventura County HMIS where applicable.
- Ventura County HMIS Client Rights and Explanation of Data Uses – Client Information document to inform clients how their personal information gathered and entered into HMIS will be utilized for their benefit, should they agree to provide it.
- Ventura County Privacy Notice (PN) – Document provided to inform client the purpose of HMIS and the requirement to gather personal information.
- Ventura County HMIS Revocation of Consent
- Memorandum of Understanding (MOU) – The MOU confirms the responsibilities of the VC HMIS and the Partner Agency for ongoing HMIS activities as defined in the VC HMIS Policy and Procedures.

C. Technical Standards

The VC HMIS is responsible for each Participating Agency's oversight and adherence to the Technical Standards. All agencies will be subject to periodic on-site security assessments to validate compliance of the agency's information security protocols and technical standards. The site visit will also review how the agency uses HMIS, including
Processes and workflow related to data entry, for service improvement opportunities.
(See Appendix IV for review item checklist).
Site Assessments will ensure you are in compliance with the following Technology Standards.

Network
- High Speed internet access
  - DSL, Cable, T1 Line, etc.
  - No dial up connections
- Firewall
  - Internet security suite recommended
    - Anti-virus
    - Intrusion detection
    - Quarantine
  - Personal firewall at minimum
- Mobile devices
  - WiFi recommended
  - 4G/LTE or faster
  - No 3G or older

Device/Hardware
- Windows XP or higher
- Multicore processors
- 4 GB RAM recommended, 2 GB RAM minimum
- Video: 1024x768 minimum
- No Netscape, Mozilla, AOL etc…
- No Mac's, UNIX, Linux etc…

D. Training

All HMIS Users must complete training appropriate to their functions as described in Section 5 prior to gaining access to the VC HMIS. A minimum of one training event per contract year is required for each licensed user. Additional training may be required if there are major system upgrades and/or regulatory changes. This additional training will
be communicated as being mandatory at the time that the training is established.

VC HMIS System Administrator will be trained to provide basic user follow-up training to
Support agency staff using the VC HMIS. VC HMIS System Administrator trainers will provide periodic refresher training for other users as needed.

Training Tracks include:
- HMIS User training (new and existing users)
- Reports training
- Ethics and Confidentiality training

- Privacy and Security training
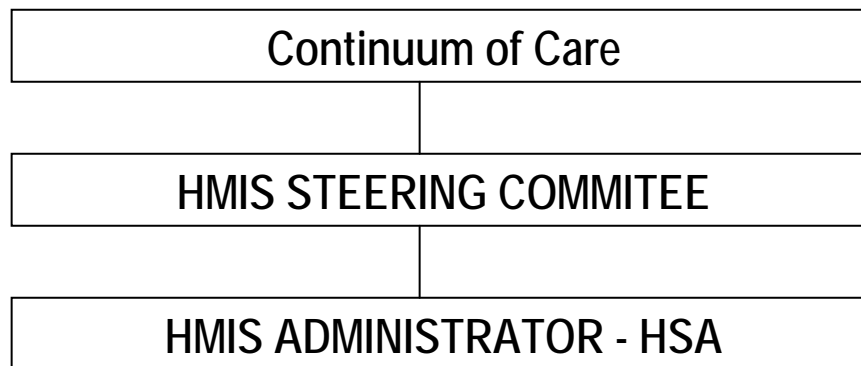- Training related to system releases as necessary

E. Participation Fees

Currently participation fees are not in place however, the Continuum of Care reserves the right to charge a participation fee to use the system.

3. SYSTEM ROLES AND RESPONSIBILITIES

A. Ventura County HMIS Organization Chart

Definitions of System Roles and Responsibilities are located under Section 10: Terminology.

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│         Continuum of Care                │
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                    │
┌─────────────────────────────────────────┐
│        HMIS STEERING COMMITEE            │
└─────────────────────────────────────────┘
                    │
┌─────────────────────────────────────────┐
│      HMIS ADMINISTRATOR - HSA            │
└─────────────────────────────────────────┘
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4. CLIENT RIGHTS

Clients served by agencies participating in the VC HMIS have the following rights:

A. Communication

1. Clients have a right to privacy and confidentiality.
2. Clients have a right to not answer any questions unless entry into the Agency's program requires it.
3. Client information may not be shared without informed consent (posting of **Privacy Notice (PN)** and **Mandatory Collection Notice**.
4. Every client has a right to an understandable explanation of the VC HMIS and what "consent to participate" means. The explanation shall include:
   a) Type of information collected
   b) How the information will be used
   c) Under what circumstances the information will be used
   d) That refusal to provide consent to collect information shall not be grounds for refusing entry to the program.
   e) A copy of the consent shall be given to the client upon request, and a signed copy kept on file at the Participating Agency, if applicable.
   f) A copy of the **Privacy Notice (PN)** shall be made available upon client request.
   g) A copy of the Statement of Client Rights shall be made available upon client request.

B. Participation Opt Out

Clients have a right not to have their personal identifying information in the VC HMIS shared outside the agency, and services cannot be refused if the client chooses to opt out of participation in the HMIS. However, clients may be refused program entry for not meeting other agency eligibility criteria.

In the event that a client previously gave consent to share information in the VC HMIS and chooses at a later date to revoke consent (either to enter or to share), a **HMIS Client Revocation of Consent to Release Information Form** must be completed and kept on file.

C. Access to Records

A client has the right to request access to their personal information stored in the VC HMIS from the authorized agency personnel. The agency, as the custodian of the client data, has the responsibility to provide the client with the requested information except where exempted by state and federal law.

When requested, a client has the right to:
1. View his or her own data contained within the VC HMIS; No client shall have access to another client's records within the VC HMIS. An agency may not share any information about the client entered by other agencies beyond the agreed upon shared data elements.

D. Grievances

The client has the right to file a grievance with an agency. All Participating Agencies must have written grievance procedures that can be provided to a client on demand. If, after following the grievance procedure, the grievance is not resolved, the complaint may be escalated to the CoC Governing Body.

5. POLICIES FOR USERS & AGENCIES

A. User Access

User access will be granted only to those individuals whose job functions require legitimate access to the VC HMIS. Each HMIS User will attend the appropriate training course, sign a **Participating Agency User Agreement** and satisfy all the conditions herein before being granted access to the VC HMIS.

Explanation: The Participating Agency will determine which of their employees need access to the VC HMIS. Identified users must:
- Attend the appropriate training course for their position. For example, if the user will be case managing or entering client data, then the "New User" course would be appropriate, whereas if the person were only assigned to running reports, then the "Report Viewer" class would be appropriate.
- Sign the **Participating Agency User Agreement** stating that he/she has received training, will abide by the VC HMIS Policies and Procedures will appropriately maintain the confidentiality of client data, and will only collect, enter and retrieve data in the VC HMIS relevant to the delivery of services to people in housing crisis in the area served by the VC HMIS Collaborative.
- The signed Participating Agency User Agreement must be provided to the HMIS System Administrator prior to receipt of the user account.

B. User Activation

The HMIS System Administrator will provide unique user names and passwords to each Participating Agency user.

Explanation: User names will be unique for each user and <u>will not be shared with other users</u>. The HMIS System Administrator will set up a unique user name and password for each user upon completion of training and receipt of the signed **Participating Agency User Agreement** and the receipt of the signed acknowledgement of the Policies and Procedures Manual from each user via the Agency management. The sharing of user names will be considered a breach of the **Participating Agency User Agreement and** will result in *termination of the user account*.

C. Passwords

Passwords must be no less than eight and no more than sixteen characters in length, and must be alphanumeric upper and lower case with special characters. The HMIS System Administrator will communicate passwords directly to the user.

Forced Password Change (FPC): The FPC will occur every one hundred and eighty (180) consecutive days. Passwords will expire and user will be prompted to enter a new password. Users may not use the same password consecutively, but may use the same password more than once.

Unsuccessful logon: If a User unsuccessfully attempts to logon three times, the User ID will be "locked out", access permission revoked and user will be unable to gain access until their password is reset by the HMIS System Administrator in the manner stated above.

D. User Levels

1. **Case Manager:** This group consists of case managers who provide the day-to-day updating of client files. Case Managers will have access to all records located in Central Intake and in the Client folder, including Program Entry, Case Notes, Track Savings, Assessments, Group Services, and Program Exit.

2. **Reports Only**: This group includes any user at the agency who does not need to have access to client information except in report form. These reports can be canned (already built) reports, ad-hoc reports, and customized reports.

3. **Agency Administrator:** This group has all the access listed above, and additional access to the Agency Folder, in which they will maintain agency set-up information like program set-up, milestones, targets, and contracts/grants.

4. **HMIS System Administrator:** This group of top-level VC HMIS Administrators supports all agencies within the continuum and will have access to every part of the VC HMIS in order to support users.

E. Confidentiality and Informed Consent

All Participating Agencies agree to abide by and uphold all privacy protection standards established by the Ventura County HMIS as well as their respective agency's privacy procedures. The Agency will also uphold relevant Federal and California State confidentiality regulations and laws that protect client records, and the Agency will only release program level client data with written consent by the client, or the client's guardian, unless otherwise provided for in the regulations or laws.

Explanation: Participating Agencies are required to develop procedures for providing oral explanations to clients about the usage of a computerized HMIS and are required to post a **Mandatory Collection Notice** and a **Privacy Notice (PN)** in order to share Central Intake client information with other HMIS Participating Agencies. HUD Data Standards provide guidance for Participating Agencies regarding certain HMIS policies.

However, in instances of conflict between state or federal law and the HUD Data Standards, the state and/or federal law take precedence.

Oral Explanation: All clients will be provided an oral explanation stating their information will be entered into a computerized record keeping system. The Participating Agency will provide an oral explanation of the Ventura County HMIS and the terms of consent. The agency is responsible for ensuring that this procedure takes place prior to every client interview. The explanation must contain the following information, which is also included in the **Client Rights and Explanation of Data Uses.**

- What VC HMIS is: a web-based information system that homeless service agencies within the Ventura County Region use to capture information about the persons they serve.
- Why Gather and Maintain Data: Data collection supports improved planning and policies including determining whether desired outcomes were achieved and where more or other resources may be needed, identifying best and promising practices, and identifying factors that support or hinder achievement of outcomes.
- Security: only staff who work directly with clients or who have administrative responsibilities can look at, enter, or edit client records.
- Privacy Protection: No program level information will be released to another agency or individual without written consent; client has the right to not answer any question, unless entry into a program requires it; client information is stored encrypted on a central database and information that is transferred over the web is transferred through a secure connection; client has the right to know who has added to, deleted, or edited their VC HMIS record.
- Benefits for Clients: Facilitates streamlined referrals, coordinated services, unduplicated intakes and access to essential services and housing for clients.

Written Explanation: *(DRAFT Language; utilizing interim interagency data sharing agreement effective 2/12/2014)*
Each client whose program level information is being shared with another Participating Agency must agree via the **Interagency Data Sharing Agreement.** A client must be informed as to what information is being shared and with whom it is being shared.
- Information Release: The Participating Agency agrees not to release client identifiable information to any other organization pursuant to federal and state law without proper client consent. See attached Client Consent Form and Regulations below.
- Regulations: The Participating Agency will uphold all relevant Federal and California State Confidentiality regulations to protect client records and privacy. In addition, the Participating Agency will only release client records with written consent by the client, unless otherwise provided for in regulations, specifically, but not limited to, the following:
  o The Participating Agency will abide specifically by the federal confidentiality rules as contained in the Code of Federal Regulations (CFR) 42 Part 2 Confidentiality of Alcohol and Drug Abuse Patient Records, regarding disclosure of alcohol and/or drug abuse records. In general terms, the Federal regulation prohibits the disclosure of alcohol and/or drug abuse records unless disclosure is expressly permitted by written consent of the person to whom it pertains or as otherwise permitted by CFR 42 Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose. The Participating Agency understands that the Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patients.
  o The Participating Agency will abide specifically with the Health Insurance Portability and Accountability Act of 1996 and corresponding regulations passed by the U.S. Department of Health

and Human Services. In general, the regulations provide consumers with new rights to control the release of medical information, including advance consent for most disclosures of health information, the right to see a copy of health records, the right to request a correction to health records, and the right to obtain documentation of disclosures of information may be used or disclosed. The current regulation provides protection for paper, oral, and electronic information.

    o   The Participating Agency will abide specifically with the California Government Code 11015.5 regarding program level Personal Information Collected on the Internet. In general, the Government Code ensures that any electronically collected personal information about clients cannot be shared with any third party without the client's written consent.

- The Participating Agency will not solicit or input information from clients unless it is essential to provide services, or conduct evaluation or research. All client identifiable data is inaccessible to unauthorized users.
- Participating Agencies are bound by all restrictions placed upon the data by the client of any Participating Agency. The Participating Agency shall diligently record in the VC HMIS all restrictions requested. The Participating Agency shall not knowingly enter false or misleading data under any circumstances.
- The Participating Agency shall maintain appropriate documentations of client consent to participate in the VC HMIS.
- If a client withdraws consent for release of information, the Agency remains responsible to ensure that the Client's information is unavailable from date of withdrawal to all other Participating Agencies.
- The Participating Agency shall keep signed copies of the Client Consent Form/Information Release form (if applicable) and/or the **Interagency Data Sharing Agreement** for the VC HMIS for a minimum of seven years from the date of client exit.
- **Postings: Privacy Notice (PN)** and **Mandatory Collection Notice** must be posted at the agency:
  1. The Agency must post **Privacy** and **Mandatory Collection notice**s at each intake desk or comparable location.
  2. The **Privacy Notice (PN)** and **Mandatory Collection Notice** must be made available in writing at the client's request.
  3. If the agency maintains an agency website, a link to the **Privacy Notice (PN)** must be on the homepage of the agency's website.

F. Data Quality

HMIS Users are responsible for the ensuring VC HMIS Data Quality. Data quality refers to the timeliness, accuracy and completeness of information collected and reported in HMIS. All Participating Agencies agree to enter, at a minimum, the VC HMIS required data elements.

Explanation: Participating Agencies will collect as much relevant client data as possible for the purposes of providing services to that client. The Participating Agency agrees to input the collected data no later than one month following the month of program entry. The Participating Agency agrees to the data collection commitment by signing the Agency Agreement and is responsible for updating client's records as needed. The HMIS System Administrators will run quarterly data quality reports. Any patterns of error (including blank entries) will be reported to the Agency Administrator. When patterns of error have been discovered, users will be required to correct data entry errors and processes. Verification by the HMIS System Administrators will occur to ensure the successful correction of data entry errors and processes. Users may be required to attend additional training as needed.

- The Participating Agency shall only enter individuals in the VC HMIS that exist as Clients under the Agency's jurisdiction. The Participating Agency **shall not** misrepresent its Client base in the VC HMIS by entering known inaccurate information.
- The Participating Agency **will not** alter information in the VC HMIS that is entered by another Agency with known inaccurate information.
- The Participating Agency shall not include profanity or offensive language in the VC HMIS.
- The Participating Agency shall utilize the VC HMIS for business purposes only.
- The transmission of material in violation of any federal or California State regulations is __prohibited__. This includes, but is not limited to, copyright material, material legally judged to be threatening or obscene, and material considered protected by trade secrets.
- The Participating Agency **shall not** use the VC HMIS with intent to defraud federal, state or local governments, individuals or entities, or to conduct any illegal activity.

The HMIS Program Manager may request that the local CoC Governing Body sanction any user and/or Participating Agency found to be in violation of the requirements of this section. If necessary, sanctions by the loval CoC include, but not limited to:
- A formal letter of warning to the Agency
- Suspension of system privileges
- Revocation of system privileges

The Participating Agency or End User has the right to file a Grievance regarding Sanctions from the HMIS Program Manager/CoC Governing Body. The HMIS Steering Committee will review the grievance, research the nature of the infraction, and will respond to the grievant within 30 days.

G. Data Use by Ventura County HMIS

The Continuum within the Ventura County HMIS shall have access to its respective agencies' client data contained within the VC HMIS.

Explanation: For the purposes of system administration, user support, and program compliance, VC HMIS will use the data contained within the VC HMIS for analytical purposes only and will not disseminate client-level data. The Continuum may release **aggregate** data contained within the VC HMIS for research and regional reporting purposes only. The **System Administrator Agreement** must be signed by all HMIS System Administrators.

H. Data Use by Vendor

The Vendor and its authorized subcontractor(s) shall not use or disseminate data contained within the VC HMIS.

Explanation: To enforce information security protocols and to ensure that VC HMIS data is used only with explicit permission and if permission is granted, will only be used in the context of interpreting data for research and for system troubleshooting purposes, the contract signed by the HMIS Lead Agency and the software vendor contains language that prohibits access to VC HMIS data.

I. Data Use by Agency

Data contained in the VC HMIS will only be used to support the delivery of services to at risk and homeless clients in the VC areas. Each HMIS User will affirm the principles of ethical data use and client confidentiality as noted below and contained in the **HMIS User Agreement.**

Explanation: As the guardians entrusted with client personal data, HMIS Users have a moral and a legal obligation to ensure that the data they collect is being gathered, accessed and used appropriately. It is also the responsibility of each user to ensure that client data is only used to the ends to which it was collected, ends that have been made explicit to clients and are consistent with the mission of the agency and the VC HMIS to assist families and individuals to resolve their housing crisis. Proper user training, adherence to the VC HMIS Policies and Procedures Manual, and a clear understanding of client confidentiality are vital to achieving these goals. All HMIS Users will sign an **HMIS User Agreement** before being given access to the system. Any individual or Participating Agency misusing, or attempting to misuse the VC HMIS data can be denied access to VC HMIS. Sanctions exist if users violate any laws related to client confidentiality, as outlined in Section 8: Violations.

J.   Maintenance of Onsite Computer Equipment

Participating Agencies commit to a reasonable program of data storage and equipment maintenance in order to sustain an efficient level of system operation. Participating Agencies must meet the technical standards for minimum computer equipment configuration; Internet connectivity, antivirus and firewall.

Explanation: The Participating Agency Leadership designee will be responsible for the maintenance and disposal of on-site computer equipment and data used for participation in the VC HMIS including the following:
1. Computer Equipment: The Participating Agency is responsible for maintenance of   onsite computer equipment. This includes the following:
   - Purchase of and upgrades to all existing and new computer equipment for utilization in the VC HMIS.
   - Workstation(s) accessing the VC HMIS must have a locking, password-protected screen saver
   - All workstations and computer hardware (including agency network equipment) must be stored in a secure location (locked office area)
2. Data Storage: The Participating Agency agrees to only download and store data in a secure environment. Refer to Section 2.C: Technical Standards for more information.
3. Data Disposal: The Participating Agency agrees to dispose of documents that contain identifiable client level data by shredding paper records, deleting any information from diskette before disposal, and deleting any copies of client level data from the hard drive of any machine before transfer or disposal of property.

K.   Downloading of Data

HMIS Users will maintain the security of any client data extracted from the VC HMIS and stored locally, including all data contained in custom reports. HMIS Users may not electronically transmit unencrypted client data across a public network.

Explanation: To ensure that the VC HMIS is a confidential and secure environment, data extracted from the VC HMIS and stored locally will be stored in a secure location and will not be transmitted outside of the private local area network unless it is properly protected. Security questions can be addressed to the HMIS System Administrator. Any personally identifiable information will not be distributed through email.

L.   Data Sharing
(DRAFT Language; utilizing interim interagency data sharing agreement effective 2/12/2014)

Basic client information within the system will be shared based upon the level of consent designated by the client within the VC HMIS. A Client may choose to limit the period of time for which their data will be shared.

Explanation: Data sharing refers to the sharing of information between Participating Agencies for the coordination of case management and client service delivery. Specific data elements to be shared are limited to those as outlined in HMIS Data and Technical Standards Final Notice – (69 FR 146), as revised in HMIS Data Standards Revised Notice-March 2010, Section 1.6. This includes: Universal Data Elements, Household Demographics, Employment and Education Information.

Program level information in either electronic or paper form will never be shared outside of originating agency without written client consent. Information that is shared with written consent will only be used for the purpose of service delivery. End users found to be sharing program level client data without written consent will have their access terminated.

M. Data Release

Aggregate level (client de-identified) data may be released by Agencies, the local Continuum of Care and/or by the Ventura County HMIS under certain criteria. Client-level data may only be released by written consent from the client for a specified purpose.

Explanation: Data release refers to the dissemination of aggregate and/or client-level information for statistical, analytical, reporting, advocacy, regional needs assessment, trend analysis, etc.

1. Agency Release: Each Participating Agency owns all data it enters into the VC HMIS. The agency may not release any client level information without the express written consent of the client. Agencies may release program and/or aggregate level data for all clients to whom the agency provided services with the express written permission of the CoC or assigned authorized entity. No individual client data will be provided to any group or individual that is neither the Participating Agency that entered the data nor the client without proper authorization or consent by the client. This consent includes the express written authorization for each individual or group requiring access to the client's data.

2. Continuum of Care Release: The Continuum of Care (CoC) may release **aggregate** information about the Continuum at the program, sub-regional and regional level. Continuum level aggregate data may be released without agency permission at the discretion of the agency's continuum. The VC HMIS will not release agency- or client- specific data to outside groups or individuals.

3. Ventura County HMIS Release: The Ventura County HMIS, with the consent of the CoC, will develop an annual release of aggregate data in a summary report format, which will be the standard response for all requests for collaborative data. The Ventura County HMIS will not release agency- or client- specific data to outside groups or individuals.

N. Agency Customization

A Participating Agency will have the ability to request system customization at the Agency level to reflect the data collection needs for their specific programs(s). The VC HMIS contains certain fields that can be tailored at no cost to the agency. Additional customization as performed by the software vendor or VC HMIS System Administrators may be purchased at the expense of the agency.

Explanation: Participating Agencies have some ability to customize VC HMIS fields to meet the specific needs of their program at the discretion of the Continuum of Care (CoC). At the request of the Agency

Administrator, the HMIS System Administrator will evaluate the request and implement the changes as warranted.

6. TECHNICAL SUPPORT AND SYSTEM AVAILABILITY

A. Technical Support

The Ventura County HMIS will provide technical support to all Agency Administrators and HMIS Users as needed.

Explanation: The Agencies that have an Agency Administrator are expected to provide first level technical support. The Ventura County HMIS System Administrators will provide all other technical support to the Agency Administrators and HMIS Users.

Technical Support Hours – 8:00 a.m. – 5:00 p.m. (PST), Monday through Friday (Excluding Holidays).
While the winter warming shelter is active, after hours support is negotiated.
Staff will respond in a timely manner to any requests for support made during the above hours. For technical support, please contact:
Ventura County HMIS telephone number: (805) 477-5156
HMIS-Support@ventura.org

Assistance will be provided in the following areas:
- **Help Desk Support:** Help Desk support is provided to help HMIS Users access and utilize HMIS application.
- **Training:** Agency Administrator training, User training, and Report training is provided quarterly. The schedule is posted one month in advance of the training and registration instructions are provided once the schedule is posted.
- **System Customization:** HMIS contains certain fields that can be tailored at no cost to the agency.
- **Reporting:** Training and technical assistance in accessing standardized reports and the creation of ad hoc (custom reports).
- **Data Analysis**: Interpreting reports.

Additional costs may apply in the following areas:
- **System Customization:** Agency-specific customization requests.
- **Reporting:** Agency-specific customized reports.
- **Data Conversion**: Assist in the development of a data conversion/migration plan, and provide support in data conversion/migration implementation.
- **Data Analysis**: Extensive analysis of agency's data.

Requests should be delineated as follows:

Technical Assistance Flow Chart
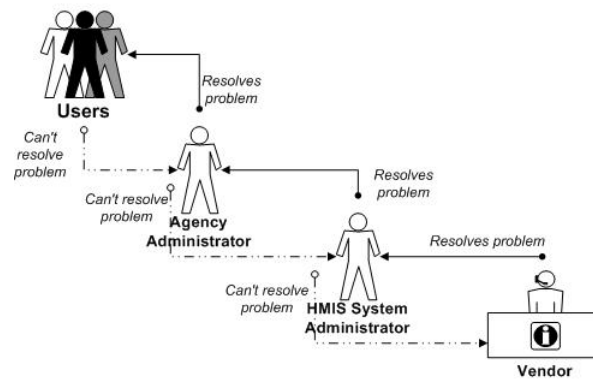
B. System Availability and Scheduled Maintenance

The Ventura County HMIS will be available to users at a minimum of 97.5% of the year.

Explanation: Necessary downtime for HMIS upgrades and patches will be communicated by HMIS System Administrators system-wide and performed in the late hours when possible.

C. Unplanned Interruption to Service

In the event of unplanned interruption to service, HMIS System Administrators will notify all Participating Agencies as soon as possible.

Explanation: When an event occurs that makes HMIS inaccessible, the HMIS System Administrator will analyze and determine the problem. In the event it is determined that HMIS accessibility is disabled system-wide, then the HMIS System Administrators will work with the software vendor to repair the problem. Within two hours of problem awareness, Participating Agencies will be informed of the estimated system availability. HMIS System Administrators will notify Participating Agencies via e-mail when service has resumed.

D. Conversion of Existing Data

Data migration from legacy systems is allowed upon approval from the local HMIS System Administrators. Migrated data must be non-duplicated and an exact match to the existing HMIS field type. The Participating Agency is responsible for the accuracy, completeness and quality of the migrated data.

Explanation: Data migration (or conversion) is the one-time process of transferring data from any existing system to the Ventura County HMIS. Upon transfer, the agency abandons its existing system and uses Ventura County HMIS for recording all client-related data.

The Agency's existing system must be an ODBC-compliant database platform in order for migration to be possible. The HMIS System Administrator can help the Agency determine the ODBC compatibility for any legacy systems. Only data that is an exact match with VC HMIS data fields may be migrated. Data must be unduplicated prior to data migration. All required fields in the VC HMIS are required for migration. A data dictionary will be provided upon request. This activity is provided by the System Vendor and will incur an additional cost. Cost will be determined prior to the service being rendered and will be agreed upon by requesting Agency, CoC Lead and Program Manager.

If the agency's data cannot be migrated, manual conversion (data entry by the agency's personnel) may be necessary to move data from legacy systems into the Ventura County HMIS.

7. SYSTEM ARCHITECTURE & SECURITY

A. Password Management Procedure

An HMIS End User must notify the Agency Administrator or HMIS System Administrator immediately upon realization that his or her password has been lost, forgotten or made public to others. The Agency Administrator is responsible for notification of password breach to the HMIS System Administrator. Upon notification, the HMIS System Administrator will immediately reset the user's password. A new HMIS End User will not receive an initial password without training.

Explanation: The HMIS System Administrator will reset the user password. The new password will be valid from the time of the reset until the next logon.

- Passwords need to be 8 characters minimum and contain a number, upper and lowercase letters, and 1 or more special characters.
- Passwords expire after 60 days (after expiration interval the user is required to provide a new password upon logon)
- Passwords cannot be reused.
- If system is dormant for 20 minutes, user will be forced to log back in.

B. Virus Protection

Agency Responsibilities: All Participating Agency computers and networks must have up-to-date anti-virus software.

Explanation: All Participating Agency computers should be protected by anti-virus software. The anti-virus software should be updated regularly to maintain maximum protection from the most recently released viruses.

C. Backup and Recovery Procedures

Ventura County HMIS is routinely backed up and saved to redundant systems by the vendor pursuant to the contract term and agreement to prevent loss of data.

D. Auditing and Monitoring

HMIS System Administrators have access to activity logs of changes made to the information contained within the database by end users. HMIS System Administrators can upon request or notice of suspicious/questionable behavior monitor access to the system by an end user that could potentially reveal a violation of information security protocols. Any request for auditing and monitoring will be evaluated for justification, investigated, and be kept confidential.

8. VIOLATIONS

A. Right to Deny Access

The HMIS System Administrator has the right to deny user access to the HMIS if an end user has violated any of the policies in this document. Any user or Participating Agency suspected of violating a policy may be subject to suspension of HMIS privileges until the violation can be resolved.

Explanation: If deemed necessary for the immediate security and safety of Ventura County HMIS data, the HMIS System Administrator has the right to deny or revoke user access to HMIS. The HMIS System Administrator will report access revocations to the HMIS Program Manager. The HMIS Program Manager will report all revocations to the CoC, HMIS Steering Committee and the Participating Agency.

B. Reporting a Violation

HMIS Users should report any suspected or alleged privacy or security violations to the HMIS System Administrator immediately.

Explanation: All HMIS Users are obligated to report suspected instances of noncompliance. For the Agencies that have an Agency Administrator, users should report security violations to the Agency Administrator first and then the Agency Administrator has the responsibility of providing that information to the HMIS System Administrator. If the Agency does not have an Agency Administrator, then the HMIS User is to report violations to the HMIS System Administrator directly.

C. Possible Sanctions

The HMIS Program Manager may request that the local CoC Governing Body sanction any user and/or Participating Agency found to be in violation of the privacy and/or security protocols.

Sanctions by the local CoC include, but are not limited to:
- A formal letter of reprimand
- Suspension of system privileges
- Revocation of system privileges
- Recommendation for corrective action for employee
- Referral for potential criminal prosecution

9. GRIEVANCES

A. Client Grievance Process

Clients will contact the Participating Agency with which they have a grievance for resolution of VC HMIS problems. Participating Agencies will report all client grievances to the local CoC Governing Body.

Explanation: Each Participating Agency is responsible for answering questions and responding to grievances from their own clients regarding the VC HMIS. After client has brought a VC HMIS-related complaint to the Participating Agency, the Participating Agency must have a process to respond to the complaint. The Participating Agency will provide a copy of the portion of the VC HMIS Policies and Procedures and the Client Revocation of Consent to Release Information to the client.

The Participating Agency must keep all grievances and responses on file at the agency site. The Participating Agency will send written notice of the grievance and response to the grievance to the local CoC Governing Body. The HMIS System Administrator will record all grievances and report them to the VC HMIS Steering Committee. Appropriate action will be taken as required by the local CoC Governing Body.

The CoC has overall responsibility for their local VC HMIS effectiveness and will respond if users and/or Participating Agencies fail to follow the terms set forth in the VC HMIS Policies and Procedures Manual, Agency Agreements, and User Agreement or if a breach of client confidentiality or the intentional misuse of client data occurs.

B. Agency Grievance Process

Participating Agencies will report all agency-generated VC HMIS-related grievances to the local CoC Governing Body. If the grievance is related to a problem with the VC HMIS, it must be reported to the HMIS System Administrator. Corrective action will be taken if system-wide changes are warranted.

Explanation: In order for the VC HMIS to serve as an adequate tool for agencies and provide a more accurate picture of our region's homelessness, any grievances related to problems with the VC HMIS must be addressed by the agency in conjunction with the CoC Governing Body with the goal of affecting systemic change where necessary. The local CoC will report grievance problems to the HMIS Administrator. If system-wide changes are warranted for a corrective action, it will be forwarded to the HMIS Steering Committee for approval.

The Participating Agency or End User has the right to file a Grievance regarding Sanctions from the HMIS Program Manager/CoC Governing Body. The HMIS Steering Committee will review the grievance, research the nature of the infraction, and will respond to the grievant within 30 days.

10. TERMINOLOGY

Agency Administrator: The person responsible for some system administration at the agency level. Responsibilities include informing HMIS System Administration of the need to add and delete users, basic trouble-shooting, and escalation of issues to their HMIS System Administrator. This person is the agency user's first line of contact for HMIS issues.

Agency Executive Management: The high-level management staff that is responsible for organization level decision making, for example, the agency President or Executive Director.

Aggregate Data: Data with identifying elements removed and concentrated at a central server. Aggregate data are used for analytical purposes and reporting.

Anti-Virus Software: Programs to detect and remove computer viruses. The anti-virus software should always include a regular update services allowing it to keep up with the latest viruses as they are released.

Application Service Provider (ASP): A 3rd party entity that manages and distributes software-based services to customers across a wide area network.

Audit Trail: A history of all access to the system, including viewing, additions and updates made to a client record.

Authentication: The process of identifying a user in order to grant access to a system or resource. Usually based on a username and password.

Cable: A type of modem that allows people to access the Internet via their cable television service.

Coordinated Assessment Level Data: Client information collected at intake, including the following system screens: Client Intake, Household/Demographics, Referral, Eligibility, Education/Employment and Documents.

Customer: The person receiving services whose information is entered into HMIS.

Continuum of Care (CoC): Continuum of Care; refers to the range of services (outreach, emergency transitional and permanent housing and supportive services) available to assist people out of homelessness.

CoC Governing Body: the entity responsible for policy decisions for a Continuum of Care system.

Database: An electronic system for organizing data so it can easily be searched and retrieved. The data within the HMIS is accessible through the web-based interface.

Decryption: Conversion of scrambled text back into understandable, plain text form. Decryption uses an algorithm that reverses the process used during encryption.

Dedicated IP: a reserve IP (see IP)

Dynamic Host Configuration Protocol (DHCP): A protocol that provides a means to dynamically allocate IP addresses to computers on a local area network (LAN).
Digital Certificate: An attachment to a message or data that verifies the identity of a sender.

Digital Subscriber Line (DSL): A digital telecommunications protocol designed to allow high-speed data communication over the existing copper telephone lines.

Encryption: Conversion of plain text into encrypted data by scrambling it using a code that masks the meaning of the data to any unauthorized viewer. Encrypted data are not readable unless they are converted back into plan text via decryption.

Firewall: A method of controlling access to a private network, to provide security of data.

Firewalls can use software, hardware, or a combination of both to control access.

HMIS: Homeless Management Information System. This is a generic term for any System used to manage data about the use of homeless services.

HMIS System Administrator: The person(s) with the highest level of user access. This user has full access to all user and administrative functions in the CoC and will serve as the liaison between Participating Agencies and the vendor. There is at least one HMIS System Administrator in each CoC.

HMIS User: A person who has a unique user identification (ID) and directly accesses HMIS to assist in data collection, reporting or administration as part of their job function in homeless service delivery. Users are classified as either system users who perform administration functions at the system or aggregate level or agency users who perform functions at the agency level.

Host: A computer system or organization that plays a central role providing data storage and/or application services for HMIS.

Internet: A set of interconnected networks that form the basis for the World Wide Web.

Internet Protocol Address (IP Address): A unique address assigned to a user's connection based on the TCP/IP network. The Internet address is usually expressed in dot notation, e.g.: 128.121.4.5.

Internet Service Provider (ISP): A company that provides individuals or organization with access to the internet.

Local Area Network (LAN): A network that is geographically limited, allowing easy interconnection of computers within offices or buildings.

Network: Several computers connected to each other.

Network Address Translation (NAT) is the translation of an Internet Protocol address (IP address) used within one network to a different IP address known within another network. One network is designated the inside network and the other is the outside. Typically, a company maps its local inside network addresses to one or more global outside IP addresses and unmaps the global IP addresses on incoming packets back into local IP addresses. This helps ensure security since each outgoing or incoming request must go through a translation process that also offers the opportunity to qualify or authenticate the request or match it to a previous request. NAT also conserves on the number of global IP addresses that a company needs and it lets the company use a single IP address in its communication with the world.

On-site: The location that uses the HMIS and provides services to at-risk and homeless clients.

Participating Agency: An agency, organization, or group that has signed an

HMIS Agency Agreement with their respective CoC Governing Body.

Program Level Data: Client information collected during the course of the client's program enrollment, including the following system screens: Program Entry, Services Provided, Client Profile, Case Notes, Track Savings, Bed Assignments, Bed Maintenance, Daily Services, Sessions, and Program Exit.

Real-Time: Data that is processed and available to other users as it is entered into the system.

Server: A computer that provides a service for other computers connected to it via a network. Servers can host and send files, data or programs to client computers.

Static IP Address: see Dedicated IP

T1 Line: Communication line that can carry voice or data at transmission speeds that are 25 times the speed of a modem.

Transmision Control Protocol/Internet Protocol (TCP/IP) –The protocol that enables two or more computers to establish a connection via the internet.

User ID: The unique identifier assigned to an authorized HMIS User.

Virtual Private Network (VPN): A group of computer systems that communicate securely over a public network.

Wide Area Network (WAN): A network that is not geographically limited, can link computers in different locales, and extend requests for web pages.

Wired Equivalent Privacy (WEP): is a security protocol, specified in the IEEE Wireless Fidelity (Wi-Fi) Standard, 802.11b, that is designed to provide a wireless local area network (WLAN) with a level of security and privacy comparable to what is usually expected of a wired LAN. A wired local area network (LAN) is generally protected by physical security mechanisms (controlled access to a building, for example) that are effective for a controlled physical environment, but may be ineffective for WLANs because radio waves are not necessarily bound by the walls containing the network. WEP seeks to establish similar protection to that offered by the wired network's physical security measures by encrypting data transmitted over the WLAN. Data encryption protects the vulnerable wireless link between clients and access points; once this measure has been taken, other typical LAN security mechanisms such as password protection, end-to-end encryption, virtual private networks (VPNs), and authentication can be put in place to ensure privacy.

11. ACKNOWLEDGEMENT

I acknowledge that I have received a written copy of the Ventura County HMIS Policies and Procedures. I understand the terms of the Ventura County HMIS Policies and Procedures and I agree to abide by them. I understand that any violation of the policies or procedures could lead to CoC sanctions or even criminal prosecution.

Agency Name:

Printed Name:

Signature:

Date:

AHA Preference

This preference encompasses applicants with challenging living conditions such as:

1) Applicants who are displaced and are not living in standard, permanent replacement housing or are unable to live in their current residence because of:

- Demolition or disposition of their residence as a result of local, state, or federal mandates.

- Residing in a multifamily rental housing project when HUD sells, forecloses upon or demolishes the project.

- Residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term.

- Providing information on criminal activities to a law enforcement agency and, after a threat assessment and to avoid reprisals, the law enforcement agency recommends housing the family to reduce risk of violence to the family. The AHA will take reasonable precautions to assist the law enforcement agency in concealing the new location of the family in cases of witness protection.

- Being the victim of one or more hate crimes and vacating the home because of the crime or the fear of such a crime. A hate crime is actual or threatened, physical violence or intimidation that is directed against a person or his property and is based upon the person's race, color, religion, sex, national origin, disability, familial status, or sexual orientation, and occurred within the past yea rand is of a continuing nature.

- Being the victim of domestic violence is defined as applicants who have been subjected to or victimized by a member of the family or household within the past year. The AHA will require evidence that the family has been displaced as a result of fleeing violence in the home. Applicants are also eligible for this preference if there is evidence that the family is currently living in a situation where they are being subjected to or victimized by violence in the home. The AHA will consider the following criteria to establish this preference:

  - Evidence of actual or threatened physical violence directed against the applicant or the applicant's family by a spouse or other household member who lives with the family. Such violence must be documented as being of a continued nature.

  - The applicant must certify that the abuser will not reside with the applicant unless the AHA gives prior written approval.

  - The applicant may be transitioning from an interim-housing program designed to assist victims of domestic violence and their children.

  - An applicant who lives in a violent neighborhood or is fearful of other violence outside the household is not considered involuntarily displaced and is not eligible for this preference.

Families who are residing with friends or relatives on a temporary basis may be evaluated for inclusion in the homeless definition.

This preference also includes displacement by non-suitability of the unit when a member of the family has a mobility or other impairment that makes the person unable to use critical elements of the unit and the owner is not legally obligated to make changes to the unit.

Critical elements are:

- Entry and egress of the unit and building
- A sleeping area
- A full bathroom
- A kitchen, if the person with a disability must do their own food preparation/other.

HOUSING AUTHORITY OF THE CITY OF SAN BUENAVENTURA

HOUSING CHOICE VOUCHER PROGRAM
2014 Proposed changes to the Administrative Plan

*New policy and clarifications are highlighted in yellow and <u>underlined</u>

*Current policy removed using ~~strikethrough~~

Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

INTRODUCTION

When a family wishes to receive Section 8 HCV assistance, the family must submit an application that provides the PHA with the information needed to determine the family's eligibility. HUD requires the PHA to place all families that apply for assistance on a waiting list. When HCV assistance becomes available, the PHA must select families from the waiting list in accordance with HUD requirements and PHA policies as stated in the administrative plan and the annual plan.

<u>The 5-Year and Annual PHA Plan are available for public review at the main administrative offices of the PHA located at 995 Riverside Street, Ventura CA 93001, the satellite administrative offices of the PHA located at 11122 Snapdragon St. Ste. 100, Ventura CA 93004, and the PHA's website at www.hacityventura.org.</u>

The PHA is required to adopt a clear approach to accepting applications, placing families on the waiting list, selecting families from the waiting list and must follow this approach consistently. The actual order in which families are selected from the waiting list can be affected if a family has certain characteristics designated by HUD or the PHA to receive preferential treatment. Funding earmarked exclusively for families with particular characteristics may also alter the order in which families are served.

HUD regulations require that all families have an equal opportunity to apply for and receive housing assistance, and that the PHA affirmatively further fair housing goals in the administration of the program [24 CFR 982.53, HCV GB p. 4-1]. Adherence to the selection

Housing Choice Voucher Administrative Plan

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

The PHA must have policies regarding various aspects of organizing and managing the waiting list of applicant families. This includes opening the list to new applicants, closing the list to new applicants, notifying the public of waiting list openings and closings, updating waiting list information, purging the list of families that are no longer interested in or eligible for assistance, as well as conducting outreach to ensure a sufficient number of applicants.

In addition, HUD imposes requirements on how a PHA may structure its waiting list and how families must be treated if they apply for assistance from a PHA that administers more than one assisted housing program.

Definition of "Homeless" [Notice PIH 2013-15]

For the purposes of the PHA's tenant selection policies, the following definition of "homeless" shall apply in awarding preference to a family:

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

a. 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

b. 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

c. 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;

Any individual or family who:

a. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; and

b. Has no other residence; and

c. Lacks the resources or support networks, e.g., family, friends, and faith- based or other social networks, to obtain other permanent housing

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

<u>HACSB Policy</u>

HACSB will select families from the waiting list as follows:

1. Families who are permanently displaced due to local (within HACSB's jurisdiction) government action will be selected first from the waiting list.

2. Families of federally declared disasters who are Section 8 voucher holders or public housing residents in another jurisdiction will be selected second from the waiting list.

3. Families that have been terminated from HACSB's HCV program due to insufficient funding will be selected third from the waiting list.

4. Current Public Housing residents living in units proposed to have assistance transferred under the Rental Assistance Demonstration (RAD) program.

After families identified above are selected from the waiting list, HACSB will select families based on the total number of points families receive when the following preferences are applied. Families with the highest number of points will be selected first. Among families with equal points, families with the earliest date and time of application will be selected first. A family can earn no more than a maximum of 3 4 points.

Applicant families consisting of one individual who is elderly or disabled in the HACSB's jurisdiction will be given a selection priority over all "other Single" applicants.

One (1) point will be given to a family that is:

- An Elderly Family (head of household, spouse, or co-head is 62 years of age or older); or,

- A family that contains a disabled family member; or,

- A family whose head of household is a U.S. Veteran (unless they received a dishonorable discharge); or,

- A family whose head of household is a surviving spouse of a Veteran; or

- Be currently receiving unemployment benefits and actively seeking work
- Be a family where the head of household is either elderly or disabled (if there is no spouse or co-head); or
- Be a family where the head of household and the spouse/co-head is either elderly or disabled (if there is a spouse or co-head).

  Example 1: Head of household is elderly and the spouse is elderly. The family would receive benefit of the working preference.

- Example 2: The head of household is disabled. The spouse is neither elderly nor disabled. This family would not receive benefit of the working preference. In order to receive such preference, the spouse would need to meet the working or school requirements as outlined above.

Set-a-side Vouchers — A local preference will be given to applicants that have been referred by the local service agencies partnering with the HACSB and providing services to meet a special need, based on funding availability. All referrals must meet Section 8 Housing guidelines, Chapter 3-111.D. Continued Section 8 assistance is contingent upon maintaining program eligibility which includes, complying with the servicing agency's specific program requirements. The HACSB has the following Set-a-side voucher preferences:

Homelessness Preference - The HACSB has a local preference for homeless families or those at risk of being homeless that are currently living in "transitional" housing and receiving supportive services. Eligibility criteria to be determined by local service agencies partnering with the HACSB and providing services in an effort to address chronic homelessness.

Family Unification Program (FUP) Preference: The Family Unification Program is jointly administered by the County of Ventura's Children and Family Services Division of the Human Services Agency and the Housing Authority-All applicants must be referred by Children and Family Services and must be receiving services through Children and Family Services Division at the time of application.

Farm Worker Housing Preference — The HACSB has a local preference for farm worker families impacted by overcrowding, overpayment and likely to have greater difficulty in finding decent, affordable housing due to their very limited income and the often unstable nature of their employment. Eligibility criteria to be determined by local service agencies partnering with the HACSB and providing supportive services to the farm worker families.

Aged-Out Foster Youth Preference - The HACSB has a local preference for youth legally emancipated & deemed an adult before they are 18 or "Aged Out" of a foster care program. Eligibility criteria to be determined by local service agencies partnering with the HACSB and providing services to promote self sufficiency.

HOUSING AUTHORITY OF THE CITY OF SAN BUENAVENTURA

PUBLIC HOUSING PROGRAM
2014 Proposed changes to the Admissions and Continued Occupancy Policy

*New policy and clarifications are highlighted in yellow and <u>underlined</u>

*Current policy removed using ~~strikethrough~~

Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

The PHA must have policies regarding the type of waiting list it will utilize as well as the various aspects of organizing and managing the waiting list of applicant families. This includes opening the list to new applicants, closing the list to new applicants, notifying the public of waiting list openings and closings, updating waiting list information, purging the list of families that are no longer interested in or eligible for public housing, and conducting outreach to ensure a sufficient number of applicants.

In addition, HUD imposes requirements on how the PHA may structure its waiting list and how families must be treated if they apply for public housing at a PHA that administers more than one assisted housing program.

<u>Definition of "Homeless" [Notice PIH 2013-15]</u>

<u>For the purposes of the PHA's tenant selection policies, the following definition of "homeless" shall apply in awarding preference to a family:</u>

<u>An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</u>

a. <u>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</u>

b. <u>An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters,</u>

- A family that contains a disabled family member; or,

- A family whose head of household is a U.S. Veteran (unless they received a dishonorable discharge); or,

- A family whose head of household is a surviving spouse of a Veteran; or

- A family with minor children.

Once (1) point will be given to families:

- That contain minor children who meet the definition of "homeless" in § 4-II.A above and are referred by an agency or consortium of agencies in accordance with referral agreements with the HACSB. Assistance will be particularly targeted toward those referred families who qualify as "chronically homeless" in accordance with 24 C.F.R. § 578.3.

One (1) point will be given to families who qualify for the Residency Preference.

In order to qualify for the residency preference, the head of household, spouse, or co-head must:

o Hold legal residence within HACSB's jurisdiction (includes a homeless family who previously resided within the HACSB's jurisdiction but are currently residing in a county sponsored shelter); or

o Work within HACSB's jurisdiction; or

o Have been hired to work within HACSB's jurisdiction.

One (1) point will be given to families who qualify for the Working Preference.

In order to qualify for the working preference, the head of household, spouse, or co-head must meet one of the following criteria:

- Be currently working, and have worked a minimum of 20 hours a week for the last three months; or

- Be currently enrolled and fully participating in the educational program as a full-time student in school or in a qualified training program; or

- Be currently working and have worked a minimum of 16 hours a week for the last three months AND be currently enrolled at least part-time in school or in a qualified training program.

> *The HACSB defines training program as "a learning process with goals and objectives, generally having a variety of components, and taking place in a series of sessions over a period to time. It is designed to lead to a higher level of proficiency, and it enhances the individual's ability to obtain employment. It may have performance standards to measure proficiency. Training may include, but is not limited to: (1) classroom training in a specific occupational skill, (2) on-the-job training with wages subsidized by the program, or (3) basic education" [expired Notice PIH 98-2, p. 3].*

PART III: SELECTION FOR HCV ASSISTANCE

4-III.A. OVERVIEW

As vouchers become available, families on the waiting list must be selected for assistance in accordance with the policies described in this part.

The order in which families are selected from the waiting list depends on the selection method chosen by the PHA and is impacted in part by any selection preferences for which the family qualifies. The availability of targeted funding also may affect the order in which families are selected from the waiting list.

The PHA must maintain a clear record of all information required to verify that the family is selected from the waiting list according to the PHA's selection policies [24 CFR 982.204(b) and 982.207(e)]. The PHA's policies must be posted any place where the PHA receives applications. The PHA must provide a copy of its tenant selection policies upon request to any applicant or tenant. The PHA may charge the family for providing a copy of its tenant selection policies (24 CFT 960.202(c)(2)).

> ### OHA Policy
>
> When an applicant or resident family requests a copy of the OHA's tenant selection policies, the OHA will provide copies to them at a reasonable fee per page in accordance with the City Schedule.

4-III.B. SELECTION AND HCV FUNDING SOURCES

Set aside Vouchers

A local preference will be given to applicants that have been referred by the local service agencies partnering with the OHA and providing services to meet a special need, based on the funding availability. All referrals must meet Section 8 guidelines, contingent upon maintaining program eligibility which includes, complying with the servicing agencies specific program requirement. The PHA has the following set aside Voucher preferences:

- **Homelessness Preference** – The PHA has a local preference for homeless families or those at risk of being homeless. The PHA must offer the opportunity to current applicants on the HCV waiting list and who are receiving support of services. The eligibility criteria will be determined by local service agencies partnering with the PHA in an effort to address homelessness. The PHA will issue vouchers to the first fifteen (15) referrals received from local service agencies to eligible families. The PHA will maintain a separate waiting list for homeless families and will assist them when a Homeless Set Aside Voucher becomes available, or by time and date of application, whichever occurs first. If the PHA does not have enough applicants on the waiting list who qualify for the preference, the PHA will open its waiting list strictly for families to which the preference applies.

*For the Definition of Homeless, see the Glossary

- **Family Unification Program (FUP) Preference** – The Family Unification Program is jointly administered by the County of Ventura's Children and Family Services Division of the Human Services Agency and the Housing Authority. All applicants must be referred by Children and Family Services, and must be receiving services through Children and Family Services Division at the time of application.

Local Preference Limitations for Set-a-side Vouchers	
Type of Local Preference	**Maximum Number of Families**
Homelessness	**15**
Family Unification Program	**10**

Special Admissions [24 CFR 982.203]

HUD may award funding for specifically-named families living in specified types of units (e.g., a family that is displaced by demolition of public housing; a non-purchasing family residing in a HOPE 1 or 2 projects). In these cases, the OHA may admit such families whether or not they are on the waiting list, and, if they are on the waiting list, without considering the family's position on the waiting list. These families are considered non-waiting list selections. The OHA must maintain records showing that such families were admitted with special program funding.

Targeted Funding [24 CFR 982.204(e)]

HUD may award a PHA funding for a specified category of families on the waiting list. The PHA must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, the OHA may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

OHA Policy

The OHA administers the following types of targeted funding:

- VASH

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.