



FY2023 CoC Competition – Project Evaluation Debrief

Ohio BoSCoC

September 12, 2023

Training Information









Mute your audio.

Use the chat to submit questions. This training recording and slide deck will be posted to cohhio.org

This training is being recorded.

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- 1. Renewal Project Evaluation
- 2. Common CoC Compliance Findings
 - Eligibility and Documentation
 - Housing Search
 - Rent Reasonableness
 - VAWA/Emergency Transfer Plan
 - · Confidentiality
 - Housing First
 - Record Retention
 - HMIS
 - Coordinated Entry/Prioritization Workgroup
 - PLE Inclusion
 - Order of Priority
- 3. Resources



1. Renewal Project Evaluation

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January 1, 2022 - December 31, 2022

Project Evaluation Measures

CoC Program Compliance

Compliance with CoC Program Rule

- All grantees must submit Standard Operating Procedures (SOPs) for review
- Failure to submit SOPs will result in 25-point deduction from project evaluation score

Project Evaluation Measures

CoC Program Compliance

APPENDIX F: CoC Compliance Review Tool

Review Type:	Question:	Reference	Yes	No	Points Possible	Points Given:
Agency						
		Page 6 of Ohio				
	Does the policy and procedure document define	BoSCoC Program			2	
	project eligibility criteria?	Standards				
	Does the recipient have written procedures outlining the process for documenting eligibility and record				2	
	keeping requirements?	24 CFR 576.500 &				
		Pages 33, 38, & 51 of				
	Does the recipient have written procedures that	Ohio BoSCoC Program			1	
2	outlines their agency's housing search process ?	Standards				
	Does the recipient have written procedures for the initial and re-inspection of units to ensure they meet				1	
	HQS?	§ 578.75 (b, 1 &2)				



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3. Resources

Eligibility

Scorecard Question:

Does the policy and procedure document	Page 6 of Ohio BoSCoC Program	Y	2
define project eligibility criteria?	<u>Standards</u>		

What we're looking for:

- Who is eligible to receive services from your project type (PSH, RRH, TH)
 - PSH = Category 1 & 4 with verified disability
 - RRH = Category 1
 - TH = Category 1, 2*, & 4

Eligibility

Housing Program Eligibility

Example:

Policy:

To adhere to the written Homeless Programs Standards established and consistently followed by the Ohio Balance of State Continuum of Care by serving persons who meet category 1 of HUD's homeless definition AND are diagnosed with a disability.

Procedures:

All Family Abuse Shelter of Miami County, Inc. PSH projects must serve persons who meet category 1 of HUD's homeless definition AND they are diagnosed with a disability. Eligibility must be in compliance with the Housing First Model and abide by Fair Housing Practices.

1. Homelessness:

A. Category 1 Literal Homelessness

Is defined as homeless individuals/families who lack a fixed, regular, and adequate nighttime residence, meaning:

- a) Sleeping in a place not designed for or ordinarily used as a regular sleeping accommodation, such a place not meant for human habitation
- b) Living in emergency shelter or transitional housing designated to provide temporary living arrangements (including hotel/motel stays paid for by charitable or government programs)
- c) Exiting an institution where the individual resided for less than 90 days and where the individual entered the institution immediately from emergency shelter (including hotel/motel stays paid for by charitable or government programs) or an unsheltered location

B. Chronic Homelessness:

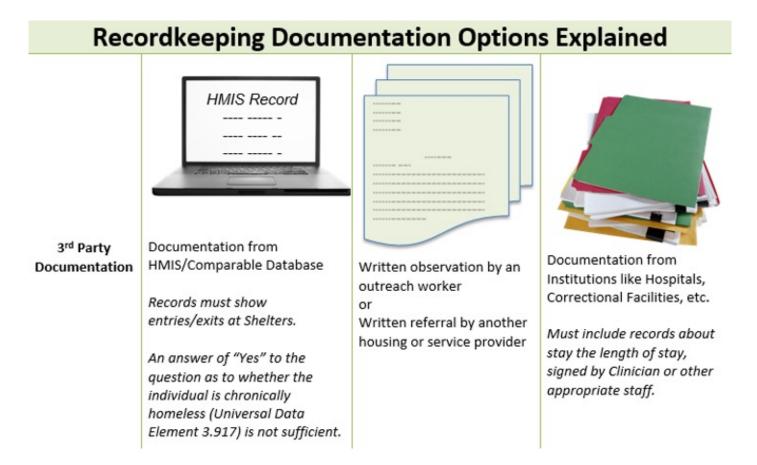
For the Family Abuse Shelter of Miami County, Inc. PSH Projects prioritized for chronically homeless, eligibility includes an individual who:

- a) Is currently homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; AND
- b) Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years where the combined occasions total a length of time of at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven. AND
- c) Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability;

Scorecard Question:

Does the recipient have written procedures	24 CFR 576.500 & Page 8-9 of Ohio Y	(2
outlining the process for documenting			
eligibility and record keeping requirements?			

What we're looking for:



https://files.hudexchange.info/resources/documents/HomelessDefinition_Recordk eepingRequirementsandCriteria.pdf

Example:

1st HMIS documentation

Following the order of preference documentation of current and past homelessness should be obtained from HMIS data first.

2nd Third-party documentation:

If HMIS data is not available staff should always try to obtain third-party documentation of homelessness first. Ideally, third-party documentation comes from an agency other than Family Abuse Shelter of Miami County, Inc.

3rd Intake worker observation:

If third-party documentation cannot be obtained, then staff must document in client files their efforts to obtain it. Staff may then attempt to obtain intake/staff worker observation of homelessness, and document that in the client/household file. Again, if that documentation cannot be obtained, then staff must document in client files their efforts to obtain it.

 4th Self-certification of homelessness from the person seeking assistance: If no other means of verification and documentation could be obtained, staff may collect self-certification documentation from the prospective client to document some of the homeless episodes or the length of time spent being homeless. Documentation of efforts made to obtain the information should also be included in the client file.

Example:

2. Disability:

A. Documenting a Disability

To be eligible for PSH, homeless households/individuals must have a diagnosed disability. Family Abuse Shelter of Miami County, Inc. must document disability status in client files in one of the following ways:

- *a*. Third-party documentation must be provided (cannot be self-certified) and include:
- b. Written verification from a professional licensed by the State of Ohio to diagnose and treat the disability and certification that the disability is expected to be longcontinuing or of indefinite duration and substantially impedes the individuals ability to live independently
- c. Written verification from Social Security Administration (SSA) SSI or SSDI
- d. The receipt of a disability check (copy of check stub or equivalent documentation in file)
- e. Intake staff-recorded observation of a disability that is confirmed and accompanied by evidence above within 45 days

Housing Search

Scorecard Question:

Does the recipient have written procedures that outlines their agency's housing search process ?

Pages 33, 38, & 51 of Ohio BoSCoC Program Standards

What we're looking for:

• Details on how program participants will find housing

Housing Search

Example:

Housing Placement & Inspection

Housing Placement

Individuals and families seeking assistance with Community Action's PSH programs generally are households that have the highest barriers to housing, which will include criminal histories, poor credit, multiple past evictions, etc. As such, the Community Action's PSH programs Case Manager should expect to assist participants in housing search and placement, should those services be desired. Every individual being deemed eligible for Community Action's PSH programs should at a minimum be offered the CACFC housing provider list. The Case Manager, utilizing information collected at intake, should review CACFC's housing provider list with the participant and identify housing that will not be suitable due to the housing provider's (legal) screen-out criteria. This will help your participant more effectively utilize their time in locating a unit. CACFC staff must review the fair housing section to familiarize themselves with fair housing policy and how to report fair housing violations.

If desired by the participant, the Case Manager may also: search the internet and Facebook sites for available units, review the local paper, and utilize informal networks, such as word of mouth to identify open housing units in the community. Program staff should actively network with local housing providers and invite them to attend the monthly Continuum of Care meetings at least annually.

Rent Reasonableness

Scorecard Question:

Does the recipient have a policy and procedure	§ 578.51 (g) & § 578.49 (b)(2)		2
regarding the practice and documentation of			
rent reasonableness?			

What we're looking for:

- Compliance with § 578.49 and § 578.51
 - applies to both leasing and rental assistance
- A policy and procedure that ensures that a unit supported by CoC grant funds is not more expensive than similar units not supported by grant funds
 - Takes into account location, size, type, and age of unit

Rent Reasonableness

Example:

Rent Reasonableness Documentation

Rents for units leased with Community Action's PSH programs assistance must meet a "rent reasonableness" test. This section describes this standard for rents and how a reasonable rent is documented. Even though rent reasonableness must be shown for each unit, the actual rent and utilities amount must fall within 100% of FMR for the area where the unit located.

Community Action's PSH programs staff must determine whether the rent being charged for an assisted unit is both:

 Reasonable in relation to rents being charged for comparable unassisted units with similar features and amenities; and

 Not more than rents currently being charged by the same owner for comparable unassisted units. [See Section 582.305(b)]

The Rent Reasonableness Worksheet must be completed and placed in the client's file (Tab 3 – Housing Inspection) for each unit at time of rent-up and whenever the rent changes. This documentation must be kept in project files for the full period Community Action's PSH programs assistance is provided.

Scorecard Question:

Does the recipient have written procedures for § 578.99 & Page 11 of 0	Ohio	1
lease and sublease requirements, including BoSCoC Program Stand	ards	
VAWA protections and Emergency Transfer		
Plans?		

What we're looking for:

- Compliance with CoC Interim Rule § 578.99
- Requirements of VAWA apply to all PH and TH for which CoC funds are used
 - CoC recipient or subrecipient must provide each individual or family applying for PH and TH VAWA information
- Must have Emergency Transfer Policy and Procedure in SOP

Example:

Domestic Violence during the Program –

In accordance with the Violence Against Women Act (VAWA), CACFC homeless programs providing housing or rental assistance must allow participants who are victims of domestic violence, dating violence, sexual violence, human trafficking, or stalking to request an emergency transfer from the participant's current unit to another unit.

The ability to request a transfer is available regardless of sex, gender identity, or sexual orientation. The ability of HP to honor such request for tenants currently receiving assistance, however, may depend upon a preliminary determination that the tenant is or has been a victim of domestic violence, dating violence, sexual assault, or stalking, and on whether CACFC has another dwelling unit that is available and is safe to offer the tenant for temporary or more permanent occupancy.

This plan identifies tenants who are eligible for an emergency transfer, the documentation needed to request an emergency transfer, confidentiality protections, how an emergency transfer may occur, and guidance to tenants on safety and security. This plan is based on a model emergency transfer plan published by the U.S. Department of Housing and Urban Development (HUD), the Federal agency that oversees that the CACFC is in compliance with VAWA.

Eligibility for Emergency Transfers

A tenant who is a victim of domestic violence, dating violence, sexual assault, or stalking, as provided in HUD's regulations at 24 CFR part 5, subpart L is eligible for an emergency transfer, if: the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant remains within the same unit. If the tenant is a victim of sexual

Example:

Emergency Transfer Request Documentation

To request an emergency transfer, the tenant shall notify their case manager and submit a written request for a transfer to 1400 US Route 22 NW, Washington Court House, Ohio 43160. CACFC will provide reasonable accommodations to this policy for individuals with disabilities. The tenant's written request for an emergency transfer should include either:

1. A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under CACFC's program; OR

2. A statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant's request for an emergency transfer.

CACFC may request documentation of the domestic or sexual violence. If requested, the participant may provide any one of the following forms of documentation: 1. HUD model form located on the homeless crisis response program page 2. Signed documentation from a victim service provider, an attorney, a medical professional, or a mental health professional from whom the participant has sought assistance relating to domestic violence, dating violence, sexual violence, or stalking, or the effects of abuse; or 3. A police report or court record.

Confidentiality

Scorecard Question:

Does the recipient have a written procedure	HMIS Policies and Procedures (III.		1
detailing the process of maintaining	A. 1)		
confidentiality of client records?			

What we're looking for:

- Compliance with CoC Interim Rule § 578.103 18 (b) (c) and HMIS Guidelines
 - "In addition to meeting the specific confidentiality and security requirements for HMIS data, the recipient and its subrecipients must develop and implement written procedures to ensure:
 - All records containing PII are secure
 - Addresses and locations of family violence projects must not be made public
 - Addresses and locations of participants will not be made public

Confidentiality

Example:

REPORTING POLICY AND PROCEDURE:

- At enrollment, interim reviews and exit, Family Advocate will enter participant data into HMIS within three business days of the enrollment or exit.
- FA's will complete MIS reports monthly on all programs to ensure comprehensive services are being provided and program outcomes are being met. MIS will be completed by the 5th of each month.
- FA's will report successes, challenges and concerns at staff meetings.
- Annual Progress Reports will be completed at the end of each year.
- All GLCAP staff will complete an HMIS annual certification. All GLCAP staff are expected to maintain all HMIS standards set forth by COHHIO.
 - Staff will use unique HMIS numbers to communicate via email to other service providers. All communication will be encrypted to any non-HMIS participating service providers.
 - GLCAP staff agree to the following at their onboarding/orientation meeting:

 I am aware that during the course of my employment confidential information including but not limited to documents, records, data, notebooks, notes, reports, proposals, lists, correspondence, specifications, drawings, blueprints, sketches, materials, equipment, other documents or property, or reproductions of any aforementioned including participant and employee related data will be made available to me. I understand that this information is proprietary and critical to the success of GLCAP and must not be given out or used outside of GLCAP's premises or with non-GLCAP employees. In the event of termination of employment, whether voluntary or involuntary, I hereby agree not to utilize, divulge, or exploit this information with any other individual or company.
- All paper files and documentation will be stored in locked areas. All digital files will be maintained in the HMIS system under "Files" for each participant.
 - GLCAP staff will follow all HMIS confidentiality requirements set forth by COHHIO Data Quality Standards and HMIS Policy and Procedures
 - GLCAP staff sign an agreement to ensure that all records and information remain confidential.
 - All paper and digital files will be maintained for 3 years.

Housing First

Scorecard Question:

practices	procedure outlining the use of Housing First Standards	Does the recipient have a written policy and Page 9 of Ohio BoSCoC Program 2	,			2
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What we're looking for:

- Explicit mention of Housing First and what the use of Housing First looks like in practice
 - Not just what it is, but also, how it applies

Housing First

Example:

Housing First and Progressive Engagement

Housing First is a best practice approach to ending homelessness by providing housing as quickly as possible through housing focused assistance, the reduction of barriers to program entry, rapid exit from homelessness, and voluntary supportive services as needed and desired. PSH strives to provide assistance with housing as quickly as possible with minimal barriers to entering the program. The project focuses on empowering participants through self-determination, closing gaps on barriers to basic housing needs, and working on other barriers that could impact the housing status. The program has no minimum income requirements, employment and sobriety are not factors that will prohibit entry into the program. PSH provides a rental subsidy and ongoing case management services during the lifetime of

Record Retention

Scorecard Question:

Does the recipient have written procedures	24 CFR 576.500 & Page 8-9 of Ohio	Y	2
outlining the process for documenting			
eligibility and record keeping requirements?			

Record Retention

What we're looking for:

- <u>CoC Program Interim Rule § 578.103 (18)c:</u>
 - All records pertaining to CoC funds must be retained for 5 years

(c) Period of record retention. All records pertaining to Continuum of Care funds must be retained for the greater of 5 years or the period specificized below. Copies made by microfilming, photocopying, or similar methods may be substituted for the original records.

Record Retention

Example:

Record Retention Policy

All records pertaining to the S+C Program funds must be retained for at least five years unless program funds were used for the acquisition, new construction, or rehabilitation of a project site.

S+C program participants' qualifications, eligibility documentation, and other program participant records must be retained for five years after expenditure of all funds from grant under which program participants were served (§ 578.103(c)(1)). Records for acquisition, new construction, and rehabilitation must be retained for 15 years following the date the project is first occupied, or used, by program participants (§ 578.103(c)(2))



Scorecard Question:

Does the recipient have written policy	Page 4 of Ohio BoSCoC Program		1
regarding Homeless Management Information	Standards		
System (HMIS)?			

What we're looking for:

• Mention that HMIS is used to collect data and that program will follow HMIS privacy and security standards

HMIS

Example:

HMIS:

HUD requires the use of the Homeless Information Management System (HMIS) to maintain client and project-level data. Clarity is the system used in Lorain County and by the Ohio BoSCoC <u>The</u> SPCC should contact HMIS staff for training and technical assistance at COHHIO. The SPCC is responsible for entering correct information into HMIS on a regular and consistent basis – which is defined as upon tenant move in. The SPCC will monitor data quality in HMIS monthly and forward data quality including any corrections to the MHARS Board by the 7th day of each month. If there are data concerns MHARS will contact SPCC for correction. If SPCC cannot correct the issue it is their responsibility to notify the HMIS helpdesk for further guidance. The S+C funds can be reduced or terminated if the data is not entered correctly on a regular basis as defined. The SPCC will follow all guidelines for maintaining system security and client confidentiality. The MHARS Board S+C Program lead and MHARS Board S+C fiscal lead will also have access to HMIS.

Coordinated Entry

Scorecard Question:

Does the recipient have written policy and	§ 578.23 (9)	2
procedures regarding the CE process		

What we're looking for:

- The requirement that those entering program have gone through Coordinated Entry
- How are those who have gone through CE prioritized for a PH opening?
 - Should included the use of the Prioritization Workgroup

Coordinated Entry

Coordinated Entry

Example:

HUD defines coordinated entry (CE) as, "a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs." Catholic Charities of Lorain County oversees the Coordinated Entry Program. As of January 2018, all households entering Lorain County S+C program must first contact CE at Catholic Charities.

Coordinated Entry will enter basic information into HMIS (Clarity) and complete a VI-SPDAT assessment tool, if applicable. If the applicant is in a shelter the shelter staff will complete the VI-SPDAT and enter data into HMIS. The S+C program will utilize the PSH prioritization waitlist from HMIS to identify chronically homeless individuals with high VI-SPDAT scores for potential tenants. The CoC Coordinator will email the PSH prioritization wait list as vacancies become available. The person/family with longest length of homelessness, highest VI-SPDAT score, and disability that has been prioritized through the PSH workgroup, will be contacted to determine if they are eligible to S+C housing. The Shelter Plus Care Coordinator (SPCC) will work with local shelters and PATH program to help the tenant complete application, if they choose, to determine eligibility for the S+C program. If the person does not meet criteria or does not want to apply for S+C program their name will remain on the PSH waitlist in the original order and will be offered housing as vacancies arise.

The SPCC conducts an initial eligibility interview with the potential tenant to determine eligibility. The SPCC stays ahead and always has an S+C applicant approved even if there is 100% occupancy. This process eliminates unnecessary time to process an applicant's eligibility as opposed to beginning the process upon the Property Management notification of a tenant's notice of intent to vacate a unit.

The SPCC must follow all guidance per the Region 4 Coordinated Entry Plan along with the BoSCoC Program Standards related to Coordinated Entry.

Prioritization Workgroup

PSH Example:

PRIORITIZATION

PSH/SPC applicants are required to go through the local Coordinated Entry Process in order to determine prioritization. Applicants are prioritized using the local prioritization workgroup to determine where resources will be diverted for those particular households. Applicants must go through the CE process and have been assessed by the assessment tool, the VI-SPDAT.

PLE Inclusion

Scorecard Question:

Does the recipient have a written policy	§ 578.75 (g)	1
outlining the participation of homeless and/or		
formerly homeless on the agency board of		
directors?		

PLE Inclusion

What we're looking for:

Compliance with CoC Interim Rule § 578.75 (g)

(g) Participation of homeless individuals. (1) Each recipient and subrecipient must provide for the participation of not less than one homeless individual or 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.

> https://www.govinfo.gov/content/pkg/CFR-2017-title24vol3/xml/CFR-2017-title24-vol3-part578.xml

PLE Inclusion

Example:

Oversight with Board of Directors

As required by federal regulation, New Housing Ohio will ensure that at least one homeless individual or formerly homeless individual will participate on the New Housing Ohio Board of Directors. To demonstrate compliance, attendance notes taken at each Board or Board Committee meeting will be used to track and document participation of these individuals. The homeless or formerly homeless individual identified to participate with the New Housing Ohio Board will be considered active if no more than four consecutive months of Board or Board Committee meetings have not been missed. Once a participant is considered inactive, the position will be filled with another homeless or formerly homeless individual within two months. If a replacement cannot be found after this two-month period, New Housing Ohio will request a waiver from the Department of Housing and Urban Development until a suitable replacement can be found. To ensure that this policy is carried out with constancy, a process to identify homeless individuals or formerly homeless individuals willing and able to serve on the New Housing Ohio Board will be implemented. Responsibility of tracking compliance will reside with the Board Secretary.

Prioritization

Scorecard Question:

Does the recipient have a written policy	For RRH (Page 27 of Ohio BoSCoC	Y	2
outlining a method for prioritizing assistance	Program Standards) & for PSH		
for those persons with greater levels of need	(Page 20 of Ohio BoSCoC Program		
and/or greater barriers. If PSH, do the P & P	Standards)		
include the Chronic Homeless Order of			
Prioritization			

What we're looking for:

- PSH the Chronic Homeless Order of Priority from BoSCoC Program Standards
- RRH & TH details regarding how prioritization decisions are made

PSH Example:

Chronically Homeless Order of Priority for PSH Projects

- 1) First Priority Chronically Homeless Individuals and Families with the Longest History of Homelessness AND the Most Severe Service Needs
 - a) Have been homeless for at least 12 months either continuously or on at least four separate occasions in the last three years, where the cumulative total length of the four occasions equals at least 12 months; AND
 - b) Have been identified as having the most severe service needs as evidenced by a history of high utilization of crisis services, including but not limited to, emergency rooms, jails, and psychiatric facilities, or significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing
 - i. PSH projects should use their regional coordinated entry assessment tools to determine the service needs of potential chronically homeless participants. Results of assessment may be combined with knowledge of crisis services utilization to determine prioritization based on service needs.
 - ii. And meet all other elements of the chronically homeless definition
- 2) Second Priority Chronically Homeless Individuals and Families with the Longest History of Homelessness
 - a) Have been homeless for at least 12 months either continuously or on at least four separate occasions in
 - the last three years, where the cumulative total length of the four occasions equals at least 12 months
 - i. And meet all other elements of the chronically homeless definition
- 3) Third Priority Chronically Homeless Individuals and Families with the Most Severe Service Needs
 - a) Have been identified as having the most severe service needs as described in paragraph (1b) above
 - i. And meet all other elements of the chronically homeless definition
- 4) Fourth Priority All Other Chronically Homeless Individuals and Families
 - a) Have been homeless for at least 12 months either continuously or on at least four separate occasions in the last three years, where the cumulative total length of the four occasions equals at least 12 months
 - i. And meet all other elements of the chronically homeless definition

PSH Example:

Non-Chronically Homeless Order of Priority

- 1) First Priority Homeless Individuals and Families with the Most Severe Service Needs
 - a) Have been identified as having the most severe service needs as described in paragraph 1b above.
 - i. And meet all other PSH eligibility criteria
- 2) Second Priority Homeless Individuals and Families with a Long Period of Continuous or Episodic Homelessness
 - a) Have been living in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 6 months or on at least three separate occasions in the last three years where the cumulative total was at least 6 months.
 - i. And meet all other PSH eligibility criteria
- 3) Third Priority Homeless Individuals and Families Coming from Places Not Meant for Human Habitation, Safe Havens, or Emergency Shelters
 - a) Have been living in a place not meant for human habitation, a safe haven, or an emergency shelter.
 - i. And meet all other PSH eligibility criteria
- 4) Fourth Priority Homeless Individuals and Families Coming from Transitional Housing
 - a) Coming from transitional housing (TH), where prior to residing in the TH they lived on the streets, an emergency shelter, or a safe haven. The priority also includes homeless individuals and families with a qualifying disability who were fleeing domestic violence or sexual assault and are living in TH, even if they did not live on the streets or in a shelter prior to entry into the TH project.
 - i. And meet all other PSH eligibility criteria

RRH Prioritization

RRH staff must prioritize assistance for individuals and families with the greatest needs, who cannot otherwise be served by a more intensive resource. Level of need is primarily determined by the results of the VI-SPDAT that is completed while individuals and families are in emergency shelter (or in an unsheltered location). In cases where the VI-SPDAT score indicates that an individual or family has a level of need that would likely best be addressed by Transitional Housing (TH) or Permanent Supportive Housing (PSH), but that resource is not immediately available, RRH providers should strive to serve these individuals or families with RRH assistance. Returning RRH participants may be prioritized for assistance where possible, assuming they continue to be eligible (including that they are currently literally homeless). Eligible homeless Veterans who are not eligible for VA funded programs, such as the Supportive Services for Veterans and their Families (SSVF) program, are prioritized for RRH assistance if their VI-SPDAT score and housing barrier support the prioritization.

Prior to taking anyone into the program, RRH staff may run an RRH Prioritization report if community needs are exceeding fund availability. This report is available through the RME reporting tool and will be provided at prioritization meetings by the RRH Manager or Director. Staff should take individuals into the program based upon the following list of priorities:

- Chronically homeless individuals/families with the most severe service needs and/or VI-SPDAT score if there is no PSH available.
- Chronically homeless individuals and families with the longest history of homelessness if there is no PSH available.
- 3. All other chronically homeless individuals and families if there is no PSH available.
- Homeless individuals and families with a disability with the most severe service needs and/or VI-SPDAT score.
- Homeless individuals and families with disabilities with long periods of continuous or episodic homelessness.
- Homeless individuals scoring 4-7 on the VI-SPDAT, serving those with the highest scores first.
- 7. Households with the longest current episode of homelessness
- 8. Households with the longest cumulative history of homelessness

TH Example:

Transitional Housing Prioritization

TH projects should be targeted to persons who have been assessed as not being able to quickly resolve their homelessness on their own, but who do not have needs great enough to necessitate placement into Permanent Supportive Housing. Appropriate target populations may include those with service needs that have been identified as being more long-term in duration, but not indefinite. Appropriate target populations may include domestic violence victims, individuals with histories of substance abuse disorders or those in early recovery, or transition age youth. Within identified target populations, TH projects should further screen homeless applicants to identify people with greater vulnerabilities and prioritize those applicants for assistance.



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3. Resources

Resources

- CoC Program Interim Rule
 - <u>https://www.govinfo.gov/content/pkg/CFR-2017-title24-vol3/xml/CFR-2017-title24-vol3-part578.xml#seqnum578.1</u>
- HUD Virtual Binders
 - <u>https://www.hudexchange.info/homelessness-assistance/coc-esg-virtual-binders/</u>
- CSH Sample PSH P&P (specifically for those with Leasing Budget)
 - <u>http://www.csh.org/wp-content/uploads/2018/07/62-PSH-Policies-and-Procedures-Example.pdf</u>
- Ohio BoSCoC Program Standards
 - <u>https://cohhio.org/wp-content/uploads/2020/09/Ohio-BOSCOC-</u> <u>Program-Standards-revised-6.1.21.pdf</u>

Contact Information



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Questions