

## 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 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.

- Using the CoC Application Detailed Instructions while 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 this keep in mind:

- This year, CoCs will see that a few responses have been imported from the FY 2015 CoC Application.

- For some of the questions HUD has provided documents to assist Collaborative Applicants in completing responses.

- For other questions, the Collaborative Applicant must be aware of responses provided by project applications in their Project Applications.

- Some questions require the Collaborative Applicant to 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 CoC Application Detailed Instructions click [here](#).

## 1A. Continuum of Care (CoC) Identification

### **Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1A-1. CoC Name and Number:** MD-601 - Montgomery County CoC

**1A-2. Collaborative Applicant Name:** Montgomery County Maryland

**1A-3. CoC Designation:** CA

**1A-4. HMIS Lead:** Montgomery County Maryland

## 1B. Continuum of Care (CoC) Engagement

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange 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	Yes
Local Jail(s)	Yes	Yes	Yes
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	Not Applicable	No	Not Applicable
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes	Yes
CoC Funded Victim Service Providers	Not Applicable	No	Not Applicable
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	No
Youth advocates	Yes	Yes	No
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
Veterans Organizations	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 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.**

CoC committees & workgroups include input from a full range of stakeholders. New members can join at any time with formal outreach conducted annually. Committee membership is solicited on a volunteer basis with targeted outreach for specific expertise. Examples of participation include:

Homeless Outreach providers—PEP, Interfaith Works, City of Gaithersburg & Bethesda Cares— participated in a workgroup to develop a strategy to collect information about anonymous homeless persons to enable data entry into HMIS and inclusion on the by-name list. This effort led to the creation of a written policy on “un-named clients.”

Public Housing Authority - Housing Opportunities Commission (HOC), the local PHA, is a member of the governing board, strategic planning, operations, & resource development committees. HOC’s expertise as an affordable housing & PSH provider is being used to explore affordable housing models, optimize the use of rental subsidies & preserve existing housing.

**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 between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
National Center for Children and Families	No	Yes	Yes

**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 between July 1, 2015 and June 30, 2016	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 30, 2016.
Montgomery County Dept of Health and Human Services	Yes	Yes
Family Services, Inc.	No	No

**1B-2. 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 new projects in 2016. (limit 1000 characters)**

The CoC funding opportunity was widely advertised via email, at CoC meetings and posted on the CoC ICH website. The announcement highlighted funding priorities, application requirements, and timelines. All entities were eligible to apply, even those who had not previously received CoC funds. An information session that was open to all interested parties was held on July 14, 2016 to review the process, scoring criteria, priority populations, & answer questions. Interested entities submitted a letter of intent and proposals were due 30 days prior to the CoC application deadline.

The Allocation Committee used a standard scoring tool to review & rank new projects based on the following criteria: Priority to CoC, organizational capacity, quality of project description, use of Housing First model, and budget reasonableness. New projects that met HUD threshold criteria, were high priority to the CoC and of high quality were included in the project listing, as funding allowed.

**1B-3. How often does the CoC invite new members to join the CoC through a publicly available invitation?** Annually

## 1C. Continuum of Care (CoC) Coordination

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1C-1. Does the CoC coordinate with 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)	Not Applicable
Head Start Program	Yes
Housing and service programs funded through Federal, State and local government resources.	Yes

**1C-2. The McKinney-Vento Act, requires CoC's 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 the CoC to 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)(2) requires the State and local Con Plan jurisdiction(s) consult with the CoC. The following chart asks for the 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
Number of Con Plan jurisdictions with whom the CoC geography overlaps	2
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	2
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	2
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
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	2

**1C-2a. Based on the responses provided 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 and type of interactions between the CoC and the Consolidated Plan jurisdiction(s). (limit 1000 characters)**

The CoC collaborates with both Con Plan jurisdictions – Montgomery & Gaithersburg. Montgomery County Dept. of Housing & Community Affairs (DHCA) develops the Con Plan. Dept of Health & Human Services (DHHS), the CoC Collaborative Applicant, provides data, identifies needs & helps draft parts of the plan. Phone meetings, emails and writing total 20 hrs per year. In addition, DHCA sits on the following CoC committees: Governing Board – meet 2 hrs/quarter, Strategic Plan – meet 1.5 hr/month; Operations – meet 2hrs/month; Resource Development – meet 1hr/quarter; and Allocation - meet 2/yr.

Gaithersburg partners with the CoC on its Con Plan. DHHS provides PIT & other data needed for the Con Plan. Phone/email contact totaling 4 hours annually supports Con Plan development. Gaithersburg sits on the CoC Governing Board - meet 2 hrs/quarter; Operations Committee – meet 2hrs/month; and Education/Outreach Committee – meet 1.5hrs/month. Frequent email and phone contact occurs weekly.

**1C-2b. Based on the response 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)**

Montgomery County (MoCo) - MoCo is the primary source of ESG funds in the MD-601 geographic area. The Dept of Health & Human Services (MCDHHS) is both the CoC Collaborative Applicant & the administering entity for ESG funds, which assures coordination and data sharing. The CoC governing board identifies gaps/needs based on the PIT, HIC and local data and recommends how to best use ESG funds. Allocation of ESG funds is informed by CoC recommendations. This is an effective mechanism for assuring ESG activities are integrated into the CoC.

Maryland – MCDHHS is a member of the Maryland Interagency Council on Homelessness (ICH), which meets quarterly. The ICH identifies gaps/needs & recommends how Maryland ESG funds should be allocated. MCDHHS provides PIT data and provides feedback on priorities for funding.

The MD-601 Performance Review committee develops performance measures and evaluates outcomes of all programs receiving ESG funds in the jurisdiction annually.

**1C-3. Describe 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)**

Victims of domestic violence (DV) are eligible for homeless services in the CoC. DV is assessed at entry using a common assessment tool and, if identified, providers working with a client are notified to assure safety. If needed, the CoC shelter will establish an alias for increased security. Clients are referred to the Family Justice Center, a one stop DV center, for help. When referred to housing via the coordinated entry process, households can choose location to assure safety. Funds are available for relocation out of area.

A 24/hr Crisis Center assists persons fleeing DV to develop a safety plan and refers to DV shelter/other victim services (VS). An alert is sent to the CoC Homeless Administrator upon entry to DV shelter. VS providers participate in the CoC housing prioritization committee & refer households to housing via the coordinated entry system. VS providers do not enter information in HMIS but the CoC uses Excel to track & ensure coordination.

**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 July 1, 2015 and June 30, 2016 and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
Housing Opportunities Commission	5.00%	Yes-HCV
Rockville Housing Enterprises	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)**

Montgomery County CoC has a strong history of developing housing options for

persons experiencing homelessness including locally and privately funded permanent supportive housing, other permanent housing with supports and rapid re-housing options. Within the CoC, two-thirds (66%) of all units and 73% of all beds are supported through sources other than CoC, ESG, HCV or public housing. According to the 2016 Housing Inventory Count, the CoC currently has 809 units (1,575 beds) of permanent housing targeted to families and individuals experiencing homelessness funded through these other sources. This includes 44 rapid re-housing units (114 beds), 36 other permanent housing units (91 beds), 98 VASH units (136 beds), 1 SSVF unit (3 beds) and 630 permanent supportive housing units (1,231 beds).

Referrals to these programs are made via the CoC's coordinated entry system and are based on priorities delineated in the CoC's written standards.

**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.**

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 1000 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

## 1D. Continuum of Care (CoC) Discharge Planning

### Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1D-1. Select the system(s) 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:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

**1D-2. Select the system(s) of care within the CoC's geographic area with which the CoC actively coordinates with to ensure 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:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

**1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) that were not selected and explain how the CoC plans to coordinate with the institution(s) to ensure persons**

**discharged are not discharged into homelessness.  
(limit 1000 characters)**

N/A

## 1E. Centralized or Coordinated Assessment (Coordinated Entry)

### Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**The CoC Program Interim Rule requires CoCs to establish a Centralized or Coordinated Assessment System which HUD refers to as the Coordinated Entry Process. Based on the recent Coordinated Entry Policy Brief, HUD's primary goals for the coordinated entry process are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present for assistance.**

**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 coordinated entry system serves the entire CoC area & is accessible 24/7. Three regional offices provide centralized access & four outreach providers work to engage unsheltered persons. The system is advertised via the County's 311-phone line, DHHS website, community events, & via a "Homeless Services Guide" available at public libraries, recreational centers, & public schools. All providers are able to serve persons with limited English proficiency & maintain diverse staff.

The VI-SPDAT for adults & the Housing Options Targeting Tool for families are used to screen, assess & identify housing needs. HMIS generates a by-name report with each household's vulnerability score. Housing Prioritization committees meets bi-weekly to match households to vacancies & meets weekly to discuss system concerns. Case conferencing is also used with the by-name list to ensure the community is tracking, engaging, and connecting all households experiencing homelessness to potential housing options.

**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 there**

**are other organizations or persons who participate but are not on this list, enter the information in the blank text box, click "Save" at the bottom of the screen, and then select the applicable checkboxes.**

Organization/Person Categories	Participate s in Ongoing Planning and Evaluation	Makes Referrals to the Coordinate d Entry Process	Receives Referrals from the Coordinate d Entry Process	Operates Access Point for Coordinate d Entry Process	Participate s in Case Conferenci ng	Does not Participate	Does not Exist
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Jail(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EMT/Crisis Response Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable Housing Developer(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Housing Authorities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administrators/Homeless Liaisons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Victim Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street Outreach Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeless or Formerly Homeless Persons	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

### Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

### 1F-1. For all renewal project applications submitted in the FY 2016 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 2016 CoC Program Competition?	14
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	1
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 2016 CoC Program Competition?	13
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%

### 1F-2 - In the sections below, check the appropriate box(es) for each selection to indicate how project applications were reviewed and ranked for the FY 2016 CoC Program Competition. Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.

<b>Performance outcomes from APR reports/HMIS:</b>	
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>
<b>Monitoring criteria:</b>	
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>

Need for specialized population services:

Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input checked="" type="checkbox"/>
Families with Children	<input checked="" type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input type="checkbox"/>
None:	<input type="checkbox"/>

**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)**

The CoC considered participant severity of needs & vulnerabilities during the project prioritization process. Projects were reviewed using standardized criteria, which the allocation committee used to score projects. Projects that clearly described how they served participants with low/no income, criminal history, and significant health or behavioral health issues received higher points. Points also were awarded to those projects that did not require households to participate in services nor terminate project participants failing to make progress on goals. Projects clearly describing any special populations served, such as low/no income, chronic homelessness, domestic violence, significant physical/behavioral health issues, LGBTQ status, medical vulnerability, vulnerability to victimization, unaccompanied youth, families with children also received higher points. The Allocation Committee ranked and prioritized projects based on project applicant score and the system needs of the CoC.

**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. Evidence of the public posting must be attached. (limit 750 characters)**

The CoC Collaborative Applicant made the local review, ranking and selection criteria publically available through email and on the CoC’s website. On 8/3/16 the Ranking and Review process, New Project Ranking Tool and Renewal Ranking Tools were posted on the CoC website. In addition an email was sent including a link to the CoC website on 8/3/16 to the full CoC membership announcing that this information was available .

**1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts of the FY 2016 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).** 09/12/2016

**1F-5. Did the CoC use the reallocation process in the FY 2016 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 that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.)** 08/30/2016

**1F-6. In the Annual Renewal Demand (ARD) is the CoC's FY 2016 CoC's FY 2016 Priority Listing equal to or less than the ARD on the final HUD-approved FY2016 GIW?** Yes

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

## Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

DHHS, the Collaborative Applicant, monitors performance of CoC projects together with the Performance Review Committee (PRC). The PRC meets monthly to review CoC projects using measures approved by the CoC including bed utilization, participant eligibility, increasing housing stability, increasing income, access to benefits, length of time homeless, & destination at exit. The PRC uses an excel spreadsheet to review APR data, HMIS performance reports, & DHHS program monitor feedback. During annual site visits, DHHS uses a standard form to review case records & policy/procedures to document compliance. DHHS program monitors also review HMIS data to verify utilization & length of stay. Bi-annually, projects submit evidence of draw-down expenditures to DHHS. Annually, DHHS reviews APR, HMIS, PIT & HIC information to assess overall CoC performance. Project performance, bed utilization, fund draw down & participant eligibility are scored during the CoC Competition ranking & review process.

**1G-2. 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 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange 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/MOA? In all cases, the CoC's Governance Charter must be attached to receive credit, In addition, if applicable, any separate document, like an MOU/MOA, 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 attached MOU/MOA.** Governance Charter - CoC roles page 1-3;HMIS role page 9 and page 11-13

**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 Organization (CHOs)?** Yes

**2A-4. What is the name of the HMIS software** Service Point

**used by the CoC (e.g., ABC Software)?**

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

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

### Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

**\* 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	\$0
ESG	\$63,897
CDBG	\$0
HOME	\$0
HOPWA	\$0
<b>Federal - HUD - Total Amount</b>	<b>\$63,897</b>

### 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
<b>Other Federal - Total Amount</b>	<b>\$0</b>

### 2B-2.3 Funding Type: State and Local

Funding Source	Funding
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City	\$0
County	\$145,000
State	\$0
<b>State and Local - Total Amount</b>	<b>\$145,000</b>

**2B-2.4 Funding Type: Private**

Funding Source	Funding
Individual	\$0
Organization	\$0
<b>Private - Total Amount</b>	<b>\$0</b>

**2B-2.5 Funding Type: Other**

Funding Source	Funding
Participation Fees	\$0
<b>Other - Total Amount</b>	<b>\$0</b>

<b>2B-2.6 Total Budget for Operating Year</b>	<b>\$208,897</b>
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## 2C. Homeless Management Information System (HMIS) Bed Coverage

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy):** 05/02/2016

**2C-2. Per the 2016 Housing Inventory Count (HIC) Indicate the number of beds in the 2016 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells in that project type.**

Project Type	Total Beds in 2016 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	626	54	572	100.00%
Safe Haven (SH) beds	40	0	40	100.00%
Transitional Housing (TH) beds	323	23	300	100.00%
Rapid Re-Housing (RRH) beds	182	0	179	98.35%
Permanent Supportive Housing (PSH) beds	1,878	0	1,878	100.00%
Other Permanent Housing (OPH) beds	91	0	91	100.00%

**2C-2a. If the bed coverage rate for any project type is below 85 percent, describe how the CoC plans to increase the bed coverage rate for each of these project types in the next 12 months. (limit 1000 characters)**

Bed coverage rate has consistently remained above 85 percent.

**2C-3. If any of the project types listed in question 2C-2 above have a coverage rate below 85 percent, and some or all of these rates can be attributed to beds covered by one of the following program types, please indicate that here by selecting all that apply from the list below.**

VA Grant per diem (VA GPD):	<input type="checkbox"/>
VASH:	<input type="checkbox"/>

Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
Voucher beds (non-permanent housing):	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input checked="" type="checkbox"/>

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

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

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange 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" within the last 10 days of January 2016.**

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	0%	0%
3.2 Social Security Number	0%	2%
3.3 Date of birth	1%	0%
3.4 Race	2%	0%
3.5 Ethnicity	1%	1%
3.6 Gender	1%	0%
3.7 Veteran status	0%	0%
3.8 Disabling condition	0%	1%
3.9 Residence prior to project entry	0%	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	11%	0%
3.16 Client Location	0%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	4%	0%

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

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

None	<input type="checkbox"/>
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**2D-3. If you submitted the 2016 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?**

12

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

Monthly

**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):	<input type="checkbox"/>
VA Grant and Per Diem (GPD):	<input type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input type="checkbox"/>
Projects for Assistance in Transition from Homelessness (PATH):	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

**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)**

No new partners are expected to begin entering data in the next 12 months.

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

### Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**The data collected during the PIT count is vital for both CoC's and HUD. HUD needs accurate data to understand the context 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. Accurate, high quality data is vital to inform Congress' funding decisions.**

- 2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2016 sheltered PIT count?** Yes
- 2E-2. Indicate the date of the most recent sheltered PIT count: (mm/dd/yyyy)** 01/28/2016
- 2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2016, 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)** 05/02/2016

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

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2016 PIT count:**

Complete Census Count:	<input checked="" type="checkbox"/>
Random sample and extrapolation:	<input type="checkbox"/>
Non-random sample and extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

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

HMIS:	<input checked="" type="checkbox"/>
HMIS plus extrapolation:	<input type="checkbox"/>
Interview of sheltered persons:	<input checked="" type="checkbox"/>
Sample of PIT interviews plus extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

**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 PIT count methodology was the same as used during previous counts. The HMIS Lead reviewed HUD guidance for universal data and subpopulation information to be collected. In collaboration with nearby

jurisdictions, a common PIT survey and excel template was developed for data collection. A broad alert was sent to all providers announcing the PIT date, training dates, and deadlines for providers to enter and verify information in HMIS.

Information was collected in two ways. First, emergency shelter staff gathered information from HMIS and interviewed clients to complete the survey. Second, transitional and safe havens staff completed the survey using HMIS data and case record information. All surveys were submitted to the HMIS Lead for tabulation and de-duplication. This methodology ensures complete coverage of all sheltered homeless persons and produces an accurate count. Additionally, the common data collection template allows for regional analysis of data.

**2F-4. Describe any change in methodology from your sheltered PIT count in 2015 to 2016, 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 or change in partners participating in the PIT count). (limit 1000 characters)**

There were no significant changes in methodology from the 2015 to the 2016 PIT count.

**2F-5. Did your CoC change its provider coverage in the 2016 sheltered count? Yes**

**2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2016 sheltered count. (limit 750 characters)**

Two new transitional programs that began operations in 2016 were included in the PIT. Lighthouse transitional housing provides shared living for young adult-headed households between the ages of 18 to 24. Additionally, DHHS renovated a single dwelling unit to house a large household that emigrated from another country and required additional supports to stabilize. Staff participating in these programs were trained on the PIT count protocol and received written instructions regarding the universal data and subpopulations information to be collected.

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

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

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

Training:	<input checked="" type="checkbox"/>
Follow-up:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input type="checkbox"/>
	<input type="checkbox"/>

**2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2015 to 2016 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 methods). (limit 1000 characters)**

Not Applicable

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

### Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**HUD requires CoCs to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, HUD also strongly encourages CoCs to conduct the unsheltered PIT count annually at the same time that they conduct annual sheltered PIT counts. HUD required CoCs to conduct the last biennial PIT count during the last 10 days 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):** 01/28/2016

**2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2016, or most recent count, 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):** 05/02/2016

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

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2I-1. Indicate the methods used to count unsheltered homeless persons during the 2016 or most recent PIT count:**

Night of the count - complete census:	<input checked="" type="checkbox"/>
Night of the count - known locations:	<input checked="" type="checkbox"/>
Night of the count - random sample:	<input type="checkbox"/>
Service-based count:	<input checked="" type="checkbox"/>
HMIS:	<input type="checkbox"/>
	<input type="checkbox"/>

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

In collaboration with outreach providers & local police, the HMIS Lead identified encampments, 24-hr establishments, storage units and parking garages throughout the CoC. Flyers were posted at day programs, soup kitchens, libraries, and distributed to unsheltered persons with the PIT date & purpose. A standard survey was developed in collaboration with nearby jurisdictions in compliance with HUD requirements. In person training & written instructions were provided to all outreach workers and volunteers. Survey teams were assigned specific geographic areas and each team included at least one bilingual member. Interview responses were entered into an excel spreadsheet and sent to the HMIS Lead for de-duplication & tabulation. Due to the CoC geographic area experiencing a blizzard, a service-based count was added during the morning hours to ensure unsheltered person were not missed due to snow the night of the count. The survey included the question, "where did you sleep on \_\_\_\_".

**2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, 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 or change in partners participating in the count). (limit 1000 characters)**

The basic methodology from 2015 to 2016 remained the same; however a change was made to when the “night count” was performed. In previous years, the night count was performed during the early morning hours, specifically 5 a.m. – 9 a.m., and at day programs and soup kitchens. During the 2016 PIT count, in-person training was provided immediately prior to survey teams conducting the interviews. This change allowed the survey teams to conduct the count during the evening from 9 p.m. to 1 a.m. This change was made based on feedback from 24-hour establishments and police officers as to the best times to reach unsheltered persons. In addition, it was thought the revised time frame would be a less disruptive time to survey unsheltered persons as it was prior to them “bedding down” for the night. The service-based count remained during the day hours.

**2I-4. Has the CoC taken extra measures to identify unaccompanied homeless youth in the PIT count?** No

**2I-4a. If the response in 2I-4 was "no" describe any extra measures that are being taken to identify youth and what the CoC is doing for homeless youth. (limit 1000 characters)**

The CoC is working with youth serving entities within the CoC including the Dept. of Health & Human Services Street Outreach Network and Child Welfare Services as well as Montgomery County Public Schools to help identify unaccompanied youth and locations where young adults may gather. In addition the CoC participates on the MD Interagency Council on Homeless and as a member of the Youth Subcommittee to gain knowledge of other measures being used to serve this population. The CoC will be conducting a “Fall Blitz” in conjunction with the Zero:2016 Campaign to identify, engage, and count unsheltered persons that typically are able to locate temporary lodging during the winter PIT count.

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

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2016 unsheltered PIT count:**

Training:	<input checked="" type="checkbox"/>
"Blitz" count:	<input type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey questions:	<input checked="" type="checkbox"/>
Enumerator observation:	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

**2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016 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 in actual methodology (e.g. change in sampling or extrapolation method). (limit 1000 characters)**

Not Applicable

## 3A. Continuum of Care (CoC) System Performance

### Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program NOFA. Please submit technical questions to the HUD Exchange 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 2015 and 2016 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1,100	981	-119
Emergency Shelter Total	676	589	-87
Safe Haven Total	36	35	-1
Transitional Housing Total	285	261	-24
Total Sheltered Count	997	885	-112
Total Unsheltered Count	103	96	-7

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

Using HMIS data, enter the number of homeless persons who were served in a sheltered environment between October 1, 2014 and September 30, 2015 for each category provided.

	Between October 1, 2014 and September 30, 2015
Universe: Unduplicated Total sheltered homeless persons	2,798
Emergency Shelter Total	2,477
Safe Haven Total	79
Transitional Housing Total	418

### 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 of becoming homeless.

**(limit 1000 characters)**

Risk factors are gathered from a variety of sources. Precipitating factors are entered into HMIS for persons experiencing homelessness, including those entering for the first time. Prevention providers including MCDHHS & the Emergency Assistance Coalition (EAC) provide feedback to the CoC Operations Committee about current issues.

As part of the CoC coordinated entry system, MCDHHS coordinates a network of assistance including emergency funds & case management to help households retain/obtain housing to prevent homelessness. Households with repeated housing instability receive ongoing case management to address barriers. Other diversion efforts include mediating family disputes, one-time grants to offset costs to family/friends with whom they can stay, & linkages to mainstream benefits, employment & behavioral health/health resources to reduce risk.

The CoC partners with the MCDHHS, public schools, local hospitals, and the EAC to identify those at-risk and prevent homelessness.

**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)**

To reduce length of time homeless (LOT), the CoC prioritizes persons who are chronically homeless, have the highest service needs & longest LOT for housing per CoC written standards. HMIS is used to identify persons with the longest LOT and then refer to housing. Additional strategies to reduce LOT include implementation of an integrated team process to help households with multiple needs address barriers; cultivation of flexible landlords willing to accept those with credit/criminal history; financial help to obtain housing; increased RRH & PSH beds & expanded housing locator services.

HMIS is also used to monitor LOT for the entire CoC including CoC & ESG programs. The average LOT decreased 2 days from 89 days in 2015 to 87 days 2016 for those in ES & SH and the median LOT decreased by 10 days from 65 days to 55 days. The Performance Review Committee monitors LOT to identify trends and the Operations Committee reviews LOT to identify and address system issues impacting on LOT.

**\* 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:**  
**Fill in the chart to indicate the extent to which projects exit program participants into permanent housing (subsidized or non-subsidized) or the retention of program participants in CoC Program-funded permanent supportive housing.**

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	107
Of the persons in the Universe above, how many of those exited to permanent destinations?	82
<b>% Successful Exits</b>	<b>76.64%</b>

**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, 2014 and September 31, 2015.**

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	612
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?	582
<b>% Successful Retentions/Exits</b>	<b>95.10%</b>

**3A-5. Performance Measure: Returns to Homelessness: Describe the CoCs efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe 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)**

Returns are tracked by client & by program. At the client level, the CoC assessment tool documents housing history & identifies those with prior spells. The CoC's open HMIS is also used to identify persons with previous spells. The Performance Review Committee uses HMIS to monitor returns at the system/program level. In FY15, 14% of persons who had exited homelessness returned within 2 years. Those exiting SO had the highest return rate (34%) & those exiting PH had the lowest rate (2%).

Strategies to reduce returns include: Case management to build independent living skills, increase income & access to services that improve stability; Short-term case management & financial assistance for those at imminent risk to prevent a return; Linkage to CoC housing, subsidized housing or family/friends with whom persons can live for those who need support to maintain housing. Use of intensive team model for persons with multiple needs & significant housing instability to access needed supports.

**3A-6. Performance Measure: Job and Income Growth. Performance Measure: Job and Income Growth. Describe the CoC's specific strategies to assist CoC Program-funded projects to increase program participants' cash income from employment and non-employment non-cash sources. (limit 1000 characters)**

CoC providers use a common assessment tool to screen persons for needs such as TANF, SNAP, Medical assistance, TDAP and employment/vocational services to maximize income and benefits. CoC project case managers are trained to assist with benefit applications & help obtain needed documentation. Outreach, Safe Haven and emergency shelter staff are SOAR trained. CoC programs link participants to Career Catchers, Catholic Charities JOBS, IFW, supportive employment, and other CoC vocational programs.

The CoC Adult & Family Provider teams, which meet bi-monthly, provide a forum to train providers and share information about resources. In addition, MCDHHS convened a meeting to link providers to WorkSource Montgomery, the new WOIA entity. All CoC-funded projects increased participant income & access to benefits over the past year. Among all projects, 60% of participants increased cash income from all sources and 89% of participants accessed mainstream benefits.

**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)**

The CoC works with mainstream employment groups such as WorkSource Montgomery, Cornerstone Montgomery, DORS, & ResCare to help homeless persons increase income. WorkSource Montgomery operates the American Jobs Centers which provide help with job search, resume writing, referrals to training programs & work readiness training. In addition, WorkSource Montgomery provides specialized help to youth & persons with criminal history to obtain employment. Cornerstone Montgomery & DORS provide assessment, work readiness training, supportive employment, & placement services to persons with disabilities. ResCare, the area's Welfare to Work agency, provides job readiness, workforce experience, employment coaching, & job search assistance to families receiving TANF benefits.

All CoC-funded PH, SH, & TH projects (100%) have a relationship with at least one of the providers described above. Individuals & families in CoC projects are connected to one of these providers based on their unique needs.

**3A-7. 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)**

Four outreach providers work throughout the CoC to engage unsheltered

persons and connect them to services. The CoC's standard outreach procedures focus on engaging individuals and families to refer, link, and provide a "warm" transfer to services and housing providers. The CoC has developed an outreach protocol between local police & outreach providers to promote collaboration. More than 115 "hot spots" identified in the CoC including encampments in the woods, storage bins and 24hr establishments are targeted for outreach.

Outreach providers participate in the CoC's coordinated entry system, input data about unsheltered persons into HMIS and refer persons to shelter/housing in accordance with the CoC's written standards. Outreach providers are members of the CoC's Operations & Housing Prioritization Committees. These serve as a forums for providers to discuss outreach efforts, share information, promote coordination, & assure that unsheltered persons are connected to housing.

**3A-7a. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. disasters)?** No

**3A-7b. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. deserts, wilderness, etc.)?  
(limit 1000 characters)**

N/A

**3A-8. Enter the date the CoC submitted the system performance measure data into HDX. The System Performance Report generated by HDX must be attached.  
(mm/dd/yyyy)** 08/10/2016

**3A-8a. If the CoC was unable to submit their System Performance Measures data to HUD via the HDX by the deadline, explain why and describe what specific steps they are taking to ensure they meet the next HDX submission deadline for System Performance Measures data.  
(limit 1500 characters)**

N/A

## 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 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**To end chronic homelessness by 2017, HUD encourages three areas of focus through the implementation of Notice CPD 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.**

1. Targeting persons with the highest needs and longest histories of homelessness for existing and new permanent supportive housing;
2. Prioritizing chronically homeless individuals, youth and families who have the longest histories of homelessness; and
3. The highest needs for new and turnover units.

**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 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).**

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	162	145	-17
Sheltered Count of chronically homeless persons	113	101	-12
Unsheltered Count of chronically homeless persons	49	44	-5

**3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, 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 2016 compared to 2015.  
 (limit 1000 characters)**

The total number of persons experiencing chronic homelessness decreased 10% from 162 in 2015 to 145 in 2016, a continuation of a three year trend. There was a 10% decrease in the number of unsheltered persons and an 11% decrease in the number of sheltered persons experiencing chronic homelessness. These decreases can be directly attributed to the CoC's implementation of written standards to prioritize persons experiencing chronic homelessness for housing and the commitment of CoC programs to prioritize vacancies due to turnover in permanent supportive housing for those experiencing chronic homelessness.

There were no significant changes to the PIT methodology during the 2016 count. However, one adjustment made was a change in the time that outreach surveys were collected from early morning (5am-9am) to the evening (9pm-1am) to better identify unsheltered persons.

**3B-1.2. 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 2016 Housing Inventory Count, as compared to those identified on the 2015 Housing Inventory Count.**

	2015	2016	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	210	220	10

**3B-1.2a. Explain the reason(s) for any increase, or no change in the total number of PSH beds (CoC program funded or non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count compared to those identified on the 2015 Housing Inventory Count. (limit 1000 characters)**

The total number of PSH beds dedicated for use by chronically homeless persons increased by 10 beds from 210 on the 2015 Housing Inventory Count to 220 on the 2016 Housing Inventory Count. This increase is due to the commitment of non-CoC funded projects to dedicate beds that become available due to turnover to persons experiencing chronic homelessness. In 2016 the following programs creating dedicated turnover beds: Interfaith Faith Homes (2 beds), Cordell (2 beds), Partnership for Permanent Housing I (1 bed) and the Housing Initiative Program (3 beds). In addition, two new beds were created in the VASH program.

**3B-1.3. Did the CoC adopt the Orders of Priority into their standards for 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-1.3a. If “Yes” was selected for question 3B-1.3, attach a copy of the CoC’s written standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Orders of Priority are found.** Page 7-10

**3B-1.4. Is the CoC on track to meet the goal of ending chronic homelessness by 2017?** Yes

This question will not be scored.

**3B-1.4a. If the response to question 3B-1.4 was “Yes” what are the strategies that have been implemented by the CoC to maximize current resources to meet this goal? If “No” was selected, what resources or technical assistance will be implemented by the CoC to reach to goal of ending chronically homelessness by 2017? (limit 1000 characters)**

Montgomery County is committed to ensuring that all County residents who are chronically homeless are living in permanent housing by December 31, 2017. The CoC has developed a coordinated entry system & written standards for access to housing resources. The VI-SPDAT for adults & the Housing Options Targeting Tool for families are used at all access points to screen, assess & identify housing needs. A report has been built in HMIS to prioritize individuals with the most severe needs. The CoC prioritizes chronically homeless over all other homeless individuals and families for permanent housing. All CoC providers are prioritizing turnover beds for chronically homeless persons. Local funds are being utilized to create an additional 21 units of PSH housing.

During the 2016 PIT, 151 chronically homeless persons were identified. In order to meet the goal of ending chronic homelessness additional funding is needed to continue to expand the supply of housing for this population.

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

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

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**HUD will evaluate CoC's based on the extent to which they are making progress to achieve the goal of ending homelessness among households with children by 2020.**

**3B-2.1. What factors will the CoC use to prioritize households with children during the FY2016 Operating year? (Check all that apply).**

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

**3B-2.2. Describe the CoC's strategies including concrete steps to rapidly rehouse every household with children within 30 days of those families becoming homeless. (limit 1000 characters)**

The CoC has streamlined its coordinated entry system to more quickly prioritize families for housing & better track openings in housing programs. In addition, families assessed with multiple needs & high barriers are referred to intensive teaming to coordinate planning & access needed supports. All families receive case management to link them to benefits, employment & housing resources. One-time financial assistance for security deposit, 1st month rent or relocation expenses is also used to assist families to exit homelessness. Housing locators work with families with barriers such as eviction, bad credit, etc. to identify housing.

The CoC plans to increase rapid rehousing options for families. In FY16, RRH units increased to total: 35 locally funded, 12 ESG funded, 7 CoC funded and 1 SSVF funded units. Additional support is being sought from the State of Maryland to support 4 ESG units for youth-headed families & via the 2016 HUD CoC Competition to support 14 units for families.

**3B-2.3. Compare the number of RRH units available to serve families from the 2015 and 2016 HIC.**

	2015	2016	Difference
RRH units available to serve families in the HIC:	28	55	27

**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, gender or disability when entering shelter or housing? (check all strategies that apply)**

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input checked="" type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

**3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).**

**PIT Count of Homelessness Among Households With Children**

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	159	109	-50
Sheltered Count of homeless households with children:	159	109	-50
Unsheltered Count of homeless households with children:	0	0	0

**3B-2.5a. Explain the reason(s) for any increase, or no change in the total number of homeless households with children in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)**

The number of sheltered homeless households with children decreased 31% from 159 families in 2015 to 109 families in 2016. As in previous years there were no unsheltered homeless households identified during the 2016 PIT count. The reduction in homeless households can be attributed to a focus on diversion efforts to prevent entry into homelessness including emergency financial assistance, landlord/tenant mediation and family conflict resolution; use of an intensive teaming model for households in motel more than 30 days to promote planning and access to resources; and an increase in rapid re-housing units for families.

**3B-2.6. From the list below select the strategies to the CoC uses to address the unique needs of unaccompanied homeless youth including youth under age 18, and youth 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.**

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input checked="" type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input checked="" type="checkbox"/>

Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input type="checkbox"/>
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input checked="" type="checkbox"/>
Community awareness training concerning youth trafficking:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

**3B-2.7. What factors will the CoC use to prioritize unaccompanied youth including youth under age 18, and youth ages 18-24 for housing and services during the FY 2016 operating year? (Check all that apply)**

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Length of time homeless:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Lack of access to family and community support networks:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

**3B-2.8. Using HMIS, compare all unaccompanied youth including youth under age 18, and youth ages 18-24 served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 (October 1, 2013-September 30, 2014) and FY 2015 (October 1, 2014 - September 30, 2015).**

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2015)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	141	59	-82

**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 2015 is lower than FY 2014 explain why. (limit 1000 characters)**

The number of youth in an unsheltered situation according to HMIS reporting decreased 58% from 141 in FY2014 to 59 in FY2015. This is primarily due to a CoC-wide effort to improve data quality and assure information in HMIS is consistent and accurate.

**3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2016 and CY 2017.**

	Calendar Year 2016	Calendar Year 2017	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$226,000.00	\$346,396.00	\$120,396.00
CoC Program funding for youth homelessness dedicated projects:	\$0.00	\$120,396.00	\$120,396.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$226,000.00	\$226,000.00	\$0.00

**3B-2.10. To what extent have youth services and educational representatives, and CoC representatives participated in each other's meetings between July 1, 2015 and June 30, 2016?**

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	6
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	4
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	26

**3B-2.10a. Based on the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local educational authorities and school districts. (limit 1000 characters)**

Montgomery County Public Schools (MCPS) is a member of the CoC Governing Board & the Homeless Liaison attends the monthly CoC Family Provider Team, which is forum for providers to discuss outreach efforts, share information & promote coordination.

MC Dept. of Health & Human Services (DHHS), on behalf of the CoC, has a Memorandum of Agreement with MCPS to provide services to homeless children, ensure access to education, develop a network of personnel to serve homeless children, & develop procedures to improve services. DHHS trains MCPS twice/year about resources for homeless families & how to refer for emergency shelter/assistance. DHHS Infant & Toddlers Program trains CoC programs annually on resources & how to refer.

DHHS works with MCPS programs including Linkages to Learning & Kennedy-Watkins Cluster project to engage homeless & at-risk families identified by the schools. MCDHHS is also a member of the K-W Cluster project operations committee.

**3B-2.11. How does the CoC make sure that homeless individuals and families who become homeless 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.  
(limit 2000 characters)**

CoC policy requires all homeless service providers, including those that are ESG & CoC funded, to ensure children are enrolled in school &/or are connected to early childhood education. At admission, educational needs are assessed & information is obtained from the home school. A brochure developed by Montgomery County Public Schools (MCPS) is provided to all homeless households & unaccompanied youth explaining their rights.

If not enrolled, staff assist parents/unaccompanied youth to enroll in school or early childhood education. Staff work with the MCPS Homeless Liaison to coordinate transportation to school so children/youth can continue without interruption.

MCDHHS, Collaborative Applicant, trains MCPS staff about CoC resources & how to refer families for shelter/assistance. The MCPS Liaison educates all homeless providers about the eligibility of youth & families for educational services. MCDHHS monitors programs & reviews case records to ensure educational needs are met.

**3B-2.12. Does the CoC or any HUD-funded projects within the CoC have any written agreements with a program that services infants, toddlers, and youth children, such as Head Start; Child Care and Development Fund; Healthy Start; Maternal, Infant, Early Childhood Home Visiting programs; Public Pre-K; and others?  
(limit 1000 characters)**

Montgomery County Dept. of Health & Human Services (DHHS), on behalf of the CoC, has a Memorandum of Agreement with MCPS including Special Education Services and Pre-K programs to provide services to homeless children and ensure enrollment in programs for which they are eligible.

## 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 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**Opening Doors outlines the goal of ending Veteran homelessness by the end of 2016. 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 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).**

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	24	17	-7
Sheltered count of homeless veterans:	20	12	-8
Unsheltered count of homeless veterans:	4	5	1

**3B-3.1a. Explain the reason(s) for any increase, or no change in the total number of homeless veterans in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)**

During the 2016 enumeration, 17 persons self-identified as Veterans, a 29% decrease over the 2015 count and a 51% decrease over the 2014 enumeration. Key strategies to reach this goal included collaboration with the U.S. Department of Veterans Affairs to identify veterans; prioritization of veterans for homeless housing opportunities; and an increase in the supply of housing options for homeless veterans through collaboration with Montgomery County, the Housing Opportunities Commission and the Veterans Administration. Montgomery County provided funding to create a permanent supportive housing program for 20 veteran households and a rapid rehousing program for 15 veteran households to support this effort.

**3B-3.2. Describe how the CoC identifies, assesses, and refers homeless veterans who are eligible for Veterean's Affairs services and housing to appropriate reources such as HUD-VASH and SSVF. (limit 1000 characters)**

Veteran status is collected for all persons experiencing homelessness as part of the CoC coordinated entry system. All outreach and homeless services providers utilize the VI-SPDAT and Homeless Assessment Tool to capture military service as part of the assessment process. This is entered into HMIS and a report is generated of all veterans within the CoC. The CoC Veterans Work Group, chaired by the CoC Coordinator and including the VA, regularly reviews this report and confirms eligibility for VA services.

Those determined eligible for VA resources including HUD-VASH and SSVF are referred to those before any referral to other CoC resources are considered. The CoC Coordinator monitors referrals to VA programs and if a person cannot access VASH or SSVF, whether because of eligibility criteria or lack of available funding, that person is then referred to local housing resources through the CoC coordinated entry system, which prioritizes veterans for CoC housing options.

**3B-3.3. 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 2016 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)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	56	17	-69.64%
Unsheltered Count of homeless veterans:	20	5	-75.00%

**3B-3.4. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2016.** Yes

This question will not be scored.

**3B-3.4a. 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 2016? (limit 1000 characters)**

Montgomery County achieved functional zero for Veterans experiencing homelessness as of the end of December 2015. The focus on ending Veteran homelessness in 2015 was an extension of a system-wide embrace of the

Housing First model as well as a multi-year push to prioritize Veterans for housing.

Successful strategies included identifying specific targets for both the number of placements needed as well as types of housing required, development of a comprehensive By-Name-List of all Veterans experiencing homelessness, and prioritization of veterans for available housing. Close collaboration with the Veterans Administration helped shorten the length of time for eligibility determination. Additionally, local commitment of funding to create additional housing options was critical to the CoC's success.

## 4A. Accessing Mainstream Benefits

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange 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 program changes that can affect homeless clients?** Yes

**4A-2. Based on the CoC's FY 2016 new and renewal project applications, what percentage of projects have demonstrated they are assisting project participants to obtain mainstream benefits? This 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 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	16
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 2a, 2b and 2c 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 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

**4A-3. List the organizations (public, private, non-profit and other) that you collaborate with to facilitate health insurance enrollment, (e.g., Medicaid, Medicare, Affordable Care Act options) for program participants. For each organization you partner with, detail the specific outcomes resulting from the partnership in the establishment of benefits. (limit 1000 characters)**

The CoC coordinates with a number of organizations to enroll persons in health insurance. MobileMed provides enrollment assistance & health services on-site at area shelters for 300 homeless adults per year. MCDHHS, the navigator entity, conducts enrollment at the CoC's annual Homeless Resource Day and trains CoC providers on the enrollment process. Health Care for the Homeless works with area hospitals to assure persons are enrolled prior to discharge from the hospital and provide assistance post-discharge to medically vulnerable persons that need continued assistance with insurance eligibility.

The CoC has seen a rise in homeless persons with health insurance. As a result, MCDHHS has redirected local resources previously used to provide primary care to uninsured homeless residents to support on-site dental care at shelters. Oral health is a critical need but is not a covered Medicaid.

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

Educational materials:	<input checked="" type="checkbox"/>
In-Person Trainings:	<input checked="" type="checkbox"/>
Transportation to medical appointments:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not Applicable or None:	<input type="checkbox"/>

## 4B. Additional Policies

**Instructions:**

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**4B-1. Based on the CoCs FY 2016 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?**

### FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	16
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 2016 competition:	16
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	100%

**4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2016 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?**

### FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	16
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	16
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 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:	<input checked="" type="checkbox"/>
--------------------------------	-------------------------------------

Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input checked="" type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

**4B-4. Compare the number of RRH units available to serve populations from the 2015 and 2016 HIC.**

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	31	71	40

**4B-5. Are any new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction?** No

**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)**

N/A

**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", to 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 the President Obama under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (Public Law 93-288) in the 12 months prior to the opening of the FY 2016 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 since the submission of the FY 2015 application? This response does not affect the scoring of this application.** No

**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:	<input type="checkbox"/>
CoC Systems Performance Measurement:	<input type="checkbox"/>
Coordinated Entry:	<input type="checkbox"/>
Data reporting and data analysis:	<input type="checkbox"/>
HMIS:	<input type="checkbox"/>

Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input checked="" type="checkbox"/>

**4B-9b. Indicate the type(s) of Technical Assistance that was provided, using the categories listed in 4B-9a, provide the month and year the CoC Program recipient or sub-recipient received the assistance and the value of the Technical Assistance to the CoC/recipient/sub recipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.**

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance

## 4C. Attachments

**Instructions:**

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	MD-601 Notificati...	08/31/2016
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	MD-601 Rating-Rev...	09/05/2016
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	MD-601 Rating and...	09/05/2016
05. CoCs Process for Reallocating	Yes	MD-601 Reallocati...	09/05/2016
06. CoC's Governance Charter	Yes	MD 601 Governance...	08/13/2016
07. HMIS Policy and Procedures Manual	Yes	MD-601 Policy-Pro...	09/08/2016
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	HOC Admin Plan - ...	08/09/2016
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
11. CoC Written Standards for Order of Priority	No	MD-601 Written St...	09/05/2016
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	MD-601 HDX-System...	08/13/2016
14. Other	No		
15. Other	No		

## **Attachment Details**

**Document Description:** MD-601 Notification of Ranking-Rejection

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** MD-601 Rating-Review Procedure - 2016

## **Attachment Details**

**Document Description:** MD-601 Rating and Review - Public Notice

## **Attachment Details**

**Document Description:** MD-601 Reallocation Process

## **Attachment Details**

**Document Description:** MD 601 Governance Charter

## **Attachment Details**

**Document Description:** MD-601 Policy-Procedures - 2016

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** HOC Admin Plan - Local Preference

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** MD-601 Written Standards

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** MD-601 HDX-System Performance Measures

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:**

## Submission Summary

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

Page	Last Updated
1A. Identification	08/13/2016
1B. CoC Engagement	09/12/2016
1C. Coordination	09/05/2016
FY2016 CoC Application	Page 61
	09/12/2016

<b>1D. CoC Discharge Planning</b>	08/13/2016
<b>1E. Coordinated Assessment</b>	09/09/2016
<b>1F. Project Review</b>	09/09/2016
<b>1G. Addressing Project Capacity</b>	09/09/2016
<b>2A. HMIS Implementation</b>	08/13/2016
<b>2B. HMIS Funding Sources</b>	08/28/2016
<b>2C. HMIS Beds</b>	09/05/2016
<b>2D. HMIS Data Quality</b>	09/05/2016
<b>2E. Sheltered PIT</b>	09/05/2016
<b>2F. Sheltered Data - Methods</b>	09/09/2016
<b>2G. Sheltered Data - Quality</b>	09/05/2016
<b>2H. Unsheltered PIT</b>	09/05/2016
<b>2I. Unsheltered Data - Methods</b>	09/09/2016
<b>2J. Unsheltered Data - Quality</b>	09/05/2016
<b>3A. System Performance</b>	09/12/2016
<b>3B. Objective 1</b>	09/12/2016
<b>3B. Objective 2</b>	09/09/2016
<b>3B. Objective 3</b>	09/09/2016
<b>4A. Benefits</b>	09/08/2016
<b>4B. Additional Policies</b>	09/02/2016
<b>4C. Attachments</b>	Please Complete
<b>Submission Summary</b>	No Input Required

# Project Ranking

Ball, Kim

Tue 8/30/2016 10:39 PM

To:House Divine Guidanc <donna.robinson@houseofdivineguidance.org>;

1 attachment (13 KB)

2016 CoC Funding Recommendations .pdf;

Evening Dr. Robinson,

In accordance with the FY2016 CoC Program Competition NOFA, the Collaborative Applicant will rank the approved new and renewal project applications in either Tier 1 or Tier 2 as described in Section II.B.16. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects, Tier 1 is equal to 93% of the CoC's Annual Renewal Demand (ARD) on the Final HUD Approved GIW. Tier 2 is the difference between Tier 1 and the maximum award available which is the CoC's ARD plus any amount available for the permanent housing bonus.

House of Divine Guidance Rapid Rehousing Lighthouse Bonus Project was reviewed and ranked but not selected to be submitted as part of the Collaborative Application for 2016 funding. Attached is the CoC Funding Recommendations that are also posted at <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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Montgomery County - Department of Health and Human ...

[www.montgomerycountymd.gov](http://www.montgomerycountymd.gov)

Interagency Commission on Homelessness - Continuum of Care 2016 Competition. The Continuum of Care (CoC) Competition is open! HUD has approximately \$1.9 billion ...

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Kim M. Ball  
Homeless Services Administrator  
1301 Piccard Drive, 2nd Floor  
Rockville, MD 20850  
240-777-4125

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# Project Ranking

Ball, Kim

Tue 8/30/2016 10:36 PM

To:Gandell, Miriam <mgandell@tdp-inc.org>;

1 attachment (13 KB)

2016 CoC Funding Recommendations .pdf;

Evening Miriam,

In accordance with the FY2016 CoC Program Competition NOFA, the Collaborative Applicant will rank the approved new and renewal project applications in either Tier 1 or Tier 2 as described in Section II.B.16. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects, Tier 1 is equal to 93% of the CoC's Annual Renewal Demand (ARD) on the Final HUD Approved GIW. Tier 2 is the difference between Tier 1 and the maximum award available which is the CoC's ARD plus any amount available for the permanent housing bonus.

The Dwelling Place Renewal Project ranked in Tier II.

Attached is the CoC Funding Recommendations that are also posted at

<http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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Montgomery County - Department of Health and Human ...

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# Project Ranking

Ball, Kim

Tue 8/30/2016 10:33 PM

To:sherylbc@aol.com <sherylbc@aol.com>; Ralph Belk <rbelk@nccf-cares.org>; Wellington, Janice <jwellington@nccf-cares.org>;

1 attachment (13 KB)

2016 CoC Funding Recommendations .pdf;

Evening all,

In accordance with the FY2016 CoC Program Competition NOFA, the Collaborative Applicant will rank the approved new and renewal project applications in either Tier 1 or Tier 2 as described in Section II.B.16. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects, Tier 1 is equal to 93% of the CoC's Annual Renewal Demand (ARD) on the Final HUD Approved GIW. Tier 2 is the difference between Tier 1 and the maximum award available which is the CoC's ARD plus any amount available for the permanent housing bonus.

The National Center for Children and Families Renewal Project ranked in Tier 1.

The National Center for Children and Families Bonus RRH Project was reviewed and ranked and selected to be included in the CoC Collaborative Application in Tier II. Attached is the CoC Funding Recommendations that are also posted at <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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Montgomery County - Department of Health and Human ...

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Rockville, MD 20850  
240-777-4125

## Project Ranking

Ball, Kim

Tue 8/30/2016 10:14 PM

To:Sinclair-Smith, Susie <Susie@mcch.net>; Schiller, Jennifer <jschiller@mcch.net>; Veronica Spake <vspake@mcch.net>;

1 attachment (13 KB)

2016 CoC Funding Recommendations .pdf;

Evening all,

In accordance with the FY2016 CoC Program Competition NOFA, the Collaborative Applicant will rank the approved new and renewal project applications in either Tier 1 or Tier 2 as described in Section II.B.16. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects, Tier 1 is equal to 93% of the CoC's Annual Renewal Demand (ARD) on the Final HUD Approved GIW. Tier 2 is the difference between Tier 1 and the maximum award available which is the CoC's ARD plus any amount available for the permanent housing bonus.

Montgomery County Coalition for the Homeless Renewal Projects ranked in Tier 1; however, part of Safe Havens funding falls into Tier 2 based on the funding requirements noted above.

Montgomery County Coalition for the Homeless Bonus Project Keys First II was reviewed and ranked but not selected to be submitted as part of the Collaborative Application for 2016 funding. Attached is the CoC Funding Recommendations that are also posted at <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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Montgomery County - Department of Health and Human ...

[www.montgomerycountymd.gov](http://www.montgomerycountymd.gov)

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Kim M. Ball

Homeless Services Administrator

1301 Piccard Drive, 2nd Floor

Rockville, MD 20850

240-777-4125

**Black, Sara A**

---

**From:** Ball, Kim  
**Sent:** Tuesday, August 30, 2016 10:52 PM  
**To:** Chesney, Amanda; Turner, John  
**Subject:** Project Ranking  
**Attachments:** 2016 CoC Funding Recommendations .pdf

Evening,

In accordance with the FY2016 CoC Program Competition NOFA, the Collaborative Applicant will rank the approved new and renewal project applications in either Tier 1 or Tier 2 as described in Section II.B.16. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects, Tier 1 is equal to 93% of the CoC's Annual Renewal Demand (ARD) on the Final HUD Approved GIW. Tier 2 is the difference between Tier 1 and the maximum award available which is the CoC's ARD plus any amount available for the permanent housing bonus.

The Catholic Charities Permanent Supportive Bonus Project application was not considered complete and therefore not eligible for review.

Attached is the CoC Funding Recommendations that are also posted at <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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[Montgomery County - Department of Health and Human ...](#)

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**Black, Sara A**

---

**From:** Ball, Kim  
**Sent:** Tuesday, August 30, 2016 10:21 PM  
**To:** Spencer, Eugene; Kramer, Cathy  
**Subject:** Project Ranking  
**Attachments:** 2016 CoC Funding Recommendations .pdf

Evening all,

In accordance with the FY2016 CoC Program Competition NOFA, the Collaborative Applicant will rank the approved new and renewal project applications in either Tier 1 or Tier 2 as described in Section II.B.16. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects, Tier 1 is equal to 93% of the CoC's Annual Renewal Demand (ARD) on the Final HUD Approved GIW. Tier 2 is the difference between Tier 1 and the maximum award available which is the CoC's ARD plus any amount available for the permanent housing bonus.

Housing Opportunities Commission Renewal Projects ranked in Tier 1.

Attached is the CoC Funding Recommendations that are also posted at <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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**Black, Sara A**

---

**From:** Ball, Kim  
**Sent:** Tuesday, August 30, 2016 10:52 PM  
**To:** Chesney, Amanda; Turner, John  
**Subject:** Project Ranking  
**Attachments:** 2016 CoC Funding Recommendations .pdf

Evening,

In accordance with the FY2016 CoC Program Competition NOFA, the Collaborative Applicant will rank the approved new and renewal project applications in either Tier 1 or Tier 2 as described in Section II.B.16. Although the available amount of funding is expected to be sufficient to fund anticipated eligible renewal projects, Tier 1 is equal to 93% of the CoC's Annual Renewal Demand (ARD) on the Final HUD Approved GIW. Tier 2 is the difference between Tier 1 and the maximum award available which is the CoC's ARD plus any amount available for the permanent housing bonus.

The Catholic Charities Permanent Supportive Bonus Project application was not considered complete and therefore not eligible for review.

Attached is the CoC Funding Recommendations that are also posted at <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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[Montgomery County - Department of Health and Human ...](#)

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### 2016 CoC Competition - Funding Recommendations

The CoC Allocation Committee met on August 29,2016 and made the following funding recommendations:

<b>Tier I Projects</b>		
<b>Project Name</b>	<b>Amount</b>	<b>Rank</b>
MCCH Home First 2	\$ 306,191	1
IW Interfaith Homes	\$ 318,183	2
NCCF Rapid Re-Housing Demonstration	\$ 198,406	3
MCCH Seneca Heights PLQ	\$ 381,526	4
MCCH Hope Housing	\$ 562,860	5
MCCH Keys First - Renewal	\$ 892,175	6
HOC McKinney III	\$ 81,048	7
MCCH Home First 1	\$ 153,624	8
MCCH Cordell Place	\$ 142,262	9
HOC McKinney XII	\$ 623,657	10
HOC McKinney X	\$ 3,257,980	11
MCCH Safe Haven *	\$ 842,321	12
<b>Tier II Projects</b>		
<b>Project Name</b>	<b>Amount</b>	<b>Rank</b>
NCCF Rapid Rehousing FY16 - New Bonus	\$ 407,905	13
IW Carroll House	\$ 120,396	14
TDP New Opportunities	\$ 157,481	15
IFW Rapid Rehousing - New Reallocation	\$ 120,000	16

\*Note: Funding for part of project falls into Tier II

## **Montgomery County Continuum of Care CoC Program - Ranking and Selection Process**

Each year the U.S. Department of Housing and Urban Development (HUD) allocates funding for homeless assistance programs through the Continuum of Care (CoC) competition process. In order to receive funding, each Continuum of Care must submit a consolidated application for funding that describes how local activities meet or exceed HUD requirements and are aligned with community needs. The CoC is required to rank in order of priority funding requests from all eligible providers. The Montgomery County Department of Health and Human Services (DHHS), acting as the Collaborative Applicant for the Montgomery County MD Continuum of Care, is responsible for coordinating this process and submitting a Consolidated Application on behalf of the Montgomery County CoC. Each year DHHS reviews HUD requirements and priorities for funding under the Continuum of Care Competition.

The CoC Allocation Committee is responsible for reviewing and ranking project applications to be included as part of the Consolidated Application. Members include a range of public and private stakeholders representing the CoC. Allocation Committee members cannot be an employee, board member or volunteer of a project applicant that is requesting new or renewal funding.

DHHS Special Needs Housing as the CoC Collaborative Applicant supports the committee but is not a voting member. The Collaborative Applicant identifies HUD Continuum of Care Competition requirements and priorities for funding, compiles materials for each renewal project, announces funding availability to the Continuum of Care for new projects, develops an evaluation tool used to rate projects, schedules Allocation Committee meetings to conduct the review process, and provides technical assistance to applicants. All providers wishing to receive Continuum of Care funding must submit a project application and all requested supplemental information by deadlines outlined by the Collaborative Applicant that include Annual Performance Reports (APRs), HUD monitoring reports and a summary of drawdown expenses.

Members of the Allocation Committee review information related to the needs of the CoC including the most recent housing inventory chart, Point-in-Time data, federal priorities, CoC strategic plan priorities and identified service gaps. Committee members will review renewal projects based on bed utilization, HUD and CoC performance measures, Continuum of Care priority needs, alignment with HUD priorities, and compliance with HUD funding requirements. New project applications will be reviewed for applicant experience, project quality, alignment of HUD priorities and priority to Continuum of Care needs. Each Project Application will be scored individually using a standardized ranking tool. Planning Projects are reviewed for submission but not ranked per HUD guidance.

Projects will be ranked by the Allocation committee by consensus based on CoC need and ranking tool scores. Projects will be organized to best meet the needs of the CoC and maximize overall funding. All applicants will be notified directly regarding the recommendations of the Allocation Committee.

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Refer Competition and Project Application Instructions on ICH website for detailed application instructions and information about specific criteria to be assessed.

**CoC 2016 Competition Project  
Renewal Score Sheet**

Organization \_\_\_\_\_ Project Name \_\_\_\_\_

<p>Type of Housing: Permanent – 5 pts _____ Transitional – 3 pts _____</p>	
<p><b>Project Scope – Up to 20 pts</b></p> <ul style="list-style-type: none"> <li>▪ Project narrative describes the number population to be served and how project documents that participant meets eligibility for HUD project type.</li> <li>▪ Clear description of how project will address participants' needs and barriers to obtaining or maintaining mainstream benefits, i.e. Medicaid, Supplemental Nutritional Assistance Program, employment, disability income, or behavioral health treatment services.</li> <li>▪ Clear description of how program will assist participants to obtain or maintain permanent housing.</li> <li>▪ Clear description of how project will coordinate with other sources/partners</li> </ul>	
<p><b>Project Scope –Housing First and Reduction of Barriers - Up to 10 pts</b></p> <ul style="list-style-type: none"> <li>▪ Project narrative describes how program has removed barriers to entry related to income minimum.</li> <li>▪ Clear description of how program accepts and assists participants with substance dependence issues (including no abstinence or treatment requirement) and/or mental health disorders (including those who refuse medication)</li> <li>▪ Clear description that program does not automatically exclude participants for criminal history, domestic violence and does not terminate participants for lack of progress on service plans and/or failure to participate in supportive services.</li> </ul>	
<p><b>Project Scope Severity of Need - Up to 5 pts</b></p> <ul style="list-style-type: none"> <li>▪ Project narrative clearly describes how the project works with participants with special needs need which may include: low to no income, chronic homelessness, current or history of DV, significant physical or behavioral health challenges or disabilities, LGBTQ status, medical vulnerability, vulnerability to victimization, unaccompanied youth, families with children.</li> </ul>	
<p><b>TH Only - Up to 2 points</b></p> <ul style="list-style-type: none"> <li>▪ Description includes an explanation as to how project fills a needed gap in CoC system over permanent housing options.</li> </ul>	
<p><b>Bed utilization (APR)</b> 90%+ 5 pts 89%-80% 4 pts 79%-70% 3 pts Below 70% - 0 pts</p>	
<p><b>RRH, SH, and TH: Exits to Permanent Housing (APR)</b> 85%+ 5 pts 75%-84% 4 pts 65%-74% 3 pts Below 65% - 0 pts</p>	
<p><b>PSH: Maintains Housing Stability (APR)</b> 85%+ 5 pts 75%-84% 4 pts 65%-74% 3 pts Below 65% - 0 pts</p>	
<p><b>All Projects: Increase Income (APR)</b> 60%+ 5 pts 60% - 59% 4 pts 45% - 58% 3 pts Below 44% - 0 pts</p>	
<p><b>All Projects – Access Mainstream non-cash Benefits</b> 85%+ 5 pts 71% - 84% 4 pts 56% - 70% 3 pts Below 56% - 0 pts</p>	
<p><b>HUD Audit Findings (Audits between July 2013 – June 2016)</b> 2 pts: No unresolved findings or no audit conducted 0 pts: Any unresolved findings</p>	
<p><b>HUD Expenditures (Project Application Question 2B) Up to 3 points</b> Has the recipient maintained consistent Quarterly Draw downs for the most recent grant term? Have any funds been recaptured by HUD for the most recently expired grant term related to this renewal project?</p>	
<p><b>Total Score</b></p>	

**CoC 2016 Competition  
New Project Score Sheet**

Organization \_\_\_\_\_ Project Name \_\_\_\_\_

<p><b>Experience of Applicant – Up to 15 pts</b></p> <ul style="list-style-type: none"> <li>▪ Description provides concrete examples that illustrate organization’s experience and expertise in addressing the population identified with housing and supportive needs.</li> <li>▪ Organization has sufficient capacity, experience in “drawdowns”, and securing match and leveraging funding from Federal, State, and local sources.</li> <li>▪ Clear description of organization and management structure including evidence of ability to address any audit findings.</li> <li>▪ Description should address any unresolved monitoring/ audit findings for any HUD grants.</li> </ul>	
<p><b>Project Scope – Up to 15 pts</b></p> <ul style="list-style-type: none"> <li>▪ Clear description of population to be served including number served and demonstration that participant meets eligibility for HUD criteria, i.e. 75% come from street, emergency shelter, safe havens, or fleeing domestic violence.</li> <li>▪ Clear description of how program will address needs/issues including helping participants to obtain mainstream health, social and employment services</li> <li>▪ Clear description of how project will coordinate with other sources/partners</li> </ul>	
<p><b>Project Scope –Housing First and Reduction of Barriers - Up to 10 pts</b></p> <ul style="list-style-type: none"> <li>▪ Project narrative describes how program will remove barriers to entry related to income minimum.</li> <li>▪ Clear description of how program will accept and assist participants with substance dependence issues (including no abstinence or treatment requirement) and/or mental health disorders (including those who refuse medication)</li> <li>▪ Clear description that program does not automatically exclude participants for criminal history, domestic violence and does not terminate participants for lack of progress on service plans and/or failure to participate in supportive services.</li> </ul>	
<p><b>Project Scope Severity of Need - Up to 5 pts</b></p> <p>Project narrative clearly describes how the project works with participants with special needs needs which may include: low to no income, chronic homelessness, current or history of DV, significant physical or behavioral health challenges or disabilities, LGBTQ status, medical vulnerability, vulnerability to victimization, unaccompanied youth, families with children.</p>	
<p><b>Housing Stability – Up to 5 pts.</b></p> <p>Clearly defined plan on how project will assist clients to obtain and maintain permanent housing. Description may include staffing i.e. housing locator, case aide, and how staff will educate and support client to be a good neighbor, i.e. paying rent and utilities on time, keeping unit clean, no community complaints, etc.</p>	
<p><b>Increase Income – Up to 5 pts</b></p> <p>Description specifically address how participants will be assisted both to increase their employment and or/income to maximize their ability to live independently.</p>	
<p><b>Mainstream benefits – Up to 5 pts</b></p> <p>Description clearly describes participant will be supported in obtaining and maintaining mainstream benefits.</p>	
<p><b>Implementation Plan – Up to 5 pts.</b></p> <p>Clear plan for rapid implementation of program including description of how project will be ready to begin housing first participant within six (6) months of grant award.</p>	
<p><b>Total Score</b></p>	

**Black, Sara A**

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**From:** Huggins, Gloria  
**Sent:** Wednesday, August 03, 2016 3:25 PM  
**Subject:** Montgomery County CoC Competition Resources Posted

This to inform you that new information about the Montgomery County CoC 2016 Competition is now available on the Interagency Commission on Homelessness website. This includes:

1. CoC Ranking and Review Process for project applications
2. CoC Project Ranking Tool
3. CoC Reallocation Process

To view this information please click here: <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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## Interagency Commission on Homelessness - Continuum of Care 2016 Competition

The Continuum of Care (CoC) Competition is open! HUD has approximately \$1.9 billion available available this year to fund new and renewal projects. Detailed information about the Continuum of Care (CoC) Competition can be found on the HUD website at [HUD 2016 CoC Program Competition NOFA](#).

Montgomery County is eligible to apply for funding of up to \$8,566,015 for both renewal and new projects. In support of the CoC's strategic plan and based on the Point-in-Time, Homeless Management Information System and Housing Inventory Information, the CoC plans to allocate funding for one new project as follows:

1. Permanent Supportive Housing for chronically homeless individuals - maximum budge of \$407,905 **OR**
2. Rapid Re-housing - maximum budget of \$407,905

Montgomery County, as the Collaborative Applicant will be hosting a CoC Competition Information Session for all providers who will be seeking new and renewal CoC funding on:

### Continuum of Care Competition Information Session

Thursday, July 14 | 3:30 - 5:00 p.m.

1301 Piccard Drive, First Floor Conference Room

This session will provide a detailed overview of the CoC application process including a review of CoC and HUD priorities, review of requirements for project applications, and an overview of the ranking and selection process. Please RSVP to Kim Ball at [Kim.Ball@montgomerycountymd.gov](mailto:Kim.Ball@montgomerycountymd.gov) if you will be able to attend the information session.

Additional information about the CoC Competition will be posted as it becomes available.

[CoC 2016 Competition Information Session - July 14 Minutes](#)

[CoC Ranking and Review Process](#)

[CoC Project Ranking Tools](#)

[CoC Reallocation Process](#)

- Interagency Commission on Homelessness Home
- Meeting Schedule
- Monthly Calendars
- Membership List
- Meeting Agenda and Notes
- Enabling Legislation
- Resources
- Service Guide
- Continuum of Care 2016 Competition

Posted 8/3/16



**Montgomery County Continuum of Care  
CoC Program - Ranking and Selection Process**

Each year the U.S. Department of Housing and Urban Development (HUD) allocates funding for homeless assistance programs through the Continuum of Care (CoC) competition process. In order to receive funding, each Continuum of Care must submit a consolidated application for funding that describes how local activities meet or exceed HUD requirements and are aligned with community needs. The CoC is required to rank in order of priority funding requests from all eligible providers. The Montgomery County Department of Health and Human Services (DHHS), acting as the Collaborative Applicant for the Montgomery County MD Continuum of Care, is responsible for coordinating this process and submitting a Consolidated Application on behalf of the Montgomery County CoC. Each year DHHS reviews HUD requirements and priorities for funding under the Continuum of Care Competition.

The CoC Allocation Committee is responsible for reviewing and ranking project applications to be included as part of the Consolidated Application. Members include a range of public and private stakeholders representing the CoC. Allocation Committee members cannot be an employee, board member or volunteer of a project applicant that is requesting new or renewal funding.

DHHS Special Needs Housing as the CoC Collaborative Applicant supports the committee but is not a voting member. The Collaborative Applicant identifies HUD Continuum of Care Competition requirements and priorities for funding, compiles materials for each renewal project, announces funding availability to the Continuum of Care for new projects, develops an evaluation tool used to rate projects, schedules Allocation Committee meetings to conduct the review process, and provides technical assistance to applicants. All providers wishing to receive Continuum of Care funding must submit a project application and all requested supplemental information by deadlines outlined by the Collaborative Applicant that include Annual Performance Reports (APRs), HUD monitoring reports and a summary of drawdown expenses.

Members of the Allocation Committee review information related to the needs of the CoC including the most recent housing inventory chart, Point-in-Time data, federal priorities, CoC strategic plan priorities and identified service gaps. Committee members will review renewal projects based on bed utilization, HUD and CoC performance measures, Continuum of Care priority needs, alignment with HUD priorities, and compliance with HUD funding requirements. New project applications will be reviewed for applicant experience, project quality, alignment of HUD priorities and priority to Continuum of Care needs. Each Project Application will be scored individually using a standardized ranking tool. Planning Projects are reviewed for submission but not ranked per HUD guidance.

Posted 8/3/16



**CoC 2016 Competition Project  
 Renewal Score Sheet**

Organization \_\_\_\_\_ Project Name \_\_\_\_\_

Type of Housing: Permanent – 5 pts _____ Transitional – 3 pts _____	
Project Scope – Up to 20 pts <ul style="list-style-type: none"> <li>Project narrative describes the number population to be served and how project documents that participant meets eligibility for HUD project type.</li> <li>Clear description of how project will address participants' needs and barriers to obtaining or maintaining mainstream benefits, i.e. Medicaid, Supplemental Nutritional Assistance Program, employment, disability income, or behavioral health treatment services.</li> <li>Clear description of how program will assist participants to obtain or maintain permanent housing.</li> <li>Clear description of how project will coordinate with other sources/partners</li> </ul>	
Project Scope –Housing First and Reduction of Barriers - Up to 10 pts <ul style="list-style-type: none"> <li>Project narrative describes how program has removed barriers to entry related to income minimum.</li> <li>Clear description of how program accepts and assists participants with substance dependence issues (including no abstinence or treatment requirement) and/or mental health disorders (including those who refuse medication)</li> <li>Clear description that program does not automatically exclude participants for criminal history, domestic violence and does not terminate participants for lack of progress on service plans and/or failure to participate in supportive services.</li> </ul>	
Project Scope Severity of Need - Up to 5 pts <ul style="list-style-type: none"> <li>Project narrative clearly describes how the project works with participants with special needs need which may include: low to no income, chronic homelessness, current or history of DV, significant physical or behavioral health challenges or disabilities, LGBTQ status, medical vulnerability, vulnerability to victimization, unaccompanied youth, families with children.</li> </ul>	
TH Only - Up to 2 points <ul style="list-style-type: none"> <li>Description includes an explanation as to how project fills a needed gap in CoC system over permanent housing options.</li> </ul>	
Bed utilization (APR) 90%+ 5 pts 89%-80% 4 pts 79%-70% 3 pts Below 70% - 0 pts	
RRH, SH, and PSH: Exits to Permanent Housing (APR) <ul style="list-style-type: none"> <li>85%+ 5 pts 75%-84% 4 pts 65%-74% 3 pts Below 65% - 0 pts</li> </ul>	
PSH: Maintains Housing Stability (APR) 85%+ 5 pts 75%-84% 4 pts 65%-74% 3 pts Below 65% - 0 pts	
All Projects: Increase Income (APR) 60%+ 5 pts 60% - 59% 4 pts 45% - 58% 3 pts Below 44% - 0 pts	
All Projects – Increase Mainstream non-cash Benefits 85%+ 5 pts 71% - 84% 4 pts 56% - 70% 3 pts Below 56% - 0 pts	
HUD Audit Findings (Audits between July 2013 – June 2016) <ul style="list-style-type: none"> <li>2 pts: No unresolved findings or no audit conducted 0 pts: Any unresolved findings</li> </ul>	
HUD Expenditures (Project Application Question 2B) Up to 3 points Has the recipient maintained consistent Quarterly Draw downs for the most recent grant term? Have any funds been recaptured by HUD for the most recently expired grant term related to this renewal project?	
Total Score	

Posted 8/3/16



**CoC 2016 Competition  
 New Project Score Sheet**

Organization \_\_\_\_\_ Project Name \_\_\_\_\_

<p><b>Experience of Applicant – Up to 15 pts</b></p> <ul style="list-style-type: none"> <li>Description provides concrete examples that illustrate organization's experience and expertise in addressing the population identified with housing and supportive needs.</li> <li>Organization has sufficient capacity, experience in "drawdowns", and securing match and leveraging funding from Federal, State, and local sources.</li> <li>Clear description of organization and management structure including evidence of ability to address any audit findings.</li> <li>Description should address any unresolved monitoring/ audit findings for any HUD grants.</li> </ul>	
<p><b>Project Scope – Up to 15 pts</b></p> <ul style="list-style-type: none"> <li>Clear description of population to be served including number served and demonstration that participant meets eligibility for HUD criteria, i.e. 75% come from street, emergency shelter, safe havens, or fleeing domestic violence.</li> <li>Clear description of how program will address needs/issues including helping participants to obtain mainstream health, social and employment services</li> <li>Clear description of how project will coordinate with other sources/partners</li> </ul>	
<p><b>Project Scope –Housing First and Reduction of Barriers - Up to 10 pts</b></p> <ul style="list-style-type: none"> <li>Project narrative describes how program will remove barriers to entry related to income minimum.</li> <li>Clear description of how program will accept and assist participants with substance dependence issues (including no abstinence or treatment requirement) and/or mental health disorders (including those who refuse medication)</li> <li>Clear description that program does not automatically exclude participants for criminal history, domestic violence and does not terminate participants for lack of progress on service plans and/or failure to participate in supportive services.</li> </ul>	
<p><b>Project Scope Severity of Need - Up to 5 pts</b></p> <p>Project narrative clearly describes how the project works with participants with special needs which may include: low to no income, chronic homelessness, current or history of DV, significant physical or behavioral health challenges or disabilities, LGBTQ status, medical vulnerability, vulnerability to victimization, unaccompanied youth, families with children.</p>	
<p><b>Housing Stability – Up to 5 pts.</b></p> <p>Clearly defined plan on how project will assist clients to obtain and maintain permanent housing. Description may include staffing i.e. housing locator, case aide, and how staff will educate and support client to be a good neighbor, i.e. paying rent and utilities on time, keeping unit clean, no community complaints, etc.</p>	
<p><b>Increase Income – Up to 5 pts</b></p> <p>Description specifically address how participants will be assisted both to increase their employment and or income to maximize their ability to live independently.</p>	
<p><b>Mainstream benefits – Up to 5 pts</b></p> <p>Description clearly describes participant will be supported in obtaining and maintaining mainstream benefits.</p>	
<p><b>Implementation Plan – Up to 5 pts.</b></p> <p>Clear plan for rapid implementation of program including description of how project will be ready to begin housing first participant within six (6) months of grant award.</p>	
<p><b>Total Score</b></p>	

Posted 8/3/16



**NOTE: EMAIL SENT TO FULL COC MEMBERSHIP**

**Black, Sara A**

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**From:** Huggins, Gloria  
**Sent:** Wednesday, August 03, 2016 3:25 PM  
**Subject:** Montgomery County CoC Competition Resources Posted

This to inform you that new information about the Montgomery County CoC 2016 Competition is now available on the Interagency Commission on Homelessness website. This includes:

1. CoC Ranking and Review Process for project applications
2. CoC Project Ranking Tool
3. CoC Reallocation Process

To view this information please click here: <http://www.montgomerycountymd.gov/HHS-Program/SNHS/ICH/CoCCompetition.html>

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## Interagency Commission on Homelessness - Continuum of Care 2016 Competition

The Continuum of Care (CoC) Competition is open! HUD has approximately \$1.9 billion available available this year to fund new and renewal projects. Detailed information about the Continuum of Care (CoC) Competition can be found on the HUD website at [HUD 2016 CoC Program Competition NOFA](#).

Montgomery County is eligible to apply for funding of up to \$8,566,015 for both renewal and new projects. In support of the CoC's strategic plan and based on the Point-in-Time, Homeless Management Information System and Housing Inventory Information, the CoC plans to allocate funding for one new project as follows:

1. Permanent Supportive Housing for chronically homeless individuals - maximum budge of \$407,905 **OR**
2. Rapid Re-housing - maximum budget of \$407,905

Montgomery County, as the Collaborative Applicant will be hosting a CoC Competition Information Session for all providers who will be seeking new and renewal CoC funding on:

### Continuum of Care Competition Information Session

Thursday, July 14 | 3:30 - 5:00 p.m.

1301 Piccard Drive, First Floor Conference Room

This session will provide a detailed overview of the CoC application process including a review of CoC and HUD priorities, review of requirements for project applications, and an overview of the ranking and selection process. Please RSVP to Kim Ball at [Kim.Ball@montgomerycountymd.gov](mailto:Kim.Ball@montgomerycountymd.gov) if you will be able to attend the information session.

Additional information about the CoC Competition will be posted as it becomes available.

[CoC 2016 Competition Information Session - July 14 Minutes](#)

[CoC Ranking and Review Process](#)

[CoC Project Ranking Tools](#)

[CoC Reallocation Process](#)

- Interagency Commission on Homelessness Home
- Meeting Schedule
- Monthly Calendars
- Membership List
- Meeting Agenda and Notes
- Enabling Legislation
- Resources
- Service Guide
- Continuum of Care 2016 Competition

Posted 8/3/16



## **Montgomery County Continuum of Care CoC Program – Reallocation Process**

As part of the annual Continuum of Care (CoC) competition, HUD has given all CoCs the opportunity to reallocate funds from existing projects to create new projects that better meet the needs of the community. The Montgomery County Continuum of Care will reallocate HUD CoC program funds as needed, in accordance with the Montgomery County CoC's strategic plan, to improve CoC performance, reduce homelessness and promote housing stability. Funds can be reallocated on a voluntary or involuntary basis in accordance with the criteria below.

### 1. Voluntary Reallocation

Any current CoC grantee can voluntarily reallocate its existing project by reducing the project's annual renewal demand either in whole or in part. Any grantee wishing to reallocate funds must notify the Montgomery County Department of Health and Human Services (DHHS) within the timeline outlined in that year's competition process. Upon notification of the intent to reallocate, DHHS will notify the community that new funding is available, specifying the amount available and type of projects that can be considered.

### 2. Involuntary Reallocation

The Allocation Committee will meet annually or as needed to discuss potential reallocation of existing CoC projects. Projects will be considered for reallocation based on previous CoC Application rankings, performance measures, financial stewardship and alignment with CoC priorities.

If a project is identified as being low performing by scoring poorly during the CoC ranking and review process, has unsatisfactory project performance measures, does not align with CoC priorities and/or has a pattern of under expenditures, the Collaborative Applicant will work with the project to develop a project improvement plan. If the project has not made significant changes to improve its performance or meet set targets in the agreed upon timeframe, the CoC reserves the right to reallocate funding, either in whole or in part, and make it available through a competitive process.

All funding made available through either voluntary or involuntary reallocation will be awarded via a competitive application process. Providers wishing to apply for funds made available through reallocation must submit a new project application and supporting materials in accordance with the CoC Competition instructions. New funding requests will be considered by the Allocation Committee during the annual competition and will be ranked as part of the CoC prioritization process.

# CoC 2016 Competition - NEW FUNDING AVAILABLE

Black, Sara A

Mon 8/1/2016 12:13 PM

To: Black, Sara A <Sara.Black@montgomerycountymd.gov>;

Importance: High

This notice is to inform you that additional CoC funding has been made available through reallocation to support an additional new project as part of the 2016 NOFA Competition. The details are as follows:

- Funding amount: \$120,000
- Allowable Project Type:
  - 1) Permanent Supportive Housing for persons experiencing chronic homelessness or
  - 2) Rapid Re-Housing for families or adults without minor children
- To Apply: Submit a new project application in PDF form to Kim Ball at [kim.ball@montgomerycountymd.gov](mailto:kim.ball@montgomerycountymd.gov) by **Friday, August 12, 2016 at 5pm**

The CoC will be submitting two new project applications as part of this year's Competition – one new project created through reallocation and one new permanent housing bonus project. Organizations can apply for both a bonus project and a new project created through reallocation. **Note: Deadline for Renewal and New Bonus PH Projects remains the same, Wednesday, August 10, 2016.**

Please contact Kim Ball, Homeless Services Administrator, at 240-777-4125 or via email at [kim.ball@montgomerycountymd.gov](mailto:kim.ball@montgomerycountymd.gov) if you have any questions or need additional information.

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Sara Black, MSSW, MPA

Acting Chief, Special Needs Housing

Montgomery County Department of Health & Human Services

[1301 Piccard Drive, Rockville MD 20850](https://www.montgomerycountymd.gov/1301-Piccard-Drive-Rockville-MD-20850)

phone: 240-777-4082

email: [sara.black@montgomerycountymd.gov](mailto:sara.black@montgomerycountymd.gov)

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# Montgomery County Continuum of Care Governance Charter

## I. Background and Purpose

The Montgomery County Continuum of Care (CoC) is the planning body in Montgomery County, Maryland, which coordinates the community's policies, strategies, and activities toward preventing and ending homelessness through a collaboration of public and private groups.

The name of the CoC shall be the Montgomery County Continuum of Care and the name of this CoC board shall be the Interagency Commission on Homelessness, herein referred to, respectively, as the "Montgomery County CoC" and the "Commission".

The Montgomery County CoC's work includes gathering and analyzing information in order to determine the local needs of people experiencing homelessness, implementing strategic responses, educating the community on homeless issues, providing advice and input on the operations of homeless services, and measuring CoC performance. Support for CoC efforts include federal, state, local, and private funds, including U.S. Department of Housing and Urban Development (HUD) funding awarded through the Continuum of Care funding competition.

HUD requires communities that receive funds under the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act to establish a local Continuum of Care to promote a community-wide commitment to ending homelessness, provide funding for efforts to promote community-wide planning and strategic use of resources to address homelessness, improve coordination and integration with mainstream resources, and other programs targeted to people experiencing homelessness.

## II. Responsibilities of the Montgomery County CoC

The responsibilities of the Montgomery County CoC, the Commission, Montgomery County Department of Health and Human Services (DHHS) as the Collaborative Applicant, Montgomery County DHHS as the Homeless Management Information System (HMIS) Lead and CoC staff, include the following activities under CoC operations, planning, HMIS designation and system operations, and preparing application for CoC funds.

### A. Operations of the CoC

- Develop, follow, and update annually this Governance Charter, which will include all procedures and policies needed to comply with HUD requirements and with HMIS requirements, including a code of conduct and recusal process for the Commission, its chair(s), and any person acting on behalf of the Montgomery County CoC board

- Establish and operate a coordinated assessment system that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services
- Establish and consistently follow written standards for providing CoC assistance
- Consult with recipients and subrecipients to establish performance targets appropriate for population and program type
- Monitor performance of CoC recipients and subrecipients
- Evaluate the outcomes of projects funded under CoC programs
- Take action against CoC projects that perform poorly
- Report the outcomes of CoC projects to HUD annually

## **B. Planning Activities of the CoC**

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- Coordinate the implementation of a housing and service system within the Montgomery County CoC geographic area that meets the needs of homeless individuals and families. At a minimum, such a system encompasses the following:
  - Outreach, engagement, and assessment
  - Shelter, housing, and supportive services
  - Prevention strategies
- Plan for and conduct a Point-In-Time (PIT) count of homeless persons within the CoC, including a housing inventory of shelters, transitional housing, and permanent housing for homeless persons
- Conduct an annual gaps analysis of the needs of homeless people, as compared to available housing and services within the CoC geographic area
- Provide information required to complete the Consolidated Plan within the CoC geographic area

## **C. Designating and Operating a Homeless Management Information System**

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- Designate a single HMIS for the CoC's geography, and an eligible entity to serve as the CoC's HMIS Lead
- Review, revise, and approve a CoC HMIS data privacy plan, data security plan, and data quality plan
- Ensure that the HMIS is administered in compliance with HUD requirements
- Ensure consistent participation by CoC recipients and subrecipients in the HMIS

## **D. Prepare an Application for CoC Funds**

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- Design, operate, and follow a collaborative process for the development of a CoC application to HUD
- Establish priorities that align with local and federal policies for recommending projects for CoC Program funding

- Designate an eligible Collaborative Applicant to collect and combine the required application information from all applicants
- Determine whether to select the Collaborative Applicant to apply for Unified Funding Agency (UFA) designation from HUD
- Approve the final submission of applications in response to the CoC Notice of Funding Availability (NOFA)

## **E. Coordinate with Emergency Solutions Grant Recipient**

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Emergency Solutions Grant (ESG) funds are awarded to Montgomery County annually (based on HUD formula and annual appropriations). Montgomery County DHHS is the designated administering department for the funds and ensures the coordination of the following ESG activities are in consultation with the Montgomery County CoC:

- Participates in the CoC's coordinated assessment system
- Follows the CoC written standards for providing assistance
- Monitors performance of ESG recipients (if applicable)
- Evaluates outcomes of projects funded under ESG
- Takes action against ESG projects that perform poorly
- Reports the outcomes of ESG projects to HUD annually
- Ensures consistent participation by ESG recipients and subrecipients (if applicable) in the HMIS system
- Consults with state and local government ESG recipients within the Montgomery County CoC on the plan for allocating ESG funds and reporting on and evaluating the performance of ESG recipients and subrecipients

## **III. Full CoC Membership**

### **A. Meetings and Agenda**

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The Montgomery County CoC will hold meetings of the full CoC membership at least semiannually. The CoC, through the Operations Committee, will announce the date, time and location of these meetings at least one month in advance and will publish the meeting agenda at least 24 hours before the meeting. Meeting agendas will be posted online at the Montgomery County CoC website for review prior to the meeting.

## **B. Membership and Voting**

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Membership is divided into two categories: general membership and voting membership. There is currently no fee to participate.

### **General membership**

The CoC shall be open to any organizations or persons residing or doing business in Montgomery County with an interest in preventing and/or ending homelessness in the community. Membership may 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. General members are welcome to attend the full CoC meetings held during the year.

### **Voting membership**

Voting membership shall be open to any general member of the CoC who wants to participate more thoroughly in the CoC throughout the year, via committee, subcommittee, and/or workgroup. Currently, all Commission members as well as members of each Committee are voting members. To become a new voting member an individual or organization must submit an application for voting status for review and approval by the Operations Committee.

Organizations participating in the CoC voting process will have one vote per organization. This does not preclude the organization from having more than one employee attend CoC committee, subcommittee, workgroup and/or full CoC meetings. In situations where more than one employee from an organization is present at a committee, subcommittee, workgroup or full CoC meeting, only one person can represent the organization in a voting role. Furthermore, if there are different employees from the same organization, on different committee, subcommittee and/or workgroups each employee can vote at their own committee, subcommittee and/or workgroup meeting (as long as only one person per agency is voting at that meeting). Individuals, including homeless and formerly homeless persons, would gain approval to vote as an individual.

### **Commission members**

Commission members are voting members of the CoC.

### **Voting**

Decisions will be made by majority vote.

## C. Duties

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The Montgomery County CoC will adopt, follow, and update annually a governance charter, including board selection, in consultation with the Collaborative Applicant, HMIS Lead, and the Operations Committee.

## IV. Interagency Commission on Homelessness

The CoC has approved the Interagency Commission on Homelessness to act on behalf of the CoC as the governing board. The Commission is comprised of an odd number not to exceed 25 members.

### A. Membership of Governing Board

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Members of the Governing Board are members of the Continuum of Care. The composition of the Governing Board is as follows:

**One (1) representative from each of the agencies and/or positions will be appointed by the Executive as follows (as ex-officio):**

- Director of Department of Health and Human Services
- Chief of Special Needs Housing of the Department of Health and Human Services
- Chief of Behavioral Health and Crisis Services of the Department of Health and Human Services
- Director of the Department of Correction and Rehabilitation
- Director of the Department of Housing and Community Affairs
- Assistant Chief of Field Services of the Montgomery County Police Department
- Representative for the Office of the County Executive

**The Executive must invite the following to serve as ex-officio members:**

- A member of the County Council selected by the Council President
- Executive Director of the Housing Opportunities Commission
- Director of Student Services of the Montgomery County Public Schools
- The Mayor or the Representative of the Mayor, of the City of Gaithersburg
- The Mayor or the Representative of the Mayor, of the City of Rockville
- The Mayor or the Representative of the Mayor, of the City of Takoma Park
- A Representative of either the U.S. Department of Veteran Affairs or the Maryland Department of Veteran Affairs
- Montgomery County Sheriff or the Representative of the County Sheriff
- A member of the County Legislative Delegation selected jointly by the Chairs of the House and Senate Delegation

### **Five (5) Representatives from (as non-ex officio members):**

Continuum of Care association members that represent the relevant organizations of projects serving homeless subpopulations

### **Four (4) Members from the General Public (as non-ex officio members):**

Members of the public, (individual or an organization representative) including one member that must be a person who is homeless or formerly homeless, and one member who is representative of a hospital located in Montgomery County

## **B. Term Limits**

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**For non-ex officio members:** The term is 3 years. Upon expiration of the term, members can be reappointed to a new 3 year term. If a member is appointed to fill a vacancy before a term expires, the successor serves the rest of the unexpired term. The Executive must stagger the terms of the non-ex officio members initially appointed to the Commission so that approximately one-third of the terms of these members expire each year.

**For ex officio members:** The term limit is equal to the term of the member's respective position in their organization/department

## **C. Voting**

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Each member of the Commission is a voting member.

## **D. Meetings**

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The Commission will meet a minimum of quarterly and written agendas and meeting minutes will be kept and made public to promote transparency.

## **E. Officers/Chairs/Staffing**

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The Executive must designate a Chair and Vice Chair, at the initial meeting of the Commission. Subsequently, a Chair and Vice Chair will be nominated by the Commission and confirmed by the Executive annually.

Montgomery County Department of Health and Human Services will provide support to the Commission. The Commission may establish one or more subcommittees to assist in carrying out any function of the Commission. Any subcommittee action is not the action of the Commission and must not bind the Commission or its members. A subcommittee may include a person who is not a member of the Commission.

## F. Duties of the Commission

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- Promote a community-wide goal to end homelessness
- Implement the strategic plan to prevent and reduce homelessness and minimize the trauma and dislocation cause to homeless families and individuals
- Review and monitor any program that is a component of the CoC
- Recommend to the Executive or Council any improvements to the CoC, including process changes, to reduce any barriers to housing and minimize the time needed to move someone from homelessness to housing
- Educate the community about homelessness, best practices to reduce homelessness and resources needed
- Recommend and promote partnerships with any private organization, business, corporation, philanthropic organization/foundation, and any municipal, state, or federal government agency to improve the County's ability to prevent and reduce homelessness
- Members of the Commission have the ability to volunteer to serve on other CoC committees, subcommittees, and/or workgroups.

## G. Conflict of Interest

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The CoC and the Commission will comply with the Conflict of Interest requirements outlined in 24 CFR part 578.95. In addition, any individual participating in or influencing decision-making must identify actual or perceived conflicts of interest as they arise and comply with this policy. Disclosure should occur at the earliest possible time and, if possible, prior to discussion of any issue. Individuals with a conflict should abstain from voting on any issue in which they may have a conflict. No member of the Commission shall vote upon or participate in the discussion of any matter which shall have a direct financial bearing on the organization that the member represents. This includes all decisions with respect to funding, awarding contracts, and implementing corrective actions. Any Commission member finding themselves in a situation where conflict of interest may arise shall recuse himself/ herself from proceedings. The recusal shall be duly recorded in the Commission minutes. All Commission processes shall comply as it relates with the requirements of 24 CFR Part 578.95(b).

## V. Continuum of Care Committees

The Montgomery County CoC has created four committees to conduct the work of the CoC. Additional committees will be established by the Operations Committee who will act as a conduit between the Commission, additional committees, subcommittees, and full CoC membership. The Operations Committee has the ability to create additional committees, subcommittees, or workgroups based on need and majority vote of the Operations Committee. The Performance Review, Strategic Planning, and Education & Outreach committees will be responsible for submitting regular reports to the Operations Committee on their activities.

Decisions made by the committees will be decided by majority vote of committee membership. Each individual member will have one vote, and one representative from each organization will have one vote. All committees will operate with two co-chairs. The Operations Committee will have one County representative as a co-chair. Current chairs of each committee will remain in their position until January 2016, when committee chair elections will be held. Subsequent elections of committee chairs will be held each January. No prohibition exists against the same co-chairs being elected each year.

A graphic of the Montgomery County CoC's committee structure is attached to the end of this governance charter.

#### **A. Operations Committee – Oversees the day to day operations of the CoC including:**

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- Coordinating the overall system of care
- Developing and recommending policies and procedures for approval by the Commission
- Assisting in planning of the CoC activities in coordination with appropriate groups including all other committees, subcommittees, and workgroups
- Reviewing summary reports from all activities of committees, subcommittees, and workgroups
- Approving all membership applications
- Establishing and operating a coordinated assessment system
- Establishing and following written standards for providing CoC assistance
- Holding meetings of the full membership, with published agendas, at least semi-annually
- Coordinating the full CoC to adopt, follow, and update annually a governance charter in consultation with the Collaborative Applicant and HMIS Lead

#### **B. Strategic Planning Committee- Responsibilities include:**

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- Developing, monitoring, and updating the CoC's Strategic 10-Year Plan to end homelessness
- Overseeing the implementation of the Strategic Plan
- Conducting an annual gaps analysis of homelessness needs and services
- Consulting with state and local ESG recipients on the plan for allocating ESG funds and reporting/evaluating performance of ESG programs

#### **C. Performance Review Committee – Responsibilities include:**

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- Reviewing and monitoring aggregate CoC-wide performance of all CoC and ESG programs through HMIS data, including the Annual Progress Report (APR), Annual Homeless Assessment Report (AHAR), Point in Time (PIT) count, and Housing Inventory Chart (HIC)
- Establishing performance targets appropriate for population and program type in consultation with recipients and subrecipients

- Monitoring recipients and subrecipients performance, evaluating outcomes, and taking actions against poor performers
- Evaluating project outcomes of ESG and CoC programs, and reporting those outcomes to the Operations Committee

#### **D. Community Outreach and Education Committee - Responsibilities include:**

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- Providing education to the community on homeless issues
- Providing research and national best practices to other committees, subcommittees, and workgroups
- Publishing and disseminating an open invitation annually for persons within the Montgomery County CoC area to join as new CoC members
- Identifying and addressing membership gaps of key providers and vital stakeholders

### **VI. Designations**

#### **A. HMIS Lead**

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Montgomery County DHHS will act as the HMIS Lead. See HMIS Governance Charter for detailed responsibilities (Attachment A). At minimum the HMIS Lead will:

- Designate a single HMIS system and eligible applicant
- Review, revise, and approve privacy, security, and data quality plans
- Ensure consistent participation of recipients/subrecipients in HMIS
- Ensure that the HMIS is administered in compliance with HUD

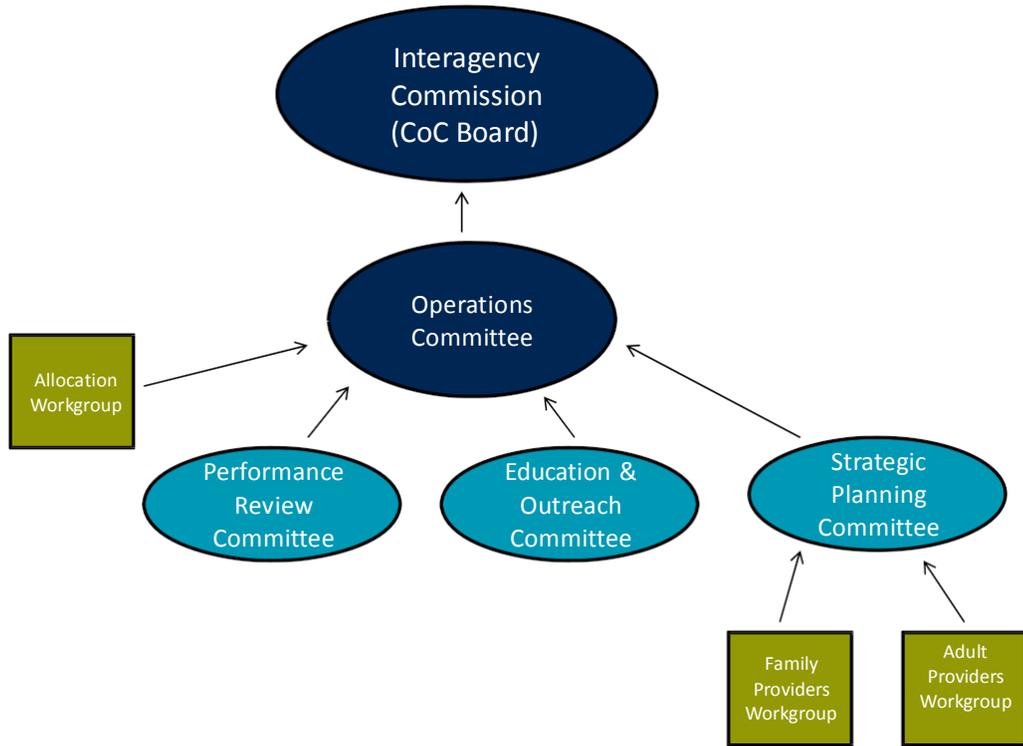
#### **B. Collaborative Applicant**

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Montgomery County DHHS will act as the Continuum of Care Collaborative Applicant. Duties will include:

- Supporting the planning and operations of the CoC
- Coordinating, preparing, collecting information, and submitting the CoC Program application
- Applying for CoC Planning Funds
- Overseeing the CoC coordinated assessment system
- Coordinating and conducting the annual PIT count
- Coordinating and completing the HIC
- Designing, operating, and following a collaborative process for the development of applications and approving submission of applications in response to a CoC Program NOFA
- Providing information required to complete the Consolidated Plan

**Montgomery County CoC Committee Structure**



## Attachment A

# Montgomery County, MD Homeless Management Information Systems (HMIS) Governance Charter

### **Background and Purpose**

The U.S. Department of Housing and Urban Development (“HUD”) mandates the use of a Homeless Management Information System (HMIS) for all communities and agencies receiving HUD Continuum of Care (“CoC”) and Emergency Solutions Grant program (“ESG”) funding. HMIS is essential to efforts to coordinate client services and inform community planning and public policy. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards.

Montgomery County Continuum of Care is the responsible for the oversight of the HMIS system for Montgomery County. The goal of the CoC's HMIS is to improve service delivery, expedite the client intake process, maintain comprehensive client records, track client outcomes, and monitor recidivism rates. Aggregate data from the HMIS is used to understand service population, measure program success in meeting contract deliverables, determine success and gaps in CoC program delivery and in the strategic planning process for the CoC.

### **Montgomery County Continuum of Care Responsibilities**

The Montgomery County CoC will:

- Designate a single information system as the official HMIS software for Montgomery County;
- Designate an HMIS Lead to operate the HMIS system;
- Review and adopt written policies and procedures for the operation of the HMIS that comply with all applicable Federal laws and regulations, and applicable state or local governmental requirements.
- Provide oversight of the HMIS Lead, including: the requirement that the HMIS Lead enter into written HMIS Participation Agreements with each Contributing HMIS Organization (CHO) requiring the CHO to comply with federal regulations regarding HMIS and imposing sanctions for failure to comply; and maintaining documentation of compliance with the governance charter.

### **Designations**

#### ***HMIS System:***

The CoC designates the Bowman Systems, Inc., ServicePoint System as the official HMIS for Montgomery County Maryland.

#### ***HMIS Lead:***

The CoC designates the Department of Health and Human Services (DHHS) as the HMIS Lead to operate the Montgomery County Maryland HMIS.

#### ***CoC Data Committee***

## Montgomery County, MD Homeless Management Information Systems (HMIS) Governance Charter

The HMIS Lead will convene a CoC Data Committee that will develop, review, and recommend policy and standard procedures regarding the HMIS. Members for the committee will be identified via an open solicitation to the CoC governing board.

### **Responsibilities of HMIS Lead**

The HMIS Lead will:

- Contract with the designated HMIS vendor to provide an HMIS system that is in compliance with the HMIS Standards as established by HUD.
- Oversee the daily operations of the HMIS system;
- Develop written HMIS policies and procedures in compliance with HUD regulations including the CoC Program interim rule, CFR 578 and HMIS Data Standards published in March 2010.
- Ensure that HMIS policies and procedures are maintained on the CoC HMIS website at: <http://www.montgomerycountymd.gov/HHSPProgram/SNHS/HMIS-Internal/HMISPolicyprocedure.html>
- Assure that each Contributing HMIS Organization (CHO) appropriately operates and consistently participates in the HMIS, including oversight of the HMIS and any necessary corrective action to ensure that the HMIS and its use is in compliance with federal requirements;
- Execute a written HMIS Participation Agreement with each CHO, which includes the obligations and authority of the HMIS Lead and CHO, the requirements of the security plan and privacy policy with which the CHO must abide;
- Monitor and enforce compliance by all CHOs with HUD requirements and reporting on compliance to the CoC and HUD;
- Monitor data quality and take necessary actions to maintain input of high-quality data from all CHOs;
- Submit reports to HUD and other Federal funders of homeless services, the state and the county as required.
- Maintain the ability to provide the Montgomery County CoC with an unduplicated count of clients served and an analysis of unduplicated counts.
- Serve as the applicant to the US Department of Housing and Urban Development (HUD) for any CoC grant funds to be used for HMIS activities, when available, and entering into grant agreements with HUD to carry out the HUD-approved HMIS activities;
- Develop and submit a security plan, an updated data quality plan, and a privacy policy to the CoC for approval within 6 months after the effective date of the HUD final rule establishing the requirements of these plans, and within 6 months after the date that any change is made to the local HMIS. During this process, the HMIS Lead must seek and incorporate feedback from the CoC and CHO. The HMIS Lead must implement the plans and policy within 6 months of the date of approval by the CoC.
- Develop a privacy policy. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information and standards as may be established by HUD in notice. Every organization with access to protected identifying information must implement procedures

Montgomery County, MD Homeless Management Information Systems (HMIS)  
Governance Charter

to ensure and monitor its compliance with applicable agreements and the requirements of this part.

Responsibilities of the CoC Data Committee:

The CoC Data Committee will recommend to the HMIS Lead:

- The minimum data entry requirements of the CHOs' to participate in the HMIS
- A data quality monitoring plan used to rank CHO's performance outcomes regarding HMIS to ensure that:
  - Recipients and sub-recipients consistently participate in HMIS;
  - HMIS is satisfying the requirements of all regulations and notices issued by federal, state, and local government.
- User supports including standard and specialized trainings, sustainable resources, and workflow documentation to ensure consistent HMIS participation and high data quality.

Approved by Montgomery County Continuum of Care – February 24, 2016

**MONTGOMERY COUNTY, MARYLAND (MCMD)  
CONTINUUM OF CARE (CoC)  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS)  
POLICY AND PROCEDURE MANUAL**

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Montgomery County, Maryland Continuum of Care Policy and Procedure Manual lists local procedures for operating the HMIS. It documents specific expectations regarding the use of the system and procedures that should be followed regarding routine and occasional functions.

## **SECTION 1: Federal Operating Procedures**

MCMD CoC adheres first and foremost to policies and procedures outlined in the Department of Housing and Urban Development HMIS Data and Technical Standards Final Notice [Docket No. FR 4848-N-02] (Appendix A)

[http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2004%20\(1\).pdf](http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2004%20(1).pdf),

<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2009.pdfm>

[http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hprp\\_apr.pdf](http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hprp_apr.pdf),

<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2010.pdf>,

<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/HMIS%20Resources/HMIS-Data-Dictionary.pdf>,

<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/HMIS%20Resources/HMIS-Data-Standards-Manual.pdf>,

<https://www.hudexchange.info/resources/documents/HMIS-Data-Dictionary.pdf>, and

<https://www.hudexchange.info/resources/documents/HMIS-Data-Standards-Manual.pdf>

## **SECTION 2: Contractual Requirements and Roles**

MCMD CoC Contract Requirements: Department of Health and Human Services (DHHS), in its role as the HMIS Lead Agency, agrees to provide all of the necessary equipment and staff to operate and maintain the centralized HMIS database site. This includes all required licenses for software and direct technical assistance to sites, with regards to the HMIS application. This applies to all Agencies that DHHS is currently funded to serve.

Effective June 14, 2012, please note Advance Reporting Tool (ART) licenses will be assigned to an Agency based on a 4:1 ratio. That is for every 4 programs at an Agency, 1 ART license is assigned. This policy will not be retroactive but will be grandfathered in. Unless an exception is granted, all Agencies will have 2 Agency Administrators in order to ensure continuity of operations and as such will be issued at a minimum of 2 ART licenses.

Effective December 12, 2013, please note each Agency must have a minimum of two Agency Administrators designated. This policy is retroactive and will not be grandfathered in. The only two exceptions are (1) an Agency that has 1 worker and (2) an Agency that has only read-only access to the application. All other exceptions to this policy must be granted by the HMIS Lead Agency Representative.

MCMD CoC New Sites Requirements: Any Agency that MCMD CoC does not receive alternate funding for but does want to participate may be required to assume the costs of requisite licenses and cost share of central resources.

HMIS Project Team: MCMD CoC utilizes the HMIS Project Team to provide general oversight and guidance to the project. This includes policy administrators, contract monitors, and IT staff that provide service to the homeless population.

MCDHHS Information Systems and Technology (IS&T) Server Management: Management of an HMIS requires several divergent skill sets. The MCMD CoC project has identified the following roles to provide the best, most efficient service to our stakeholders:

- Project Manager
- Requirement Analyst
- Technical Support Specialist
- Trainer
- Application Administrator
- Developer

The project also designates the roles of every participating user in order to prevent any confusion around responsibilities and privileges. Each role must be filled in order for the Agency to begin working with the project: Participating Agency Executive Director, Participating Agency Site Technical Administrator, and User.

### **SECTION 3: Participation Requirements**

Participation Requirements: For most efficient utilization of the services provided by MCMD CoC, several steps must be completed at the Agency level before implementation can begin. IS&T staff assists with most steps though some require the Agency to act without assistance.

Steps include:

- High Speed Internet Connectivity (DSL or Broadband);
- Identification of a Site Technical Administrator to serve as primary contact;
- Signed Participation Agreement contract (Appendix B); and
- Establishing client consent procedures and interview protocols.

Central Server Requirements: This section covers the exact equipment, staffing, and procedures that the MCMD CoC IS&T staff is responsible for. Focused on security, the areas are:

- Hardware Physical Security
- Software Security
- Network security
- Client database security

Implementation Requirements: Agencies must generate documents that cover each of the following areas in order for implementation to begin.

- Participation Agreement: Each participating Agency must agree to the requirements set forth in the Participation Agreement, which must be signed by a duly authorized Agency representative and returned to the Agency's DHHS Contract Monitor or, in absence
- Each Agency must complete the Provider Form (Appendix C)
- Interagency Data Sharing: HMIS users whose role based access is a Case Manager I or II, Agency Administrator, or Executive Director will be able to view information on clients throughout the HMIS database.

- Notice of Privacy Practice: Each participating Agency must use a Notice of Privacy Practice (NOPP). DHHS will provide the Department's NOPP to each participating Agency for each Agency to adapt to their needs. Each participating Agency must provide a copy of the adapted NOPP to DHHS. If the participating Agency is a HIPAA covered entity, the Agency may continue to utilize its' own NOPP; however MCDHHS must have copy of on file.
- Notice of Privacy Practice Posting: Each participating Agency must post the Notice of Privacy Posting in a conspicuous place at each Provider site. DHHS will provide the Privacy Posting, which is a summary of the NOPP.
- Release of Information: Each participating Agency must have signed Releases of Information (ROI) from each client upon program admission, to allow the sharing of information among authorized HMIS users. DHHS will provide the Release of Information (ROI) to each participating Agency. The DHHS ROI does not replace an Agency's ROI, which is used to obtain and to share information from other Providers that are not part of the HMIS such as treatment providers, etc.
- Participant Privacy, restricted information including psychotherapy or treatment notes, details regarding domestic violence, dating violence, sexual assault and stalking concerns shall not be specifically entered into HMIS. Agencies can share information with providers only with a specific client *Release of Information*, not through the HMIS.
- Data Collection Commitment: Participation in the MCMD CoC project requires that all participating Providers collect the required universal and program specific data elements on all consenting clients. Each Agency must complete the HMIS Data Entry Form (Appendix D), which includes the minimal data elements. The Agency may add any additional elements it wishes to collect.
- Information Security Protocols: Internal policies must be developed at each site to establish a process for the violation of any of Montgomery County Government information security protocols.
- Implementation Connectivity: Once implementation has begun each site agrees to maintain connectivity in order to continue project participation.
- Maintenance of Onsite Computer Equipment: Each Agency agrees to maintain its computer equipment in order to continue project participation. DHHS IS&T agrees to maintain computer equipment provided to selected agencies involved in past HMIS pilots. Please note once the contract is terminated, the Agency must return the computer equipment to DHHS IS&T.
- Conversion of Legacy Data: Agencies that are using legacy systems that request data conversion must provide resources and processes to enable conversion unless specific contracts have been established to provide the conversion at no cost.
- Policy Update Schedule: DHHS will provide the HMIS Policy and Procedures Manual to each participating Agency. This manual will be reviewed annually and updated as necessary.

## **SECTION 4: Training**

HMIS Application Training: MCMD CoC provides ongoing training on all relevant aspects of system operation for the duration of the project. Training modules are developed based on skill level and type of access to the system. Each user of the system is required to complete the application training, as well as HIPAA training, in order to begin using the system.

HIPAA Training: Each participating Agency is responsible for administering the HIPAA training and certifying that their users are trained. A HIPAA training verification will be required for all new users at the time they attend the HMIS Application training.

Scheduled Training Delivery: MCMD CoC agrees to deliver at least one monthly group trainings on an ongoing basis.

HMIS Onsite Application Training: MCMD CoC is available to deliver on-site training in the event that an Agency has a large number of staff to train. However, MCMD CoC will not deliver one to one training on-site.

HMIS and HIPAA Training Materials: All training documentation will be available on the County's HMIS Internet site, which is <http://www.montgomerycountymd.gov/hmis>.

## **SECTION 5: User, Location, Physical and Data Access**

**Access Privileges to System Software:** Access to system resources will only be granted to Agency staffs that need access in order to perform their job. Users must complete the HMIS User Agreement form (Appendix E), in order to request access privileges.

**Access Levels for System Users:** Each user of the system will be assigned an account that grants access to specific system resources that they require. A model of least-privilege is used; no user will be granted more than the least amount of privilege needed to perform their job.

**System Access Deactivation:** Participating Agency Executive Director will complete the HMIS User Deactivation form (Appendix F) within one business day when there is a change in a user's job role or the user is no longer employed by the Agency.

**Location Access Privileges to System Server:** MCMD CoC may require that each computer accessing the system be identified and authorized prior to access. MCMD CoC uses electronic certificates in order to accomplish this goal.

**Access to Data:** All data collected by the MCMD CoC project is categorized. Access to datasets, types of data, and all MCMD CoC data releases is governed by policies developed by the HMIS Project Team.

**Access to Client Paper Records:** All users of the system must not have greater access to client information through the system than is accessible in the agencies paper files.

**Physical Access Control:** All equipment or media containing MCMD CoC data must be physically controlled at the Agency site. Protections and destruction policies vary depending on the type of data and media.

**Logical Access:** Access to system resources must be limited to authorized users for authorized transactions.

**Unique User ID and Password:** Each user of the system must be individually and uniquely identified. Identification will be verified through a password.

**Right to Deny User and Participating Agencies' Access:** MCMD CoC retains the right to suspend or revoke the access of any Agency or individual to the system for consistent or egregious violation of MCMD CoC policies.

**Data Access Control:** Access to the system must be audited. All audits may be reviewed regularly.

**Auditing - Monitoring, Violations and Exceptions:** MCMD CoC considers any exception to stated DTS Computer Security Guideline (Appendix G) policies a violation of those policies that must be investigated.

**Auditing – Data Logs:** MCMD CoC will maintain logs of all actions taken by users. Logs may include operating system logs, database, and firewall logs. All logs may be reviewed regularly.

**Data Assessment and Access:** All data associated with the MCMD CoC project is categorized. Access to data is restricted based on the content of the data. Reproduction, distribution, and destruction of data are based on the content of the data.

**Data Integrity Controls:** Access to the production data is restricted to authorized users only. Each user that has access to production data is contracted to not falsely alter or impact data in any way. If the Agency receives information that necessitates a client's information be entirely removed from the HMIS, the Agency will complete the Client Delete Request form (Appendix H).

**Local Data Storage:** If agencies choose to store local copies of data they are required to developed policies and procedures on how data is generated, stored, and destroyed.

**Transmission of Client Level Data:** All authorized users agree to transmit any client level data securely.

**Data Accuracy:** There are many aspects to data quality, such as validity, completeness, consistency, coverage, accuracy, and timeliness. Each of these aspects is defined in detail in the HMIS Data Quality Standards (Appendix I).

## **SECTION 6: Technical Support and System Availability**

**Planned Technical Support:** MCMD CoC offers technical support to all participating agencies. Support services include training, implementation support, report writing support, and process troubleshooting.

**Participating Agency Technical Service Request:** Service requests from participating agencies may originate from any authorized user either by contacting the HMIS Administrator or sending a request to the HMIS email account ([hmis@montgomerycountymd.gov](mailto:hmis@montgomerycountymd.gov)).

**Rapid Response Technical Support:** Requests for service that require a rapid response will be responded to within 1 business day.

**Availability – Hours of System Operation:** The system is available to users 24 hours a day, except during routine system maintenance, scheduled system upgrades, and unexpected system failures.

**Availability – MCDHHS IS&T Staff Availability:** IS&T staff are available from 8:30 AM to 5:00 PM on Monday to Friday (with the exclusion of holidays) to respond to service requests.

**Availability – Planned Interruption to Service:** Participating agencies will be notified of planned interruptions to service one week prior to the interruption.

**Availability –Unplanned Interruption to Service:** In the event of an unplanned interruption to service IS&T staff will immediately notify all authorized users within one hour of the system failure.

## **SECTION 7: Stages of Implementation**

**Implementation – Stage 1: Start-up and Initial Training:** Implementation begins with stage 1. To enter stage 1 an Agency must complete all requisite paperwork and have user accounts created on the system.

**Implementation – Stage 2: Data Entry Begins:** To enter stage 2 an Agency must begin entering data on their client population.

## **SECTION 8: Stages of Completion**

One week prior to an Agency and/or Provider contract termination, the DHHS Contract Monitor will notify the Agency and/or Provider to exit all clients from the HMIS application. Upon the first business day of the contract termination, the HMIS Administrator will deactivate all user accounts associated with the Agency and/or Provider.

## **SECTION 9: Encryption Management**

Encryption General: All potentially identifying information is encrypted in the database. Encryption prevents unauthorized personnel from accessing confidential information for any reason.

Encryption Management: In the event that system wide data decryption becomes necessary the process is outlined here. Only one event has been identified that would require this, a change in products.

## **SECTION 10: Data Release Protocols**

Data Release Authorization and Distribution: MCMD CoC does release data in the process of generating reports. MCMD CoC will only release de-identified aggregate data.

Right to Deny Access to Client Identified Information: MCMD CoC does not release client identified information to any third party. Court orders for information will be forwarded to the DHHS Housing Stabilization Senior Administrator for review. Pursuant to policy no release will occur unless the party obtains the written release of every client within the database prior to receiving the database.

Right to Deny Access to Aggregate Information: MCMD CoC retains the right to deny access to aggregate level data. Pursuant to policy any interested party must submit a request for data to the HMIS Project Team. All requests are reviewed by the HMIS Project Team.

*Version: 1.8*

*Revision Date: July 2016*

## APPENDIXES

- APPENDIX A:** Department of Housing and Urban Development HMIS Data and Technical Standards  
Final Notice [Docket No. FR 4848-N-02] *Linked from Page 1<sup>1</sup>*
- APPENDIX B:** Participation Agreement
- APPENDIX C:** Provider Form
- APPENDIX D:** HMIS Data Entry Forms
- APPENDIX E:** HMIS User Agreement
- APPENDIX F:** HMIS User Deactivation
- APPENDIX G:** DTS Computer Security Guideline
- APPENDIX H:** Client Delete Request Form
- APPENDIX I:** HMIS Data Quality Standards

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<sup>1</sup> [http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2004%20\(1\).pdf](http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2004%20(1).pdf),  
<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2009.pdfm>  
[http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hprp\\_apr.pdf](http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hprp_apr.pdf),  
<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/Policy%20-%20Procedures/hmisdatastandards2010.pdf>,  
<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/HMIS%20Resources/HMIS-Data-Dictionary.pdf>,  
<https://www.hudexchange.info/resources/documents/HMIS-Data-Dictionary.pdf>,  
<https://www.hudexchange.info/resources/documents/HMIS-Data-Standards-Manual.pdf>,  
and  
<http://www.montgomerycountymd.gov/HHS-Program/Resources/Files/SNH/HMIS/HMIS%20Resources/HMIS-Data-Standards-Manual.pdf>

# **APPENDIX B**

## **Participation Agreement**

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## 1. Participation Agreement

**Participation Agreement**  
**Between**  
**[Montgomery County Department of Health and Human Services]**  
**and**  
**[Agency Name]**

This agreement is entered into on \_\_\_\_\_ (dd/mm/yy) between the HMIS Lead Agency Montgomery County Department of Health and Human Services, hereafter known as "HLA," and

---

(agency name), hereafter known as "Agency," regarding access and use of the Homeless Management Information System, hereafter known as "HMIS."

### I. Introduction

The HMIS, a shared human services database, allows authorized personnel at homeless and human service provider agencies throughout Montgomery County Homeless Continuum of Care (MCCoC), to enter, track, and report on information concerning their own clients and to share information, subject to appropriate inter-agency agreements, on common clients.

HMIS's goals are to:

- Improve coordinated care for and services to homeless persons in the MCCoC,
- Provide a user-friendly and high quality automated records system that expedites client intake procedures, improves referral accuracy, and supports the collection of quality information that can be used for program improvement and service-planning, and
- Meet the reporting requirements of the U.S. Department of Housing and Urban Development (HUD), and other funders as needed.

In compliance with all state and federal requirements regarding client/consumer confidentiality and data security, the HMIS is designed to collect and deliver quality data about services and homeless persons or persons at risk for being homeless. The Montgomery County Department of Health and Human Services (MCDHHS) administers the HMIS.

### II. HLA Responsibilities

1. HLA will make a best effort to provide the Agency 24 hour access to the HMIS database system, except during routine system maintenance, scheduled system upgrades and unexpected system failures..
2. HLA will provide model Privacy Notices, Client Release forms and other templates for agreements that may be adopted or adapted in local implementation of HMIS functions.
3. HLA will provide both initial training and periodic updates to that training for all end users regarding the use of the HMIS.
4. HLA will provide basic user support and technical assistance (i.e., general trouble-shooting and assistance with standard report generation). Access to this basic technical assistance will normally be available from 8:30 AM. to 5:00 PM. on Monday through Friday (with the exclusion of holidays)..

### III. Privacy and Confidentiality

#### A. Protection of Client Privacy

1. The Agency will comply with all applicable federal and state laws regarding protection of client privacy.
2. The Agency will comply specifically with Federal confidentiality regulations as contained in the *Code of Federal Regulations, 42 CFR Part 2*, regarding disclosure of alcohol and/or drug abuse records where applicable. Users should be aware that the Lead Agency will give notice when specific portions of a client record should be locked.
3. The Agency will comply specifically with the *Health Insurance Portability and Accountability Act of 1996, 45 C.F.R., Parts 160 & 164*, and corresponding regulations established by the U.S. Department of Health and Human Services.
4. The Agency will comply with all policies and procedures established by HLA pertaining to protection of client privacy.

#### B. Client Confidentiality

1. The Agency agrees to provide a copy of HMIS' *Privacy Notice* (or an equivalent Agency-specific alternative) to each consumer. The Agency will provide a verbal explanation of the HMIS and arrange for a qualified interpreter/translator or other reasonable accommodation in the event that an individual is not literate in English or has difficulty understanding the *Privacy Notice* or associated Consent Form(s).
2. The Agency will not solicit or enter information about clients into the HMIS database unless it is essential to provide services or conduct evaluation or research. Agency Management, in consultation with the HLA will make a determination of what qualifies as essential for services or research.
3. The Agency will not divulge any information received from the HMIS to any organization or individual without proper written consent by the client, unless otherwise permitted by applicable regulations or laws.
4. The Agency will ensure that all persons who are issued a User Identification and Password to the HMIS abide by this *Participation Agreement*, including all associated confidentiality provisions. The Agency will be responsible for oversight of its own related confidentiality requirements.
5. The Agency agrees that it will ensure that all persons issued a User ID and Password will complete a formal training on privacy and confidentiality and demonstrate mastery of that information, prior to activation of their User License. The privacy and confidentiality training must be consistent with HLA training or otherwise meet all required state and federal standards.
6. The Agency acknowledges that maintaining the confidentiality, security and privacy of information such as that described in Part III, downloaded from the system by the Agency is strictly the responsibility of the Agency.

7. Agency Participants are prohibited from altering information in databases without first obtaining express permission of the HLA.

### **C. Inter-Agency Sharing of Information**

1. The Agency acknowledges that all forms provided by the HLA regarding client privacy and confidentiality are shared with the Agency as generally applicable models that may require specific modification in accord with Agency-specific rules. The Agency will review and revise (as necessary) all forms provided by the HLA to assure that they are in compliance with the laws, rules and regulations that govern its organization.
2. The Agency acknowledges that informed written client consent is required before any basic identifying client information is shared with other Agency's in the System; unless sharing is otherwise permitted by applicable regulations or laws. The Agency will document client consent on the *HMIS Client Release of Information Form*.<sup>[1]</sup>
3. The Agency will incorporate an HMIS release clause into its existing *Agency Authorization for Release of Information Form(s)* if the Agency intends to share restricted client data within the HMIS. Restricted information, including psychotherapy notes, the diagnosis, treatment, or referrals related to a mental health disorder, drug or alcohol disorder, HIV/AIDS, victims of domestic violence, dating violence, sexual assault and stalking concerns shall be not be shared with other participating Agencies with out a specific *Client Release of Information*. Sharing of restricted information is **not** covered under the general *HMIS Client Release of Information*. Agencies with whom information is shared are each responsible for obtaining appropriate consent(s) before allowing further sharing of client records.
4. The Agency acknowledges that the Agency, itself, bears primary responsibility for oversight for all sharing of data it has collected via the HMIS. The HLA will hold the Agency responsible only for information that the Agency shares. The HLA however, will not hold the Agency responsible for the actions of the Entity that receives and misappropriates the shared data; unless the Agency knew or should have known that the Entity would misappropriate or were otherwise not entitled to receive the shared information.
5. The Agency agrees to place all *Client Authorization for Release of Information* forms related to the HMIS in a file to be located at the Agency's business address and that such forms will be made available to the HLA for periodic audits. The Agency will retain these HMIS related authorization for Release of Information forms for a minimum of six years or longer if appropriate.
6. The Agency acknowledges that clients who choose not to authorize sharing of information cannot be denied services for which they would otherwise be eligible. The Agency does not have to qualify a client to be eligible for a service if the Agency does not have enough information to qualify the client for the program.

### **D. Custody of Data**

1. The Agency acknowledges, and HLA agrees, that the Agency retains responsibility for all information it enters into the HMIS but the HLA owns the records that are developed as a result of the development of the database.

#### IV. Data Entry and Regular Use of HMIS

1. The Agency will not permit User ID's and Passwords to be shared among users.
2. If a client has previously given the Agency permission to share information with multiple agencies, beyond basic identifying information and non-restricted service transactions, and then chooses to revoke that permission with regard to one or more of these agencies, the Agency will contact its partner agency/agencies and explain that, at the client's request, portions of that client record will no longer be shared. The Agency will then "lock" those portions of the record, impacted by the revocation, to the other agency or agencies. Agency Users will be notified by the HLA to lock specific portions of a client record when applicable.
3. If the Agency receives information that necessitates a client's information be entirely removed from the HMIS, the Agency will work with the client to complete a brief *Delete Request Form*,<sup>[2]</sup> which will be sent to the HLA for de-activation of the client record. This provision only applies to reporting that is not required by State or Federal mandates.
4. The Agency will enter all minimum required data elements as published by the most recent U.S. Department of Housing and Urban Development (HUD) HMIS Data Standards and required local community elements specified for all persons who are participating in services funded by the HUD Supportive Housing Program, State of Maryland Emergency Transitional Housing Services (ETHS), and Montgomery County, Maryland Government.
5. The Agency will enter data in a consistent manner, and will strive for real-time, or close to real-time, data entry.
6. The Agency will routinely review records it has entered in the HMIS for completeness and data accuracy. The review and data correction process will be made according to HMIS' published *Policies and Procedures*.
7. The Agency will not knowingly enter inaccurate information into HMIS.
8. The Agency acknowledges that once the *Client Release of Information* expires, a new Client Release of Information must be obtained or no new information can be added to the database. Information entered before the date of the expired release will continue to be available to the sharing partners.
9. The Agency acknowledges that a modified agency *Authorization to Release Information* form, with an HMIS clause, permits it to share restricted client information with select agencies (as determined by the Authorization to Release Form) in compliance with the Agency's approved Confidentiality Policies and Procedures.
10. The Agency will prohibit anyone with an Agency-assigned User ID and Password from entering offensive language, profanity, or discriminatory comments based on race, color, religion, national origin, ancestry, handicap, age, sex, and sexual orientation. These prohibited actions are not limited to those listed above and include all other requirements found in the HUD provisions found at the Federal Register Part III Department of HUD HMIS provisions.
11. The Agency will utilize the HMIS for business purposes only.
12. The Agency will keep updated virus protection software and appropriate firewall protection on Agency computers that access the HMIS.

13. Nothing in this Agreement authorizes any party to collect, maintain, use, or disclose information in violation of any laws.
14. The Agency agrees that the HLA or the local Continuum of Care Committee may meet to discuss procedures, updates, policy and practice guidelines, data analysis, and software/ hardware upgrades. The HLA will request the Agency to designate at least one specific Staff member to regularly attend the meetings.
15. Notwithstanding any other provision of this *Participation Agreement*, the Agency agrees to abide by all policies and procedures relevant to the use of HMIS that HLA publishes from time to time. The Agency will have a reasonable time to comply with new policies and procedures to be set by HLA. The Agency will complete the HMIS Deactivation User Agreement form regarding employee status change and forward to the HMIS Administrator when an HMIS User is no longer employed by the Agency.

## **V. Publication of Reports**

1. The Agency agrees that it may only release aggregated information generated by the HMIS that is specific to its own services.
2. The Agency acknowledges that the release of aggregated information will be governed through policies established by relevant committees operating at the Continuum of Care level for community-level analysis. Such information will include qualifiers such as coverage levels or other issues necessary to fully explain the published findings.

## **VI. Database Integrity**

1. The Agency will not share assigned User ID's and Passwords to access the HMIS with any other organization, governmental entity, business, or individual.
2. The Agency will not intentionally cause corruption of the HMIS in any manner. Any unauthorized access or unauthorized modification to computer system information, or interference with normal system operations, will result in immediate suspension of services, and, where appropriate, legal action against the offending entities.
3. All Agency participants must obtain and maintain corporate/business e-mail accounts to be eligible to participate in distribution lists.

## **VII. Hold Harmless**

1. The HLA and MCDHHS make no warranties, expressed or implied. The Agency, at all times, will indemnify and hold HLA/MCDHHS harmless from any damages, liabilities, claims, and expenses that may be claimed against the Agency; or for injuries or damages to the Agency or another party arising from participation in the HMIS; or arising from any acts, omissions, neglect, or fault of the Agency or its agents, employees, licensees, or clients; or arising from the Agency's failure to comply with laws, statutes, ordinances, or regulations applicable to it or the conduct of its business. This Agency will also hold HLA/MCDHHS harmless for loss or damage resulting in the loss of data due to delays, non-deliveries, mis-deliveries, or service interruption caused by Bowman Information Systems, by the Agency's or other member agency's negligence or errors or omissions, as well as natural disasters, technological difficulties, and/ or acts of God. HLA/MCDHHS shall not be liable to the Agency for damages, losses, or injuries to the Agency or another party other than if such is the result of gross negligence or willful misconduct of HLA/MCDHHS. HLA and MCDHHS agree to hold the Agency

harmless from any damages, liabilities, claims or expenses caused solely by the negligence or misconduct of HLA or MCDHHS

2. The Agency agrees to keep in force a comprehensive general liability insurance policy. Said insurance policy shall include coverage for theft or damage of the Agency's HMIS-related hardware and software, as well as coverage of Agency's indemnification obligations under this agreement.
3. Provisions of Section VII shall survive any termination of the Participation Agreement. All restrictions on the use and disclosure of client information will also survive any termination of the Participation Agreement.

### VIII. Terms and Conditions

1. The parties hereto agree that this agreement is the complete and exclusive statement of the agreement between parties and supersedes all prior proposals and understandings, oral and written, relating to the subject matter of this agreement.
2. The Agency shall not transfer or assign any rights or obligations under the *Participation Agreement* without the written consent of HLA.
3. This agreement shall remain in force until revoked in writing by either party, with 30 days advance written notice. The exception to this term is if allegations or actual incidences arise regarding possible or actual breaches of this agreement. Should such situations arise, the HLA may immediately suspend access to the HMIS until the allegations are resolved in order to protect the integrity of the system.
4. This agreement may be modified or amended by written agreement executed by both parties with 30 days advance written notice.

IN WITNESS WHEREOF, the parties have entered into this Agreement:

**AGENCY:**

**HLA:**

\_\_\_\_\_

HMIS \_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_  
[Name of HMIS Lead]

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

# Homeless Management Information System

## ASSURANCE

\_\_\_\_\_ (Name of Agency) assures that the following fully executed documents will be on file and available for review.

- The Agency's Board Approved Confidentiality Policy.
- The Agency's Grievance Policy, including a procedure for external review.
- The Agency's official *Privacy Notice* for HMIS clients.
- Executed *Agency Authorizations for Release of Information* as needed.
- Certificates of Completion* for required training for all HMIS System Users.
- A fully executed *User Agreement* for all HMIS System Users.
- A current *HMIS Policy and Procedure Manual*.

By: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Last Updated: August2016

\_\_\_\_\_

# **APPENDIX C**

## **Provider Form**

# PROVIDER FORM

**Last Updated: December 18, 2013**

**Parent Provider** If not creating Level 1 Provider, the parent Provider name displays as a hyperlink for access to the parent Provider page (e.g. Montgomery County Coalition for the Homeless)

**Note:** Per HUD requirements, this name **must** coincide with the name used in the HUD Housing Chart or Annual Performance Report (APR) or Quarterly Performance Report (QPR) or Housing Prevention and Rapid Re-housing (HPRP).

**Name** the Provider being created (e.g. Seneca Heights)

**Note:** Per HUD requirements, this name **must** coincide with the name used in the HUD Housing Chart or Annual Performance Report (APR) or Quarterly Performance Report (QPR) or Housing Prevention and Rapid Re-housing (HPRP).

## Provider Profile

**Description** of Services provided by this Provider

## Module Access Settings

Provider is a shelter program.

Yes or  No

## Location Information

**Street Address** Physical street location of this Provider

**Street Address** Additional location information such as floor or suite number

**City** Physical city location of this Provider

**State** Physical state location of this Provider

MD

**Zip** Zip code of this Provider

**County** County of this Provider

Montgomery County

**Area** Geographical Area used as a search criteria in ResourcePoint

**Mailing Address** Mailing address of this Provider

**Mailing Address** Additional mailing address information such as mail stop

**Mailing City** Mailing address city

**Mailing State** Mailing address state

**Mailing Zip** Mailing address zip

**Landmarks** Description of landmarks to help locate this Provider such as cross street as well as public transit information (e.g. what busses pass your site).

## Contact Information

**Telephone 1-4 (Number)** List up to four telephone numbers for this Provider

Description Main Number	Phone 1
Description	Phone 2
Description	Phone 3
Description	Phone 4

**Fax 1-2 (Number)** List up to two fax numbers for this Provider

Fax Number 1  
Fax Number 2

**Person in Charge** Name of contact (e.g. program director, program manager, etc.) related to this Provider

**Person in Charge Title** Title of the contact for this Provider

**Person in Charge Email Address** Email address to use to contact this Provider

**Contact Person 1 Name** Name of contact (e.g. program director, program manager, etc.) related to this Provider

**Contact Person 1 Title** Title of the contact for this Provider

**Contact Person 1 Email Address** Email address to use to contact this Provider

**Contact Person 2 Telephone** Phone number to use to contact this Provider

Description Main Number	Phone 1
-------------------------	---------

**Contact Person 2 Name** of contact (e.g. program director, program manager, etc.) related to this Provider

**Contact Person 2 Title** of the contact for this Provider

**Contact Person 2 Email Address** to use to contact this Provider

**Contact Person 2 Telephone** Phone number to use to contact this Provider

Description Main Number	Phone 1
-------------------------	---------

## Services

**Website Address** for this Provider

**Days and Hours** of operation for this Provider

**Program Fees** List fees associated with this Provider's Services

**Intake/Application Process**

- Completion of the DHHS Shelter Placement Form
- Completion of Provider Specific Referral Form
- Completion of Psychosocial Assessment
- Results of TB Test
- Other, Please specify:

**Eligibility**

**Eligibility Requirements**

- Client is willing to accept case management.
- Client is willing to follow program rules.
- Client is willing to live in a group home setting.
- Client is willing to participate in a treatment program.
- Client must remain abstinent from illegal substances.
- Client must have a substance dependency issue.
- Client must have a co-occurring disorder.
- Income is not required.
- Income is required and the client must be willing to pay 30% of income or entitlements.
- Client is willing to provide supporting documentation. Please specify:
- Other, Please specify other eligibility requirements:

**Languages Spoken at the Site**

**Volunteer Opportunities**

Call provider to attain information on volunteer opportunities.

**Wish list**

Call provider to attain information on wishlist items.

**Handicap Access** Select Yes or No as to whether this Provider has handicap access to their location.

- Yes or  No

**Brochures** Select Yes or No as to whether this Provider has program brochures.

- Yes or  No

**Shelter** Select Yes or No as to whether this Provider is a shelter program.

- Yes or  No

Additional Information

**Services Provided**

**Note:** This information will be used to assist users in searching for providers in ResourcePoint based on services provided by the provider. Additionally, please select the appropriate Type of Service (Primary or Secondary).

Service Description	Type of Service
	Primary Service

## Program Descriptor Information

### **Legal Status**

**Note:** Select only **one** from the following list below.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> City/County (Parish) | <input type="checkbox"/> Educational        | <input type="checkbox"/> Faith Based-Non Profit |
| <input type="checkbox"/> Federal              | <input type="checkbox"/> Non-Profit         | <input type="checkbox"/> Other                  |
| <input type="checkbox"/> Private Individual   | <input type="checkbox"/> Private-Non Profit | <input type="checkbox"/> Profit                 |
| <input type="checkbox"/> Public Service       | <input type="checkbox"/> Religious          | <input type="checkbox"/> State                  |
| <input type="checkbox"/> United Way           | <input type="checkbox"/> Volunteer          |   |

## HUD Standards

### **Organization Identifier (Agency/Provider Identifier)**

To be completed by HMIS Administrator. Same as the Parent Provider.

### **COC Code**

MD-601

To be completed by HMIS Administrator. 249031

### **Program Type Code**

Select **one** of the following:

- Emergency Shelter (HUD)
- Homeless Outreach (HUD)
- Homeless Prevention and Rapid Re-Housing (HUD)
- Permanent Housing (e.g. Mod Rehab SRO, Subsidized Housing without Services) (HUD)
- Permanent Supportive Housing (HUD)
- Prevention (HUD)
- Rapid Re-housing (HUD)
- Safe Haven (HUD)
- Supportive Services Only Program (HUD)
- Transitional Housing (HUD)
- Other (HUD)

### **Direct Service Code**

Select Yes, if you provide direct service to clients.

- Yes
- No

### **Program Site Configuration Type**

Select **one** of the following to describe the overall program configuration and the facility where the CoC Program provides most housing and/or services (i.e. the principal program service site) within the CoC.

- Single Site, Single Building: Housing units (or service encounters) are at one site, in a single structure.
- Single Site, Multiple Buildings: Housing units (or service encounters) are at one site, in multiple structures (e.g., single apartment complex with multiple buildings and program units in two or more buildings).
- Multiple Sites, Multiple Buildings: Housing units (or service encounters) are at multiple sites (e.g., scattered-site housing, outreach).

### **Site Type**

Select **one** of the following:

- Non-Residential: Services Only: The program only provides supportive services and does not provide overnight accommodations.
- Residential: Special Needs and Non-Special Needs: Residential housing (i.e., site that provides overnight accommodation) is located within a building or complex that houses both persons with special needs—e.g., homeless or formerly homeless persons, persons with substance abuse problems, persons with mental illness, or persons with HIV/AIDS—and persons without any special needs.
- Residential: Special Needs Only: Residential housing is located within a building or complex that houses only persons with special needs—e.g., homeless or formerly homeless persons, persons with substance abuse problems, persons with mental illness, persons with HIV/AIDS, persons with a physical disability, and/or elderly persons.

### **Housing Type**

Select ***one*** of the following below. For the principal program service site, record the appropriate housing type. Non-residential programs should select “Not applicable: non-residential program.”

- Mass shelter/barracks. Multiple individuals and/or family households sleep in a large room with multiple beds.
- Dormitory/hotel/motel. Most individuals and/or families share small to medium sized sleeping rooms or have private sleeping rooms. Persons may or may not share a common kitchen, common bathrooms, or both.
- Shared housing. Most individuals and/or families reside in one or more shared housing units that house up to 8 individuals or 4 families. Each unit includes a kitchen and bath. Each family generally has a private sleeping room, though more than one individual may share sleeping space.
- Single Room Occupancy (SRO) units. Most individuals reside in a private unit with a sleeping/living room intended for one occupant that contains no sanitary facilities or food preparation facilities, or contains either, but not both, types of facilities.
- Single apartment (non-SRO) units. Most individuals and/or families reside in a self-contained apartment intended for one individual or family household that includes a private kitchen and bath.
- Single homes/townhouses/duplexes. Most individuals and/or families reside in a self-contained home/townhouse/duplex intended for one individual or family household.
- Not applicable: non-residential program. The program does not offer residential services to clients.

### **Grantee Identifier**

Record the appropriate Grantee Identifier (ID) to uniquely identify HPRP grantees and sub-grantees that receive funding under the American Recovery and Reinvestment Act of 2009. HPRP state and local government grantees may select one or more organizations (called “sub-grantees”) to administer HPRP funded programs. All sub-grantees of a federal HPRP grantee must identify their projects with the original state or local grantee identifier as assigned by HUD.

### **Method for Tracking Residential Program Occupancy**

Select only ***one*** to record the method used to track the actual nights that a client stays in a program. The standard method for residential homeless assistance programs that complete APRs must be based on a comparison of program entry and exit dates. A residential program that is not required to produce an APR may alternatively use a bed management tool or service transaction approach to report the number of persons receiving shelter/housing on a particular night.

To be completed by HMIS Administrator.

- Program Entry and Exit Comparison
- Bed Management Motel
- Service Transaction Model

### **Bed Inventory Data**

Bed List Name Use the same name as the provider.

#### Household Type

- Households without children
- Households with children
- Households with **only** children

#### Bed Type

- Facility Based
- Voucher
- Other

#### Availability

- Year-Round
- Seasonal
- Overflow

Bed Inventory (Number of Beds)

Chronic Homeless Bed Inventory (Permanent Supportive Housing Programs Only)

Unit Inventory (Number of Units)

Inventory Start Date

Inventory End Date

HMIS Participating Beds

HMIS Participation Start Date

HMIS Participation End Date

Target Population A

**Note:** Select ***only one*** response.

- Single Males (18 years and older)
- Single Females (18 years and older)
- Single Males and Females (18 years and older)
- Couples Only, No Children
- Single Males and Households with Children
- Households with Children
- Unaccompanied Young Males (under 18)
- Unaccompanied Young Females (under 18)
- Unaccompanied Young Males and Females (under 18)
- Single Male and Female and Households with Children

Target Population B

**Note:** Select ***only one*** response.

- Domestic Violence Victims
- Veterans
- HIV: Persons with HIV/AIDS
- Not Applicable

Shelter Information

**Does this provider have beds to be created in ServicePoint?**

- Yes  No

**Shelter Requirements**

Provide a description for the shelter's requirements.

**Shelter Service Code** Select only one.

- Emergency Shelter
- Transitional Housing
- Permanent Supportive Housing

**Select the appropriate section that describes the bed list.**

Select ***one*** of the following:

- Family Section
- Men's Section
- Women's Section
- Men's and Women's Section

**Users**

Please list the users who should have access to this provider's data:

User 1:

User 2:

User 3:

User 4:

User 6:

User 7:

User 8:  
User 9:  
User 10:  
User 11:  
User 12:

## **Provider Group**

Select ***all*** that apply.

- Annual Homeless Assessment Group (AHAR)
- Montgomery County CoC – All
- Montgomery County CoC – All Family Providers
- Montgomery County CoC – All Individual Providers
- Emergency Shelter – All
- Emergency Shelter – Family
- Emergency Shelter – Family and Hotels
- Emergency Shelter – Individual
- Housing Initiative Program – All
- Housing Initiative Program – All Family Providers
- Housing Initiative Program – All Individual Providers
- Transitional Housing – All
- Transitional Housing – Family
- Transitional Housing – Individual
- Permanent Supportive Housing – All
- Permanent Supportive Housing – Family
- Permanent Supportive Housing – Individual

## **Documentation Updates:**

To be completed by HMIS Administrator.

Does the HMIS User Agreement form need to be updated?

(\\Hhsnasdata\shared\Cross Programs\ServicePoint\TrainingPackage\HMISUserAgreement.doc)

- Yes
- No

Does the HMIS Client Authorization form need to be updated?

(\\Hhsnasdata\shared\Cross Programs\ServicePoint\Policy\_and\_Procedure\HMIS\_Authorization\_Form.doc)

- Yes
- No

Does the HMIS Destination Crosswalk need to be updated?

(\\Hhsnasdata\shared\Cross Programs\ServicePoint\TrainingPackage\Crosswalk\HMIS\_Destination\_Cross\_Walk\_Chart.doc)

- Yes
- No

# **APPENDIX D**

## **HMIS Data Entry Forms**

# HMIS Data Collection Template for Project ENTRY – CoC Program

## FOR TEXT FIELDS, USE BLOCK LETTERS. OTHERWISE, MARK APPROPRIATE BOXES WITH AN “X”

The form is broken into two sections for *All Clients*, and *Head of Household and Other Adults in the Household* in order to eliminate duplication of data gathering when characteristics apply to certain members of households.

### DATA FOR ALL CLIENTS

Respond to the following questions for all household members—each adult and child. A separate form should be included for each household member.

#### PROJECT ENTRY DATE (e.g., 08/24/2014)

The Project Entry Date will serve as the information date for all data elements collected on this form; all data must be accurate as of this date, regardless of the date collected.

		/			/					
Month			Day			Year				

#### NAME (first, middle, last name, suffix (e.g., Jr, Sr, III))

First name																	
Middle name																	
Last name																	
Suffix																	

#### NAME DATA QUALITY

- Full name reported
- Partial, street name, or code name reported
- Client doesn't know
- Client refused

#### SOCIAL SECURITY NUMBER

			-			-					
--	--	--	---	--	--	---	--	--	--	--	--

#### DATE OF BIRTH (e.g., 10/23/1978)

		/			/					
Month			Day			Year				

#### SOCIAL SECURITY NUMBER DATA QUALITY

- Full SSN reported
- Approximate or partial SSN reported
- Client doesn't know
- Client refused

#### DATE OF BIRTH TYPE

- Full date of birth reported
- Approximate or partial date of birth reported
- Client doesn't know
- Client refused

## DATA FOR ALL CLIENTS (CONTINUED)

### RELATIONSHIP TO HEAD OF HOUSEHOLD

- |  |  |
|--|--|
| <input type="checkbox"/> Self (head of household)              | <input type="checkbox"/> Head of household's other relation member (other relation to head of household) |
| <input type="checkbox"/> Head of household's child             | <input type="checkbox"/> Other: non-relation member  |
| <input type="checkbox"/> Head of household's spouse or partner |  |

### RACE

More than one race is permitted. *Client doesn't know* and *Client refused* should only be selected if no other response is selected.

- |  |  |
|--|--|
| <input type="checkbox"/> American Indian or Alaska Native          | <input type="checkbox"/> White               |
| <input type="checkbox"/> Asian                                     | <input type="checkbox"/> Client doesn't know |
| <input type="checkbox"/> Black or African American                 | <input type="checkbox"/> Client refused      |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |  |

### ETHNICITY

- |  |  |
|--|--|
| <input type="checkbox"/> Non-Hispanic / Non-Latino | <input type="checkbox"/> Client doesn't know |
| <input type="checkbox"/> Hispanic / Latino         | <input type="checkbox"/> Client refused      |

### GENDER

- |   |  |
|---|--|
| <input type="checkbox"/> Female                     | <input type="checkbox"/> Other _____         |
| <input type="checkbox"/> Male                       | <input type="checkbox"/> Client doesn't know |
| <input type="checkbox"/> Transgender male to female | <input type="checkbox"/> Client refused      |
| <input type="checkbox"/> Transgender female to male |  |

## DATA FOR ALL CLIENTS (CONTINUED)

### HEALTH INSURANCE

Is the client currently covered by health insurance?

No

Yes

Client doesn't know

Client refused



**[IF YES to "HEALTH INSURANCE"] Answer 'Yes' or 'No' for each health insurance source.**

Answer 'No' for sources that have been terminated, even if they were received in the past.

No	Yes	Source of non-cash benefit
<input type="checkbox"/>	<input type="checkbox"/>	Medicaid
<input type="checkbox"/>	<input type="checkbox"/>	Medicare
<input type="checkbox"/>	<input type="checkbox"/>	State Children's Health Insurance Program (or use local name)
<input type="checkbox"/>	<input type="checkbox"/>	Veteran's Administration (VA) Medical Services
<input type="checkbox"/>	<input type="checkbox"/>	Employer-Provided Health Insurance
<input type="checkbox"/>	<input type="checkbox"/>	Health insurance obtained through COBRA
<input type="checkbox"/>	<input type="checkbox"/>	Private Pay Health Insurance
<input type="checkbox"/>	<input type="checkbox"/>	State Health Insurance for Adults (or use local name)

### PHYSICAL DISABILITY

Does the client currently have a physical disability?

No

Yes

Client doesn't know

Client refused



**[IF YES to "PHYSICAL DISABILITY"] Is the physical disability expected to be of long-continued and indefinite duration and substantially impair the client's ability to live independently?**

No

Yes

Client doesn't know

Client refused

**[IF YES for physical disability] Is documentation of the disability and severity on file?**

No

Yes

**[IF YES for physical disability] Is the client currently receiving services/treatment for this disability?**

No

Yes

Client doesn't know

Client refused

## DATA FOR ALL CLIENTS (CONTINUED)

### DEVELOPMENTAL DISABILITY

Does the client currently have a developmental disability?

No

Yes

Client doesn't know

Client refused



**[IF YES for developmental disability] Is the developmental disability expected to substantially impair the client's ability to live independently?**

No

Yes

Client doesn't know

Client refused

**[IF YES for developmental disability] Is documentation of the disability and severity on file?**

No

Yes

**[IF YES for developmental disability] Is the client currently receiving services/treatment for this disability?**

No

Yes

Client doesn't know

Client refused

### CHRONIC HEALTH CONDITION

Does the client currently have a chronic health condition?

No

Yes

Client doesn't know

Client refused



**[IF YES to CHRONIC HEALTH CONDITION] Is the chronic health condition expected to be of long-continued and indefinite duration and substantially impair the client's ability to live independently?**

No

Yes

Client doesn't know

Client refused

**[IF YES for chronic health condition] Is documentation of the disability and severity on file?**

No

Yes

**[IF YES for chronic health condition] Is the client currently receiving services/treatment for this condition?**

No

Yes

Client doesn't know

Client refused

## DATA FOR ALL CLIENTS (CONTINUED)

### HIV/AIDS

Does the client currently have HIV/AIDS?

No  
 Yes

Client doesn't know  
 Client refused



**[IF YES for HIV/AIDS] Is HIV/AIDS expected to substantially impair the client's ability to live independently?**

No  
 Yes

Client doesn't know  
 Client refused

**[IF YES for HIV/AIDS] Is documentation of the disability and severity on file?**

No  
 Yes

**[IF YES for HIV/AIDS] Is the client currently receiving services/treatment for this condition?**

No  
 Yes

Client doesn't know  
 Client refused

### MENTAL HEALTH PROBLEM

Does the client currently have a mental health problem?

No  
 Yes

Client doesn't know  
 Client refused



**[IF YES for mental health problem] Is the mental health problem expected to be of long-continued and indefinite duration and substantially impairs the client's ability to live independently?**

No  
 Yes

Client doesn't know  
 Client refused

**[IF YES for mental health problem] Is documentation of the disability and severity on file?**

No  
 Yes

**[IF YES for mental health problem] Is the client currently receiving services/treatment for this condition?**

No  
 Yes

Client doesn't know  
 Client refused

## DATA FOR ALL CLIENTS (CONTINUED)

### SUBSTANCE ABUSE PROBLEM

Does the client currently have a substance abuse problem?

- |   |   |
|---|---|
| <input type="checkbox"/> No                       | <input type="checkbox"/> Both alcohol and drug abuse    |
| <input checked="" type="checkbox"/> Alcohol abuse | <input checked="" type="checkbox"/> Client doesn't know |
| <input type="checkbox"/> Drug abuse               | <input type="checkbox"/> Client refused                 |



**[IF YES for alcohol abuse, drug abuse, or both alcohol and drug abuse for substance abuse problem] Is the substance abuse problem expected to be of long-continued and indefinite duration and substantially impairs client's ability to live independently?**

- |   |  |
|---|--|
| <input type="checkbox"/> No             | <input type="checkbox"/> Client doesn't know       |
| <input checked="" type="checkbox"/> Yes | <input checked="" type="checkbox"/> Client refused |

**[IF YES for alcohol abuse, drug abuse, or both alcohol and drug abuse for substance abuse problem] Is documentation of the disability and severity on file?**

- |   |
|---|
| <input type="checkbox"/> No             |
| <input checked="" type="checkbox"/> Yes |

**[IF YES for alcohol abuse, drug abuse, or both alcohol and drug abuse for substance abuse problem] Is client currently receiving services/treatment for this condition?**

- |   |  |
|---|--|
| <input type="checkbox"/> No             | <input type="checkbox"/> Client doesn't know       |
| <input checked="" type="checkbox"/> Yes | <input checked="" type="checkbox"/> Client refused |

## DATA FOR HEADS OF HOUSEHOLD, ALL ADULTS AND UNACCOMPANIED YOUTH

Respond to the following questions for the head of household and each additional adult in the household. If the household is composed of an unaccompanied child, that child is the head of household. If the household is composed of two or more minors, data must be collected about the minor that has been designated as the head of household. A separate form should be included for each adult member of the household.

### HOUSING STATUS – RAPID RE-HOUSING ONLY

Housing status is only required to be collected by CoC Program-funded projects in those CoCs that are approved by HUD to serve clients who meet the definition of Homeless under Category 3 (homeless under other federal statutes). CoCs without the approval to serve clients who are homeless under Category 3 may still opt to have projects collect the Housing Status data element, but are not required to do so by HUD.

- |  |   |
|--|---|
| <input type="checkbox"/> Category 1 – Homeless                                   | <input type="checkbox"/> At-risk of homelessness* |
| <input type="checkbox"/> Category 2 – At imminent risk of losing housing         | <input type="checkbox"/> Stably housed            |
| <input type="checkbox"/> Category 3 – Homeless only under other federal statutes | <input type="checkbox"/> Client doesn't know      |
| <input type="checkbox"/> Category 4 – Fleeing domestic violence                  | <input type="checkbox"/> Client refused           |

\*At project entry, the category of At-risk of homelessness is only a valid response for clients being served by Homelessness Prevention or Coordinated Assessment projects.

### Is the Ct entering from a SAFE HAVEN, EMERGENCY SHELTER or PLACE NOT MEANT FOR HUMAN HABITATION?

- |                              |  |
|------------------------------|--|
| <input type="checkbox"/> No  | <input type="checkbox"/> Client doesn't know |
| <input type="checkbox"/> Yes | <input type="checkbox"/> Client refused      |

### If yes, start date of current episode?

		/			/				
Month		Day				Year			

### Regardless of where they stayed last night - Number of times the client has been homeless (i.e., on the street, in an emergency shelter, or safe haven) in the past three years including today

Note that only CoCs designated as High Performing Communities can use CoC Program funds to serve clients with a response of 0. HUD has not yet designated any High Performing Communities.

- |   |  |
|---|--|
| <input type="checkbox"/> 0 (not homeless – Prevention only) | <input type="checkbox"/> Client doesn't know |
| <input type="checkbox"/> 1 (homeless only this time)        | <input type="checkbox"/> Client refused      |
| <input type="checkbox"/> 2                                  |  |
| <input type="checkbox"/> 3                                  |  |
| <input type="checkbox"/> 4 or more                          |  |



### [IF '4 or more'] Total number of months homeless (i.e., on the street, in an emergency shelter, or safe haven) in the past three years

- |   |
|---|
| <input type="checkbox"/> If 0-12 months, specify #: _____ |
| <input type="checkbox"/> More than 12 months              |
| <input type="checkbox"/> Client doesn't know              |
| <input type="checkbox"/> Client refused                   |

**Length of Time Homeless - Status documented?**

- No
- Yes

Data for Head of household and other Adults (continued)

**VETERAN STATUS**

Veteran Status is only collected on heads of household who are 18 years of age and older, as well as all other adults in the household.

- No
- Yes
- Client doesn't know
- Client refused

**DISABLING CONDITION**

- No
- Yes
- Client doesn't know
- Client refused

**RESIDENCE PRIOR TO PROJECT ENTRY**

- Emergency shelter, including hotel or motel paid for with emergency shelter voucher
- Foster care home or foster care group home
- Hospital or other residential non-psychiatric medical facility
- Hotel or motel paid for without emergency shelter voucher
- Jail, prison, or juvenile detention facility
- Long-term care facility or nursing home
- Owned by client, no ongoing housing subsidy
- Owned by client, with ongoing housing subsidy
- Permanent housing for formerly homeless persons (such as CoC project; HUD legacy programs; or HOPWA PH)
- Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)
- Psychiatric hospital or other psychiatric facility
- Rental by client, no ongoing housing subsidy

- Rental by client, with VASH subsidy
- Rental by client, with GPD TIP subsidy
- Rental by client, with other ongoing housing subsidy
- Residential project or halfway house with no homeless criteria
- Safe Haven
- Staying or living in a family member's room, apartment, or house
- Staying or living in a friend's room, apartment, or house
- Substance abuse treatment facility or detox center
- Transitional housing for homeless persons (including homeless youth)
- Other: (Describe) \_\_\_\_\_
- Client doesn't know
- Client refused

**LENGTH OF STAY IN PREVIOUS PLACE**

- One day or less
- Two days to one week
- More than one week, but less than one month
- One to three months
- More than three months, but less than one year

- One year or longer
- Client doesn't know
- Client refused

**DOMESTIC VIOLENCE**

**Is client a domestic violence victim/survivor?**

- No
- Yes

- Client doesn't know
- Client refused



**[IF YES] When did the experience occur?**

- Within the past three months
- Three to six months ago (excluding six months exactly)
- Six months to one year ago (excluding one year exactly)

- One year ago or more
- Client doesn't know
- Client refused

## INCOME AND SOURCES

### Income from any source?

No

Yes



Client doesn't know

Client refused

**[IF YES] Answer Yes or No for each income source. If the response for a source is 'Yes', enter the monthly amount received based on current income. If unsure of the exact monthly amount, enter client's best estimate.**

Source of income	Receiving income from source?	If yes, monthly amount from source (round to nearest dollar)			
Earned income (i.e., employment income)	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Unemployment Insurance	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Supplemental Security Income (SSI)	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Social Security Disability Income (SSDI)	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
VA Service-Connected Disability Compensation	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
VA Non-Service-Connected Disability Pension	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Private disability insurance	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Worker's Compensation	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Temporary Assistance for Needy Families (TANF)	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
General Assistance (GA)	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Retirement Income from Social Security	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Pension or retirement income from a former job	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Child support	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Alimony or other spousal support	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
Other source If yes, specify	No	<input type="checkbox"/>			
	Yes	<input type="checkbox"/>	\$		. 0 0
<b>Total monthly income</b>	<b>Monthly income from all sources</b>		\$		. 0 0

## NON-CASH BENEFITS

Non-cash benefits from any source?

No

Yes

Client doesn't know

Client refused



**[IF YES] Answer 'Yes' or 'No' for each non-cash benefit source. (Answer 'No' for benefits that have been terminated, even if they were received in the past.)**

No	Yes	Source of non-cash benefit
<input type="checkbox"/>	<input type="checkbox"/>	Supplemental Nutrition Assistance Program (SNAP)
<input type="checkbox"/>	<input type="checkbox"/>	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
<input type="checkbox"/>	<input type="checkbox"/>	TANF Child Care services <i>(or use local name)</i>
<input type="checkbox"/>	<input type="checkbox"/>	TANF transportation services <i>(or use local name)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Other TANF-Funded Services <i>(or use local name)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Section 8, Public Housing, or other ongoing rental assistance
<input type="checkbox"/>	<input type="checkbox"/>	Temporary rental assistance
<input type="checkbox"/>	<input type="checkbox"/>	Other source: _____

# **APPENDIX E**

## **HMIS User Agreement**

**MONTGOMERY COUNTY  
DEPARTMENT OF HEALTH AND HUMAN SERVICES (MCDHHS)  
CONTINUUM OF CARE  
HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS)  
USER AGREEMENT  
Revised 08/01/2016**

**HMIS STATEMENT OF CONFIDENTIALITY AND REQUEST FOR HMIS USER**

Please complete the following:

Employee Name: \_\_\_\_\_  
(Please print clearly.)

Business Phone: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_  
\_\_\_\_\_  
(Please print complete address including city and zip code.)

Business Email Address: \_\_\_\_\_  
(Please print clearly.)

Training by:  Agency Trained (by Internal Staff)    or     DHHS Trained

Access Level:  Case Manager II     Agency Admin     System Admin II

Other Access Level: \_\_\_\_\_  
(Please see page 3 and print clearly.)

Agency and Provider Name: \_\_\_\_\_  
(Please see pages 3 to 6.)

**Important**

If you have any questions regarding the completion of this request, please contact the County's Helpdesk at 240-777-2828 or send an email to [HelpIT@MontgomeryCountyMD.gov](mailto:HelpIT@MontgomeryCountyMD.gov). After filling out this form, please attach in an email and send to [HelpIT@MontgomeryCountyMD.gov](mailto:HelpIT@MontgomeryCountyMD.gov).

**STATEMENT OF CONFIDENTIALITY**

I AGREE TO MAINTAIN THE STRICT CONFIDENTIALITY OF INFORMATION OBTAINED THROUGH the Montgomery County Department of Health and Human Services Continuum of Care, Homeless Management Information System. This information will be used only for legitimate client services and administration of the above named agency. Any breach of confidentiality will result in immediate termination of participation in the MCDHHS HMIS.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's/Executive Director's Signature

\_\_\_\_\_  
Date

## REQUEST FOR ACCOUNT

Each user requires a unique username and password, which is to be kept private. Use of another user's username (account) is grounds for immediate termination from the Montgomery's County Continuum of Care Homeless Management Information System.

### USER'S RESPONSIBILITY STATEMENT

Your username and password give you access to the Department of Health and Human Services homeless management information system. Initial each item below to indicate your understanding of the proper use of your username and password, and sign where indicated. Any failure to uphold the confidentiality standards set forth below is grounds for immediate termination from the Montgomery County's HMIS.

#### *Initial Only*

\_\_\_\_\_ I understand that I must abide by all protocols outline in the HMIS Policy and Procedure Manual.

\_\_\_\_\_ I understand that I must take all reasonable means to protect personal information that is in hard copy format, including, but not limited to, reports, data entry forms, and signed consent forms.

\_\_\_\_\_ I understand those hard copies of HMIS information must be kept in a secure file.

\_\_\_\_\_ I understand that once the hard copies of HMIS are no longer needed, they must be properly destroyed to maintain Confidentiality.

\_\_\_\_\_ I understand that I must take all reasonable means to protect personal information that is stored within the application, including, but not limited to, a network, desktop, laptop, and external storage drive.

\_\_\_\_\_ I understand that I must take all reasonable means to keep my password physically secure.

\_\_\_\_\_ I understand that my username and password are for my use only and should not be shared with any other user.

\_\_\_\_\_ I understand that the only individuals who can view HMIS information are authorized users and the clients to whom the information pertains.

\_\_\_\_\_ I understand that I may only view, obtain, disclose, or use the database information that is necessary in performing my job.

\_\_\_\_\_ I understand that these rules apply to all users of the DHHS HMIS whatever their work role or position.

\_\_\_\_\_ I understand that if I notice or suspect a security breach, I must immediately notify DHHS HMIS Administrator.

**I understand and agree to the above statements.**

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please fax this form back to:**

HMIS Administrator  
240-777-1575

-----  
To be completed by the HMIS Administrator:

1. Verified user was HIPAA trained. [ ] Yes [ ] No
2. Verified user was Agency or DHHS application trained. [ ] Yes [ ] No
3. Added user's business email to the HMIS Outlook distribution list. [ ] Yes [ ] No
4. Submitted Helpdesk Ticket to create County ID. [ ] Yes [ ] No [ ] N/A-User is an employee or onsite contractor.

**User ID (Assigned by MCDHHS):** \_\_\_\_\_

**HMIS Admin Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## SERVICEPOINT USER ACCESS LEVEL CHART

Note: Case Manager II will have permission to "Allow User to Back-date Releases of Information" and "Allow User to create/edit Client Infractions".

	Resource Specialist I	Resource Specialist II	Resource Specialist III	Volunteer	Agency Staff	Case Managers I & II	Agency Administrator	Executive Director	System Operators	System Administrator I	System Administrator II
<b>ClientPoint</b>											
Profile				X	X	X	X	X		X	X
Assessments						X	X	X		X	X
Case Notes						X	X	X		X	X
Case Plans						X	X	X		X	X
Service Records				X	X	X	X	X		X	X
<b>ServicePoint</b>											
Referrals				X	X	X	X	X		X	X
Services Provided					X	X	X	X		X	X
<b>ResourcePoint</b>	X	X	X	X	X	X	X	X	X	X	X
<b>ShelterPoint</b>				X	X	X	X	X		X	X
<b>Reports</b>											
<i>Audit Reports</i>											
Client/Service Information											X
User Information			X				X	X	X	X	X
Client/Service Access Information											X
<i>Provider Reports</i>											
Client Served						X	X	X		X	X
Daily Bed Report			X			X	X	X		X	X
HUD 40118 APR						X	X	X		X	X
Outstanding Referrals			X			X	X	X		X	X
Service Transaction						X	X	X		X	X
Needs Report						X	X	X		X	X
<i>ReportWriter</i>						X	X	X		X	X
<b>Administration</b>											
Add/Edit Users							X	X	X	X	X
Reset Passwords							X	X	X	X	X
Add Provider			X						X	X	X
Edit Provider		#	X				#	#	X	X	X
Delete Provider		%	X				%	%	X	X	X
Agency News		X	X		X	X	X	X	X	X	X
System Wide News			X						X	X	X
Picklist Data									X	X	X
Licenses									X	X	X
Assessment Admin									X	X	X
Shadow Mode											X
System Preferences											X

X: Users have access to this section of ServicePoint.

%: Users can neither delete the provider they belong to, nor any of their parent providers.

#: Users cannot edit their parent provider, they may edit their provider or child providers only.

### SERVICEPOINT AGENCY AND PROVIDER CHART

Select one of the Providers as your Primary and mark it with an “X”.

Also place an “X” in the Enter Data As column for all other Providers you need access to.

Parent Provider	Provider Name	Mark the Providers You Need Access to	
		Primary (Choose 1)	Enter Data As Access
Bethesda Cares Agency	Bethesda Cares, Inc		
Bethesda Cares Agency	Critical Care Intervention (Bethesda Cares) SSO		
Bethesda Cares Agency	Veterans Rapid Re-Housing Program – RRH – FAM		
Bethesda Cares Agency	Veterans Rapid Re-Housing Program – RRH – IND		
Catholic Charities Services, Inc.	Bethesda House		
Catholic Charities Services, Inc.	Chase Partnership House (CC)		
Catholic Charities Services, Inc.	Dorothy Day Place		
City of Gaithersburg	City of Gaithersburg-Up County-Outreach Services		
City of Gaithersburg	DeSillum House		
City of Gaithersburg	Housing Initiative Program-Individual (City of Gaithersburg)		
City of Gaithersburg	Housing Initiative Program - Service Coordination (City of Gaithersburg)		
City of Gaithersburg	Wells Robertson House		
Community Clinic, Inc. Agency	Community Clinic, Inc.		
Community Ministries of Rockville	Jefferson House		
Community Ministries of Rockville	Mansfield Kaseman Health Clinic		
Community Ministries of Rockville	Rockland House		
Department of Health Human Services	Arcola Transitional Families		
Department of Health Human Services	Assertive Community Treatment (PEP) SSO		
Department of Health Human Services	Clinical Assessment and Transition Services (CATS)		
Department of Health Human Services	Community Case Management		
Department of Health Human Services	Core Services Agency - PATH (DHHS-BH)		
Department of Health Human Services	Crisis Center		
Department of Health Human Services	Gaynor Transitional - Families		
Department of Health Human Services	Fleet TH-FAM		
Department of Health Human Services	Housing Initiative Program-Family (DHHS)		
Department of Health Human Services	Housing Initiative Program-Individual (DHHS)		
Department of Health Human Services	Housing Stabilization Services-Assessment Only		









# **APPENDIX F**

## **HMIS User Deactivation**

**MONTGOMERY COUNTY  
DEPARTMENT OF HEALTH AND HUMAN SERVICES (MCDHHS)  
CONTINUUM OF CARE  
HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS)  
USER DEACTIVATION FORM  
Revised 08/13/2013**

**Please complete the following for the account deactivation:**

**Employee Name:** \_\_\_\_\_  
(Please print clearly.)

**ServicePoint Login ID:** \_\_\_\_\_  
(Please print clearly.)

**Agency Name:** \_\_\_\_\_  
(Please print clearly.)

**Supervisor's/Executive Director's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Important**

Per the Agency Participation Agreement, please note this form must be completed within 1 business day after a user is no longer affiliated with your Agency.

If you have any questions regarding the completion of this request, please contact the County's Helpdesk at 240-777-2828 or send an email to [HelpIT@montgomerycountymd.gov](mailto:HelpIT@montgomerycountymd.gov).

After filling out this form, please either scan and email it to the email above or fax it back to HHS IT at 240-777-1575.

-----  
To be completed by the HMIS Administrator:

**User ID Deactivated:** \_\_\_\_\_

**HMIS Administrator Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# **APPENDIX G**

## **DTS Computer Security Guideline**

# **Computer Security Guideline**

**Updated September, 2004  
Department of Technology Services**

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## 1. SCOPE

The scope of this Computer Security Guideline includes all County owned or controlled computers (PCs, laptops, PDA's, servers, mini-computers, mainframe computers), all County owned or leased buildings, all data stored on those devices, all printouts, disks, tapes, or other media produced by those devices and all licensed software used on those devices. In addition, this Computer Security Guideline includes communications links to contractors and business partners and extensions of the County's computer network.

This Computer Security Guideline applies to all County employees, contractors, volunteers and persons legitimately affiliated with the County government for the efficient exchange of information and the completion of assigned responsibilities.

## 2. OVERVIEW

This Computer security Guideline reflects accepted security controls taken from respected security and audit publications and adapted to Montgomery County's technical environment. These data security guidelines and standards have been developed to protect Montgomery County Government's electronic data assets from theft, destruction, and unauthorized use, modification, or disclosure. The loss of these assets could be very costly and disruptive to the County government. In today's computing environment, security controls are a necessity. The citizens of this County will expect us to do what is prudent to protect the computing assets purchased with their tax dollars. Data is one of the most valuable assets of the County government. End-user computing dramatically increases the exposure for theft, corruption, loss, and misuse of County information resources since a significantly larger number of people have access to data and data security controls. A significant percent of direct access storage device capacity is installed outside the Computer Center. Security is an issue that cuts across all computing and organizational tiers. The implementation of security policies and procedures requires cooperation among users, managers, information systems personnel, security and audit personnel and top management.

Access to the entire County's computing and communication resources is to be controlled based on the needs of the County and used for official County business only. Connection and access to computing resources is controlled through unique user identification (user-ids) and authentication (passwords). Each individual granted this privilege is responsible and accountable for work done under their unique identifier.

Computer users will be given access to a copy of the latest version of the Computer Security Administrative Procedure, this guideline, and the *Internet, Intranet, & Electronic Mail Administrative Procedure*. Individuals must adhere to the policies and are responsible for having the latest version of the Administrative Procedure. Refer to the *Internet, Intranet, & Electronic Mail Administrative Procedure* for additional information related to use of the Internet.

### **3. RESPONSIBILITIES**

All Montgomery County Government computing and communication hardware, software, and data is considered to be “owned” by the Montgomery County Government.

The Department of Technology Services (DTS), in accordance with Montgomery County code section 2-58D, is responsible for protecting the integrity of the telecommunications network backbone, for operation and maintenance and security administration of the “enterprise” servers, mainframe and for maintaining the Computer Security Administrative Procedure and these guidelines. DTS is responsible for insuring that computer connections between County departments and with other government agencies are accomplished securely and as authorized.

Management in each department is responsible for ensuring that these computer security guidelines are enforced on the computing resources in their department. These security guidelines will be enforced for employees as well as for contractors and volunteers. Department management is responsible for providing pertinent information and notifying the DTS Security Team if a serious security breach occurs such as an intrusion, theft, or damage of computing resources. The operation, maintenance and security of de-centralized computing resources is the responsibility of department management in accordance with these guidelines.

The Local Area Network (LAN) administrator or decentralized IT staff is responsible for implementing the computer security guidelines described in this document on the servers in their department. LAN administrators will contact DTS network management for allocation of IP addresses.

As a user of data or computing resources or a custodian of those assets, everyone is responsible for data security.

### **4. PHYSICAL SECURITY**

#### **4.1 Guideline**

Physical access to servers, individual PCs, and minicomputers will be protected from unauthorized persons. Personnel will not be put at risk of bodily harm.

#### **4.2 Environmental Requirements and Recommendations:**

A safe environment must be provided. Fire detection and suppression, and power and air conditioning are examples of the computer environmental protection and safety systems that must be provided.

- Areas with critical computer equipment must be equipped with fire and smoke alarms, and fire extinguishers.
- Critical equipment should be stored in a location that minimizes or prevents water damage due to leaking or flooding.
- Tall and top-heavy items must be stored in a manner anchored at to prevent damage or physical tipping.
- Items on wheels must have locking mechanisms to prevent rolling.

All equipment is to be maintained in a clean environment that meets or exceeds the manufacturer specifications related to temperature and humidity. Equipment areas should be kept free of obstructions. The cleanliness, environmental protection and safety systems are to be regularly monitored, and periodic inspections by qualified personnel should be scheduled. Electrical protection must be provided. Computer systems should have uninterruptible power supplies (UPS) and/or surge suppressors. All electrical wiring must meet state and local building codes. Preventive maintenance on computer and communications must be regularly scheduled. Preventive maintenance as defined by the manufacturer will help ensure that the risk of failure is minimized.

All new computer or communications centers must be located in an area unlikely to experience natural disasters, serious or man-made accidents, and related problems. New and remodeled facilities must be constructed to protect against fire, water damage, vandalism, and other threats that may occur. The location of multi-computer or communications facilities should be selected to minimize risk of damage. Locating such facilities above the ground floor will minimize the chances of water damage and theft. Kitchen facilities also must be located away from, but not directly above or below computer facilities. Due to potential water damage, restroom facilities should not be located directly above these facilities. Computer facilities should not be located adjacent to an exterior wall to protect the systems from unauthorized electromagnetic eavesdropping and damage from bombs.

DTS can provide the needed facilities more economically than creating a new computer center. If a new computer center needs to be created, contact the manager of the DTS computer center for requirements assistance. Local laws and ordinances must be considered when designing these locations.

#### **4.3 Access to Work Areas:**

Access to all buildings, computer labs, offices, and work areas containing computer-related equipment must be physically restricted and controlled. Access to servers and wiring closets must be restricted. Only authorized personnel will have access to wire closet/server areas. Authorized persons may include:

- DTS staff
- Outside contractors hired to work in these areas
- Building services and office staff at locations trained to reset equipment
- Fire and/or rescue personnel

Access to computer equipment must be supervised. Access to offices, computer rooms, and work areas containing sensitive information must be physically restricted. Managers responsible for employees working in these locations must determine the appropriate access controls. All multi-user computer and communications equipment such as file servers, labs, and wiring closets must be located in locked rooms to prevent unauthorized usage.

Access to Server Centers or Network Operations Centers (NOCs) is restricted. Only employees whose job responsibilities require access to the client server center will be granted access. The supervisor of a server center or NOC is responsible for authorizing entrance and maintaining a list of those authorized to enter the facility.

Access to magnetic tape, disk, and documentation libraries must be restricted to employees whose responsibilities require access to them. The magnetic tape, disk, and documentation libraries housed within the controlled areas of the Server Center require additional precautions. This access is controlled by the supervisor of the Server Center. Employees are not to permit unknown or unauthorized persons to enter restricted areas as they enter and exit these areas. Physical access controls for County buildings are intended to restrict the entry of unauthorized persons, and employees are expected to help restrict such access.

#### **4.4 Removal of Equipment:**

Permission to remove computers or related equipment may be granted only for accepted business purposes. Permission to remove computer equipment must be approved by the director of the department owning the equipment and the reason for lending the equipment must be put in writing stating the reason for which the equipment is loaned. Equipment being removed for needed repairs has implied permission when DTS approved repair processes are followed and a receipt is retained for the equipment.

PC equipment must not be moved or relocated without prior authorization from the appropriate management and/or DTS technical support staff. PC workstations, printers, peripherals, file servers, and electronics are examples of PC equipment covered by this requirement.

All County property must be returned when employees, consultants, or contractors terminate their relationship with County or with a specific work location within the County. It is the responsibility of the supervisor to collect County property from an employee leaving their location. Personnel terminating County employment or moving from one work location to another must inform their supervisor/administrator regarding County property they possess, and building access privileges.

When a computer support employee is involuntarily terminated, due care must be taken. Upon involuntary termination, the employee is to be immediately relieved of all duties and must return all County equipment and information. Their network accounts are to be immediately disabled and they are to be supervised while packing their belongings and leaving County facilities.

A sign-out procedure, approved by department management, must be utilized for laptop computers if there is a shared pool of laptops.

Montgomery County is not responsible for maintenance, damage or loss of personally owned computers or peripherals in the work place.

#### **4.5 Personnel Security**

Employees should contact building security if they feel threatened, harassed, or afraid of bodily harm.

Personnel will immediately contact building security if a person:

- becomes unruly
- refuses to leave
- poses a threat to employees, property, or equipment

In the case of an emergency, Montgomery County Police should be immediately contacted or dial 911. This is judgment decision based on the severity of the threat. If in doubt, contact the police first then building security

#### **4.6 Disaster Recovery**

A detailed disaster recovery plan must be developed by each department that has a LAN or mini-computer. This plan will detail procedures to follow in the event of the loss of computing hardware, software and/or data. DTS must prepare, periodically update, and regularly review information technology emergency response plans for the DTS data center and for communications systems. The disaster recovery plan must provide for the continued operation of critical systems in the event of an interruption or degradation of service; must allow all critical computer and communication systems to be available in the event of a major loss, such as a flood, earthquake, or tornado; must prioritize the sequence of critical systems being recovered. This plan must be practiced at least once a year; this practice will include restoring data from backup media to insure that restoration procedures are known and to verify the integrity of the backup media. Each test must be followed by a report, and detail the test results, plus any remedial actions taken. The department can evaluate the effectiveness of the plan and make adjustments as appropriate to accomplish the desired goals. The manager of the DTS data center can provide a comprehensive sample of a disaster recovery plan

A business continuity analysis will also be conducted by those responsible for their department computing equipment that identifies the procedures that need to be in place in order to ensure that critical operations could continue in the event of a disaster which destroys their computing capabilities. The conditions that warrant a disaster declaration and the persons responsible for this decision will be specified.

Departments wishing to be supported by the DTS in the event of an emergency or disaster must implement hardware, software, policies, and related procedures consistent with DTS standards. DTS staff is available to work with offices to ensure compliance with DTS standards.

Backup medium must be erased by following the *Data Backup* section in this guideline.

The communications networks should be designed without a single point of failure whenever possible, such as a central switching center, which could affect the availability of network services.

A backup of system wide critical information and software is to be stored in a physically separate, environmentally controlled facility. This facility is to be at least five miles from the site where original copies reside. Additionally, all current supporting materials such as manuals, charts, and diagrams needed for disaster recovery will be housed at the same facility. Supporting materials include anything required by County departments or units that are necessary to maintain day-to-day mission critical operations until recovery. Contact the DTS data center manager for information on the facility used by the data center for backups.

#### **4.7 Emergency Shutdown Procedures**

A detailed plan will be developed by each department with their own LAN or Mini-computer to shut down each device in a computer center quickly in the event of an emergency. Emergencies can include fire, loss of environmental controls, computer virus outbreak, natural disasters, etc. The goal is to preserve County resources in an emergency without subjugating the operator to undue risk. Contact the DTS data center manager for a sample of this plan. The DTS security manager or the director of the affected department can make this determination and contact the appropriate department management personnel to implement the emergency shutdown procedures when warranted by the circumstances. This kind of emergency will require every effort to shut down the computing equipment. Unplug the equipment from the County network if shutdown is not possible.

## **5. DATA SECURITY**

### **5.1 Guideline:**

Employees that are permitted access to computer systems must follow guidelines in order to insure that restricted access is maintained. Users of the computer systems will only have the minimal access needed to perform their tasks. Attempts to bypass security procedures to gain unauthorized access to computer resources are unacceptable and may result in disciplinary action. See section 3 paragraph 5 for information regarding disciplinary action.

### **5.2 Password and user-id Information:**

Meaningful passwords will be used to protect access to County networked computer systems (LANs, mini-computers, PCs. Unused and default or installation user-ids will be disabled. Use of powerful user-ids such as those with system administrator attributes will be restricted.

Passwords provide a basic first-level security for restricting access to computer resources. To protect County computer resources properly, passwords are required to access all networked computer systems. Passwords will be simple enough to memorize but unique enough to remain secret. Passwords will not be attached to a terminal or other public place where they are easily compromised. Passwords will not be associated with the current date or a person's name, hobby, or family. Good passwords are not found in the dictionary, contain numeric as well as alphabetic characters, and will be at least eight characters in length. Passwords will not be imbedded in user's automatic sign-on procedures unless approved by that department's management for procedures where it is required. Passwords cannot be changed in less than 2 days.

A maximum of ninety days between password changes is required for network, server and mini-computer access. The change interval for power on passwords for PCs, if used, is at each department's discretion. Where possible, password change will be controlled automatically by security software. Passwords will be individually maintained to ensure confidentiality and individual accountability. Passwords will not be shared with others. If multiple people must share a user-id and password for a sound business reason, refer to the exception procedures in section 8 of this document. If it becomes necessary to give your password to a technical person to fix a problem you are experiencing, the password will be changed immediately after the problem is solved. An account will be suspended after no more than five invalid password attempts in a given day and remain suspended until an administrator can reactivate it. Passwords will not be reused for at least four password cycles. A user-id will be suspended after twelve months of non-use.

Access to computer resources will be terminated immediately for employees who leave County employment or when their responsibilities no longer require them to access those resources. Access will also be terminated immediately for contractors no longer requiring access to County computer resources. Department coordinators are responsible for deleting user-ids of people who have terminated, transferred out of the department, or no longer require computer access. If the department coordinator does not have access rights in order to remove or disable the account, then the coordinator must contact the DTS Security Office and E-messaging Directory Services Team.

Computer system security will prevent a user-id from being logged on in more than two different places at the same time. Just one user-id per computer platform will be assigned to an individual. System privileges, such as supervisory or system administrator attributes are sensitive and are restricted to designated LAN or minicomputer system administrators. When the use of sensitive system privileges is necessary by others (for example, during an on-site visit by field service engineers), the privilege will be immediately removed or the user-id disabled after the user is finished with the specific task.

DTS will test password quality on a periodic basis. If a password is found to be weak, the user will be required to change it.

### **5.3 Protection of Sensitive Information**

Sensitive information includes criminal justice, payroll/personnel, client or patient information and any other data considered confidential by law or departmental policy. Sensitive information will not be stored on a PC unless PC security software has been installed on that PC. Sensitive information should be stored on the mainframe or network server where better security is available to protect the integrity of this information. Access to this information will be restricted to those who have to use it. Examples of information that will be protected from unauthorized access include: word processing documents containing sensitive material, which can be locked (password protected);

source code for programs, which can be protected using a source code management tool; databases, which can use built-in security controls; and production files downloaded from the mainframe or server, which can be protected in a directory where limited access is permitted.

Sensitive information stored on computer diskettes, tapes or printout will be locked in a secure area when not in use and deleted, reformatted or shredded when no longer needed.

The same level of security will be maintained across the various computer platforms (mainframe, mini, LAN or individual PC). If a sensitive file located on the mainframe computer is downloaded to an individual PC, that information on the PC will be protected from unauthorized access in an equivalent manner as it is on the mainframe.

PC's and terminals will not be left unattended with the results of a query containing sensitive information displayed on the screen. If this is necessary, a screen locking feature that blanks the screen until the correct password is entered will be used. Sensitive printouts will not be left on an unattended printer.

Special care will be given for laptop or portable PC's. If possible, sensitive information will be stored on diskettes rather than the hard drive and in a separate secure location from the laptop. Some sensitive information may need to be encrypted in order to ensure adequate security. A power on password will be used. If the PC is lost or stolen, departmental security personnel and the DTS Security Team will be notified immediately, and a complete accounting of what was on that PC will be made.

If possible, unauthorized attempts to access sensitive information will be logged and kept for a period of at least one year. This is information that may be used as evidence in a criminal proceeding and must be protected.

Do not disclose user-ids, passwords or other sensitive information to anyone without verifying their authorization to have this information.

The following statement is wording that will be displayed to users before they are granted computer access. This warning banner will appear each and every time that someone logs into a County computer:

*UNAUTHORIZED ACCESS TO THIS NETWORK DEVICE IS PROHIBITED. You must have explicit permission to access or configure this device. All activities performed on this device may be logged, and violations of this policy may result in disciplinary action and may be reported to law enforcement. There is no right to privacy on this device.*

#### **5.4 Data Backup:**

Data and files that are crucial to the department's operations will be backed up and the retention of at least the last three copies is highly recommended. The frequency of backup is to be commensurate with the frequency of change and the criticality of recovering the lost data in a timely manner. Some data may need to be backed up daily; monthly backups in other cases may be sufficient. When possible, backups will be automated and take place during off-peak hours.

All archival back-up data that is stored off-site must be listed in a current log that shows the date when the information was last modified, as well as the content of the information. All media used to store sensitive, valuable, or critical information for longer than six months must not be subject to rapid degradation. This information must be copied to newer media when the time limits suggested by the manufacturer are exceeded.

Offsite storage facilities will be utilized for copies of backup files containing programs, data or transactions representing current County business that, if lost or destroyed, would be difficult or impossible to recreate. All backups will be retained a minimum of four weeks and at least two copies will be kept in offsite storage. Longer retention periods should be considered based on business requirements. Offsite storage facilities will also be utilized for files containing data with retention requirements imposed by county, federal or state government. Magnetic storage media provided by the offsite storage or disaster recovery facility for the purpose of restoring Montgomery County information will be thoroughly erased after being used. This may be done by programs designed to erase sensitive information or by reformatting the media at least 7 times.

Additional protections, such as mirror disks, RAID technology, and hardware redundancy should be used as appropriate for mission critical applications. Contact the DTS data center manager if you need assistance in setting up backup/restore procedures or need offsite storage procedures

## **5.5 Virus Control**

Virus controls are necessary to prevent the spread of computer viruses to other computers in the network. Virus eradication can be very time consuming and result in the loss of service to the citizens of Montgomery County.

Software not purchased by the County (e.g. software from bulletin boards, software from home computers or any other computer or network), when allowed by County and department policy, will be checked for viruses before use. This includes diskettes, CD-ROMs and information downloaded from the Internet or other on-line services. Information downloaded to the hard drive will be checked immediately upon completion of the download. Diskettes and CD-ROMs received from other departments or agencies or from companies doing business with the County will be checked before use.

All those responsible for departmental computer resources will update those resources with anti-virus signatures on a minimum weekly basis and upgrade to the most current anti-virus release as it becomes available. All PC's and servers that are connected to the county network must have DTS approved, centrally administrated anti-virus software installed and running using a DTS approved configuration. Automatic updates will be utilized if available. Contact the DTS Client Computer Services (DCM) if information is needed on anti-virus software. When DTS issues a security alert and specifies that virus signatures must be updated immediately, those responsible for departmental computer resources must comply.

## **5.6 Software Security Upgrades**

Vendors publish patches and upgrades to their software when they discover security flaws that could allow computer security to be compromised. The DTS Security Team may provide information about enterprise software security issues and patches as available and appropriate.

Because these flaws pose a significant threat, critical security patches for internal computer systems must be applied in a maximum of 30 days after public release. For systems containing sensitive information or are accessible via the Internet, critical security patches must be applied within 7 days of public release. Automatic updates will be utilized if available. If alerted of a specific critical threat that could severely affect County resources, the DTS Security Office may issue a mandatory, short time frame alert to computer administrators to patch specific computer resource in order to reduce the risk of network down time.

Non-critical security patches must be applied to all systems within 90 days of public release.

If, due to incompatibility or other issues, a critical security patch cannot be applied, an exception report must be sent in writing to the DTS Security Office.

On a regular basis, the DTS Security Office will verify software revision and patch levels for all County systems. Refer to the *Vulnerability Assessment and Remediation* section for details.

## **6. NETWORK SECURITY**

### **6.1 Guideline:**

Access to or from the County network is only permitted for authorized employees and other County approved agencies.

### **6.2 Remote Dial-in Access to County Computer Resources:**

Access to remote network services will be in accordance with the *Internet, Intranet, & Electronic Mail Administrative Procedure*. Approval from the department management and the DTS Security Office will be obtained if a user requires a modem at their workstation for remote access. Modems attached to PC's that are connected to a County network can be very risky and will not be authorized unless DTS-approved security measures are implemented. Unauthorized modems attached to PCs or servers that are connected to a County network are prohibited. If remote access from a County owned PC using an attached modem is required, that PC will be disconnected from all LANs or networks. Refer to the *Internet, Intranet, & Electronic Mail Administrative Procedure* document.

### **6.3 Access from Remote Networks to County Computer Systems**

Access from a remote site to any Montgomery County computer resource will be approved by the employee's Department head or designee and by the DTS Security Office. All remote access systems used to access County computing resources will be approved by the DTS Security Office prior to purchase, installation, or connecting to County resources. Access and security system information must not be disclosed to any 3<sup>rd</sup> party.

Employees who need remote access to any County computer resources will submit a request in writing to the DTS Security Office stating what the access is to be used for, how long the access is required, and approval from the responsible department official. Contact the DTS Security Office to obtain information and approval for secure remote access options including, but not limited to, VPN, and wireless methods. Modems attached to County computer systems that allow remote access is not an approved remote access method. The list of authorized remote access users will be reviewed periodically by the LAN or mini computer administrator to determine continued need for such access and accuracy of the list. If remote access is no longer required, that access will be terminated.

LAN and mini computer administrators will maintain a log of unsuccessful attempts to access County computers. This log will be maintained for one year.

Encryption of any County-owned data is required if it is to be transmitted over public phone lines, the Internet, or wirelessly. County approved remote access solutions already use encryption.

#### **6.4 Contractor Remote Access**

All contractors will meet the same security requirements detailed in this and all other related County documents. The contractor will agree to, and is responsible for, maintaining compliance with all County security policies. Virtual Private Network (VPN) is the current approved remote access method. The sponsoring Department head or designee and the DTS Security Office will approve the remote access request.

The department whose contractor requires remote access to the County's network will present a written justification to the DTS Security Office. All plans for establishing remote access will be approved by the DTS Security Office in advance of implementation. These plans will include at least the following:

- Type of access
- When and how long access will be required
- Security procedures (how contractor access will be controlled)

All contractors requiring access will sign non-disclosure statements and agree to abide by all County security policies and procedures prior to receiving access.

#### **6.5. Extended Networks**

Extended Networks are permanent or semi-permanent physical extensions of the County's computer network to a non-County facility and used by non-County employees to access County computer resources.

All network extensions to a contractor or business partner facility will meet the same security requirements detailed in this and all other related County documents. The Contractor/Business Partner (C/BP) will agree to, and is responsible for, maintaining compliance with all County security policies.

The Department requesting the extended network will present a written justification to the DTS Security Office for granting a C/BP access to the County's network from a remote location.

The C/BP will provide a secure link (e.g., T-1) between the C/BP site and the County's Computer Center. All plans for establishing a link will be approved by the DTS Security Office in advance of installation. These plans will include the following:

- Type of connection
- How long connection will be required
- Hours of operation
- Number and type of workstations and servers at remote location
- Physical security plan
- Security Procedures (including keeping all security systems up-to-date)
- Anti-virus procedures
- Whether Internet access is required for any workstations

The process of disconnecting the C/BP once the connection is no longer needed

All material submissions mentioned above will be submitted by the Contractor / Business Partner to the County Department requesting the extended network, which will coordinate reviews and approvals with the DTS Security Office.

The C/BP will maintain all security provisions, detailed in this guideline, while the remote location is connected to the County network. All employees that have access will sign non-disclosure statements, receive security training, and agree to abide by all County Security Policies and procedures (sign County security agreement), prior to receiving access. All training materials will be approved by the DTS Security Office in advance.

A list of employees with authorized access will be kept up to date and provided in a monthly report to the DTS Security Office. Requests for additional staff access will be approved by the DTS Security Office or County contract administrator prior to granting the access.

The C/BP will permit the DTS Security Office to inspect the remote location without notice, at any time. This may include technical security scanning of the C/BP network segment and any system connected to it.

The C/BP network segment, defined as all workstations, servers, and network equipment connected to the County, will not also be connected to any other network (including the C/BP own internal network). Remote access to the C/BP network segment will NOT be permitted; dial-in or dial-out will not be allowed.

Failure to maintain full compliance with the County's security policies will result in immediate termination of the connection, and may be cause for cancellation of any contract between the County and the C/BP.

## **6.6 Vulnerability Assessment and Remediation**

System/network administrators need to have a vulnerability assessment performed against their assets on a bi-yearly basis. All aspects of this guideline will be evaluated for risk assessment. The security manager will determine the exact schedule. The security manager may also define any additional security assessments other than those described here. In cases where networks reside behind firewalls, multiple assessments should be conducted from both the internal and external sides (or all sides) of the firewalls.

The security manager will be responsible for conducting scans against common infrastructure. The security manager may also conduct scans at random intervals provided that this activity doesn't interfere with business operations. In cases where loss of services might occur, the security manager will coordinate with the appropriate administrators/authorities prior to the assessment.

System/network administrators will only be allowed to scan segments that they're responsible for. Also, the security manager will determine what signatures and scanning methods will be allowed. If sufficient controls do not exist, then the security manager will conduct a scan on behalf of the administrator.

As a general rule, if a vulnerability assessment reveals high-risk vulnerabilities, administrators will have one week to make appropriate changes. Medium-risk vulnerabilities will be addressed within one month. The security manager will coordinate with administrators to adjust this timeline as necessary. If no working patch or configuration change exists or if it will cause an extended or re-occurring stop to business operations, the security manager will evaluate any alternatives or provide a waiver. If high risk vulnerabilities are not remediated within the allotted time, the system may be disconnected from the network. In any case, the security manager will be available to assist administrators in developing remediation solutions. Notify the security manager with results of the vulnerability assessment.

All system or network installations must be reported to the security manager prior to implementation. This should include the following:

- New or changed network access points (RAS, VPN, wireless, etc.)
- New or changed network segments
- New or changed business applications
- New or changed application/network servers

New installations must meet County Computer Security Administrative Procedure and be scanned for vulnerabilities using tools approved by the DTS Security Office prior to implementation.

## **6.7 802.11 wireless access**

All wireless access points must be approved by the network manager or the security manager. A secure setup on these devices is critical and must be performed by the network team. All other wireless access points connecting to the County network are not permitted. Any existing wireless access points not setup by the network team must be disconnected immediately and the network manager notified to secure the wireless access appropriately.

## **7. CONDUCT AND USE**

### **7.1 Guideline:**

County computer systems should only be used in a legal manner.

### **7.2 Use of County Computer Resources**

All use of computer facilities, networks, and technology resources are for County business purposes. Each user of these technology systems is accountable for using these systems responsibly, following all policies, regulations, security requirements, and laws.

As such, all electronic mail messages, files on personal computers or servers, or any information stored on or transmitted by County computers are subject to be reviewed, copied, stored, archived, and monitored for violation of policies, regulations, and local, state or federal laws.

### **7.3 Adherence to Software Copyrights**

No unauthorized copies of licensed software may be made or used. It is a violation of copyright and trade secret laws and licensing agreements to make or use unauthorized copies of any licensed software. An inventory of all software will be made periodically to determine if the software is properly licensed. Automated tools such as software metering may be used to ensure compliance with license agreements. If illegal copies of software are found, they are to be deleted from the system immediately or properly licensed to protect the County from litigation. This discovery and deletion will be documented.

### **7.4 Security Measures**

Users are not to disable or modify security measures installed on any computer for any reason without permission from the appropriate staff. Security measures include such things as menu software, operating systems settings, and anti-virus software. If it is necessary to disable security to perform a hardware or software installation, security measures must be reactivated when installation is complete.

## **8. EXCEPTIONS**

### **8.1 Guideline:**

Exceptions to any of these guidelines must be approved by the department management and the DTS Security Office. Exceptions will be directed to DTS Security Office by departmental management, in writing or via email, for prompt consideration. A detailed description of the exception will be included as well as the business purpose for this exception and what additional precautions that could be taken to reduce the risk to the County network if the exception is granted. An example of additional security precautions may include restricting internet access and eliminating floppy disk and CD drives on the PC or disconnect from the County network.

There are some older computer platforms in use in the County which lack the capability to implement some of the security procedures outlined in this document. Upgrades or replacements to these computer platforms will be purchased as soon as possible and until this occurs all sensitive information will be moved off these computers. These system exceptions must be documented in writing to the DTS Security Office.

### **9.0 Guideline Updates**

### **9.1 Guideline:**

The Computer Security Guidelines must be changeable as the need arises.

# **APPENDIX H**

## **Client Delete Request Form**

**MONTGOMERY COUNTY  
DEPARTMENT OF HEALTH AND HUMAN SERVICES (MCDHHS)  
CONTINUUM OF CARE  
HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS)  
CLIENT DELETE REQUEST POLICY**

The purging of a client from HMIS may occur in one of two ways:

1. **Deletion:** The client record is marked as “inactive” removing the client from all stock reports as well as the client search population, but the client remains in the database and their information can be accessed through custom reports generated in Report Writer or in the Business Objects Advanced Reporting Tool (ART).
2. **Removal:** The client record is completely taken out of the database by the software vendor and is no longer accessible or restorable.

**REASONS FOR POLICY:**

1. As the HMIS ADMINISTRATOR implementation goes forward situations may arise that necessitate the purging of a client and his/her information from the HMIS ADMINISTRATOR database. These reasons include:
  - a. For added security when a client is in danger.
  - b. To correct an accidental duplicate entry and other data entry errors.
  - c. In response to a client request.
2. Since multiple providers may be involved in the use and updating of a single client record, it is necessary that the deletion/removal of a client record be coordinated so that one provider does not inadvertently delete/remove the data of another provider.

**STATEMENT OF POLICY:**

1. The safety and well being of the client will supersede other considerations in all decisions regarding the deletion/removal of client records from the HMIS database.
2. Except for reasons of client safety and the proper correction of data entry errors, the deletion or removal of client records from the database is discouraged.
3. When deletion or removal is deemed necessary, every effort will be made to identify, notify, and consult with affected providers prior to the deletion/removal.

**PROCEDURE:**

1. For correction of duplicate client entry and other data entry errors.
  - a. When purging for error correction, the deletion method (as opposed to removal) will

be utilized in all situations.

b. If after creating a new client, a user discovers that the client already existed in the database, the user should notify the HMIS Administrator. In situations where the duplicate entry is discovered after a long period of time (over 30 days), and after entry of assessment data into the duplicate entry, the user should consult with the HMIS Administrator to determine which other providers have edited the record and how the error can best be corrected. In general, for this type of error, deletion should be used only when the error cannot be effectively and practically corrected by editing or other correction methods.

**2. When a client is in danger.**

a. There are several functionalities built into ServicePoint to provide additional security

for clients who are in danger of physical attack or abuse. These include the unnamed client feature, closing the client profile, and the anonymous functionality all of which are available and are preferable to deleting/removing the client record.

b. In extreme cases however, and where a client comes into danger after significant

data has been entered, it is sometimes necessary to delete or remove the client from the database for their protection.

c. Any decision to delete/remove for security/safety reasons should be made in consultation with the DHHS HMIS Contract Monitor(s).

d. When a client is purged for security/safety reasons, the HMIS Administrator will identify and notify any/all provider(s) that are affected.

**3. Removal at the requests of the client.**

a. In general, client requests for having their record deleted or removed should be discouraged unless for valid reasons of safety/security.

b. Deletion/removal at the request of a client may result in an inability for that client to receive future services.

c. When a client requests deletion/removal for invalid reasons, they should be presented with the option of closing the client profile as a viable alternative.

d. Any decision to purge the record at a client's request should be made in consultation

with the System Admin I and with the HMIS Administrator.

e. When a client is deleted or removed at a client's request, the HMIS Administrator will

identify and notify any/all provider(s) affected.

f. In cases where removal is provided for invalid reasons, HMIS Administrator reserves

the right to pass on the costs associated with such removal.



# **APPENDIX I**

## **HMIS Data Quality Standards**

**MONTGOMERY COUNTY, MARYLAND (MCMD)  
CONTINUUM OF CARE (CoC)  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS)  
DATA QUALITY STANDARDS**

Although there are many aspects of good quality data, the key indicators commonly are:

**Validity**

All data items held on HMIS application computer systems must be valid. Where codes are used, these will comply with national standards or map to national values. Wherever possible, the HMIS application is programmed to only accept valid entries.

**Completeness**

All mandatory data items must be completed. Use of default codes should only be used where appropriate, and not as a substitute for real data.

**Consistency**

Client's entry date should match the date of enrollment into supportive services only, emergency shelter, transitional shelter, and permanent supportive housing program. For outreach providers entry date should match the initial date of engagement. Exit dates should match the date the client leaves the program. The APR Entry Assessment, which includes the 2010 HUD Universal Data Elements, must be collected at program entry and updated weekly. Additional assessments may be required at entry dependent on program type. APR Exit Assessment must be completed upon program exit. The HMIS Application is monitored daily to ensure no client is enrolled in multiple residential programs at the same time.

**Coverage**

Data will reflect all the work done by the end users of the HMIS application. Client intake, shelter stay, and services should all be recorded. Correct procedures are essential to ensure complete data capture.

**Accuracy**

Data recorded in notes and on computer systems must accurately reflect self-reported information from the client. Every opportunity should be taken to check client's demographic details with the client themselves. Inaccurate demographics may impact service delivery and create duplicate records. The accurate recording of data items must however not be allowed to delay urgent treatment of the client.

**Timeliness**

Data must be entered into the HMIS Application within two (2) business days of client report. Recording of timely data is beneficial to providing services to the client.

Last Updated: January 2014

## Chapter 4

### ESTABLISHING PREFERENCES AND MAINTAINING THE WAITING LIST

[24 CFR Part 5, Subpart D; 982.54(d)(1); 982.204, 982.205, 982.206]

#### INTRODUCTION

It is the PHA's objective to ensure that families are placed in the proper order on the waiting list and selected from the waiting list for admission in accordance with the policies in this Administrative Plan.

This chapter explains how the Public Housing Authority (PHA) will administer its consolidated waiting list for all of its housing programs, including the tenant-based and project-based voucher waiting lists, hereinafter referred to as the consolidated list or master list. The tenant-based waiting list has four local preferences that the PHA has adopted to meet local housing needs, define the eligibility criteria for the preferences, and explain the PHA's system of applying them. The waiting list for housing subsidized with project-based vouchers will be maintained as a sub list within the consolidated list. Any family selected to be housed utilizing a project-based voucher is only eligible for a specific bedroom sized unit based on family size.

By maintaining an accurate waiting list, the PHA will be able to perform the activities which ensure that an adequate pool of qualified applicants will be available so that program funds are used in a timely manner. Each family on the tenant-based waiting list may also have its name on the project-based waiting list.

#### A. MANAGING THE WAITING LIST

##### **Opening and Maintaining the List**

Opening of the waiting list will be announced with a public notice stating that applications for public housing, Housing Choice Voucher and all other waiting lists maintained by the **Housing Opportunities Commission of Montgomery County (HOC)** will again be accepted. The public notice will state where, when, and how to apply. The notice will be published in a local newspaper of general circulation and also by any available minority media, including social media. The public notice will state any limitations on who may apply. Waiting lists for all sub-jurisdictions and Countywide will be opened and closed at the same time.

The notice will state that applicants already on waiting lists for other housing programs must apply separately for this program and such applicants will not lose their place on other waiting lists when they apply for public housing. The notice will include the Fair Housing logo and slogan, and will be in compliance with Fair Housing requirements.

HOC intends for the waiting list to remain open indefinitely; however, if the Executive Director decides to close the list, the closing of the waiting list will also be announced with a public

notice. This public notice will state the date the waiting list will be closed, and it will be published in a local newspaper of general circulation and by any available minority media, including social media.

### **Organization of the Waiting List**

Effective July 2015, the Housing Opportunities Commission will merge its existing sub-jurisdictional waiting lists for the Housing Choice Voucher program and all other housing programs into one combined waiting list referred to herein interchangeably as merged list, master list, merged master list, or waiting list, except as specifically noted.

In conjunction with the merging of all of the Housing Opportunity Commission's waiting lists, the Housing Opportunities Commission will open its merged master waiting list for all programs, and leave the merged list open indefinitely or until such time as a determination is made by the Executive Director that there is cause to close the waiting list, at which time proper notice will be posted in a local newspaper of general circulation and by any available minority media, including social media.

Only one application may be submitted and it must be submitted by the head of household or his/her designee.

The waiting list will be maintained in accordance with the following guidelines:

1. The application will be a permanent file. Any contact between the Housing Opportunities Commission and the applicant will be documented in the electronic applicant file.
2. All applications will be maintained in order of date and time of application, and applicable preference(s).
3. Under the merged waiting list, one master list will be maintained electronically through a proprietary program. All applications and updates to an application must be submitted electronically through a proprietary on-line web portal. Paper and telephone submissions will not be permitted. To the extent an applicant requires assistance, upon request, staff from the Housing Opportunities Commission will be available to assist with electronic submissions.
4. All applicants must give notice of any changes to their application within two weeks of a change. Changes include: change of mailing address, change of email address, change of phone number, change in family composition, change in income, or changes in factors affecting preference points. As noted in paragraph 3, all changes must be done electronically because paper and telephone submissions will not be accepted. To the extent an applicant requires assistance, upon request, staff from the Housing Opportunities Commission will be available to assist with electronic update submissions.

5. The master waiting list will be updated daily and placement on the list can be retrieved via the internet on a 24-hour basis.
6. For the first 365 days following the opening of the waiting list, selection from the waiting list will continue to be by random lottery. Thereafter, all selections will occur based on a combination of date-time order and listed preferences on the respective master waiting list. HOC will send a notice to all applicants informing them of when the random lottery system will be discontinued and when the date-time stamp selection system will be implemented.
7. The Housing Opportunities Commission will maintain one merged master list in order of date-time and any applicable preference(s). However within the master list there will be sub-sorted separate lists for certain programs and properties.
8. The Housing Opportunities Commission has entered into HAP contracts to subsidize units at several properties that are operated by third party managers and/or owners. Individual, property-specific waiting lists for these properties will be included within the master list but will be sorted separately to only reflect applicants who satisfy the various property and programmatic eligibility criteria. More specifically, the details regarding these property-specific waiting lists are as follows:
  - i. The Housing Opportunities Commission will maintain separate lists for Arcola Towers, Elizabeth House, Holly Hall, and Waverly House, which are public housing facilities operated for the benefit of the senior and/or the disabled.
  - ii. The Housing Opportunities Commission has entered into a HAP contract to subsidize units at Emory Grove, Ken-Gar, Parkway Woods, Sandy Spring Meadow, Seneca Ridge, Town Centre Place, and Washington Square as required as part of the Rental Assistance Demonstration (RAD) program, and will require Housing Choice Vouchers. These individual lists created for these RAD properties will be included in the merged master list but sorted separately to reflect only those applicants who may be eligible for these properties.
  - iii. The Housing Opportunities Commission has entered into HAP contracts to subsidize units at several properties that are managed by third party managers and/or owners. These properties provide supportive services to at-risk populations in the form of Housing Choice Vouchers. Applicants for these programs must meet stringent requirements and will be ranked by date and time of application only, and sorted separately to only reflect applicants who qualify for these specific properties.
9. Any contact between the Housing Opportunities Commission and the applicant will be documented in the applicant's file.

## **B. FAMILIES**

All applicants are required to maintain an e-mail address. To the extent an applicant chooses to use the e-mail address of another person, the applicant is solely responsible for receiving information sent to the listed email address and lack of access to that account shall not be considered a valid excuse for missing notices. To the extent a family does not have an e-mail address, the Housing Opportunities Commission can assist the family in obtaining a free email account. The applicant is responsible for notifying the Housing Opportunities Commission of any change in their e-mail address. The Housing Opportunities Commission maintains public use computers at all of its HUB locations. Public use computers are also widely available at other public locations such as local libraries. To the extent an applicant requires assistance, upon request, staff from the Housing Opportunities Commission will be available to assist with electronic submissions and may issue postcard notification of the need to certify continued interest in housing programs.

## **C. WAITING LIST** [24 CFR 982.204]

### **Tenant-Based Voucher**

The PHA uses a consolidated waiting list for the admission of all of its housing programs. The consolidated list will include a sub list for admissions to the tenant-based voucher assistance program of the Housing Opportunities Commission of Montgomery County, Maryland.

Except for Special Admissions, applicants will be selected from the consolidated waiting list in accordance with the policies, preferences, and income targeting requirements defined in this Administrative Plan.

The PHA will maintain information that permits proper selection from the waiting list.

The waiting list contains the following information for each applicant listed:

- Applicant Name
- Family Unit Size (number of bedrooms family qualifies for under PHA subsidy standards)
- Date of application
- Qualification for any local preference
- Racial or ethnic designation of the head of household
- Targeted program qualifications

## **Project-Based Voucher**

The PHA will create separate sub lists for admissions to the project-based voucher assistance program of the Housing Opportunities Commission of Montgomery County, Maryland. Any applicant that submits an application to the master waiting list will be considered for inclusion on the project-based voucher waiting list.

Except for Special Admissions, applicants will be selected from the PHA waiting list in accordance with the policies, preferences, and income targeting requirements defined in this Administrative Plan.

Families will be selected from the project-based voucher waiting list based on the bedroom size of the unit available at the time of selection.

The PHA will maintain information that permits proper selection from the waiting list.

The waiting list contains the following information for each applicant listed:

- Applicant Name
- Family Unit Size (number of bedrooms family qualifies for under PHA subsidy standards)
- Date of application
- Qualification for any local preference
- Racial or ethnic designation of the head of household
- Targeted program qualifications

### **D. SPECIAL ADMISSIONS** [24 CFR 982.54(d)(e), 982.203]

If HUD awards a PHA program funding that is targeted for specifically named families, the PHA will admit these families under a Special Admission procedure.

Special admissions families will be admitted outside of the regular waiting list process. They do not have to qualify for any preferences, nor are they required to be on the program waiting list. The PHA maintains separate records of these admissions.

The Family Unification Program (FUP) qualifies for special admissions as long as the individuals referred to HOC meet the program definition.

Family Unification Program-Eligible Family (A family that the Public Child Welfare Agency (PCWA) has certified as a family for whom a lack of adequate housing is a primary factor in the imminent placement of the family's child, or children, in out-of-

home care, or in the delay of discharge of a child, or children, to the family from out-of-home care, and that the HOC has determined is eligible for a Housing Choice Voucher.)

Family Unification Program-Eligible Youth (A youth that the Public Child Welfare Agency (PCWA) has certified to be at least 18 years old and not more than 21 years old (has not reached his/her 22<sup>nd</sup> birthday) who left foster care at age 16 or older and who does not have adequate housing, and that HOC has determined is eligible for a Housing Choice Voucher.)

The following are examples of types of program funding that may be designated by HUD for families living in a specified unit.

1. A family displaced because of demolition or disposition of a public or Indian housing project;
2. A family residing in a multifamily rental housing project when HUD sells, forecloses or demolishes the project;
3. For housing covered by the Low Income Housing Preservation and Resident Homeownership Act of 1990;
4. A family residing in a project covered by a project-based Section 8 HAP contract at or near the end of the HAP contract term; and
5. A non-purchasing family residing in a HOPE 1 or HOPE 2 project.

Applicant's who are admitted under Special Admissions, rather than from the waiting list, are identified in the PHA's database with special codes.

At turnover:

If a voucher issued to an FUP-eligible family or FUP-eligible youth under the FUP program is terminated, the voucher will be reissued to the extent practicable, to another FUP-eligible family or FUP-eligible youth. If the award on turnover is not practicable, FUP vouchers may be used by HOC for such families based upon local needs.

If a client served through Special Admissions in the FUP program is on an HOC Program Admissions Waiting List (Tenant Based Voucher or Project Based Voucher), the client will remain eligible on the waiting list for the period of time the list is active. If a client is selected from the Program Waiting List and utilizes the voucher, the FUP voucher will be reissued, to the extent practicable, to another FUP-eligible family or FUP-eligible youth.

#### **E. WAITING LIST PREFERENCES [24 CFR 982.207]**

When a family appears to be near being offered a unit, the family will be invited to an interview and the verification process will begin. It is at this point in time that the family's waiting list preference(s) will be verified. To qualify for the preference, an applicant must provide verification that shows he or she qualified either at the time of the initial application or at the time of selection from the waiting list, however, placement based upon preference is dependent on the family still qualifying for the preference.

If the family no longer qualifies to be near the top of the list, because the family does not qualify for a preference, then the family's preference status will be removed. Importantly, however, the family will remain on the waiting list based upon their original date and time of application. The Housing Opportunities Commission must notify the family in writing of this determination and give the family the opportunity for an informal hearing to appeal the decision.

Once the preference has been verified, the family will complete a full application, present Social Security number information, citizenship/eligible immigrant information, and sign the Consent for Release of Information forms.

An applicant will not be granted any Local preference for the tenant-based and project-based voucher waiting lists if any member of the family has been evicted from housing assisted under a 1937 Housing Act program during the past three years because of drug-related criminal activity or felonious charged criminal activity.

The PHA will grant an exception to such a family if:

- The responsible member has successfully completed a rehabilitation program.
- The evicted person clearly did not participate in or know about the drug-related activity.
- The evicted person no longer participates in any drug related criminal activity.

If an applicant makes a false statement in order to qualify for a Local preference, the PHA will deny the Local preference.

#### **F. LOCAL PREFERENCES** [24 CFR 5.410]

The PHA will offer public notice when changing its preference system and the notice will be publicized using the same guidelines as those for opening and closing the waiting list.

The PHA uses the following Local Preference system:

**First Local Preference – Displacement:** Families who are displaced as a result of a State or County redevelopment project, or a change in the nature of a project that is part of the County plan for maintaining affordable housing, and who are referred by the County Executive's Office. A signed certification from the County Executive's office is required for the family to qualify for this preference. [Two Points]

**Second Local Preference – Residency preference** for families who live, work, or have a bona fide offer to work in Montgomery County. To qualify for this preference, evidence is required either at the time of application or at the time of selection from the waiting list. HOC will treat graduates of, or active participants in, education or training programs in Montgomery County as residents of Montgomery County if the education or training program is designed to prepare individuals for the job market. To qualify and satisfy this preference, graduates must have graduated after the initial application for housing. [One Point]

**Third Local Preference** – HUD funded 2006 Main Stream Disabled (MSD) program; 15 units. [Two Points]

**Fourth Local Preference** – Veterans: Preference is given for ten (10) veterans and their families. The applicant must be at least 18 years old and a veteran.

HOC will verify the preference with a list of homeless veterans and their families provided by the Montgomery County Department of Health and Human Services (DHHS). [Three Points]

### **Treatment of Single Applicants**

Single applicants will be treated as any other eligible family on the waiting list for the tenant-based and project-based voucher waiting lists.

### **G. INCOME TARGETTING**

In accordance with the Quality Housing and Work Responsibility Act of 1998, each fiscal year the PHA will reserve a minimum of seventy-five (75) percent of its Section 8 new admissions for families whose incomes do not exceed thirty (30) percent of the area median income (AMI). HUD refers to these families as “extremely low-income families.” The PHA will admit families who qualify under the Extremely Low-Income limit to meet the income targeting requirement, regardless of preference. This policy applies to the tenant-based and project-based voucher waiting lists.

The PHA’s income targeting requirement does not apply to low-income families continuously assisted, as provided for under the 1937 Housing Act.

The PHA is also exempted from this requirement where the PHA is providing assistance to low income or moderate-income families entitled to preservation assistance under the tenant-based voucher program as a result of a mortgage prepayment or opt-out.

### **H. INITIAL DETERMINATION OF LOCAL PREFERENCE QUALIFICATION**

[24 CFR 5.415]

At the time of application, an applicant's entitlement to a Local Preference may be made on the following basis:

An applicant's certification that they qualify for a preference will be accepted without verification at the initial application. When the family is selected from the waiting list for the final determination of eligibility, the preference will be verified. To Qualify for the preference, an applicant must provide verification that shows he or she qualified either at the time of the initial application or at the time of certification.

If the preference verification indicates that an applicant does not qualify for the preference, the applicant will be returned to the waiting list (tenant-based or project-based) without the Local Preference, and given an opportunity for a meeting.

**I. TARGETED FUNDING** [24 CFR 982.203]

When HUD awards special funding for certain family types, families who qualify are placed on the regular waiting list. When a specific type of funding becomes available, the tenant-based and project-based voucher waiting lists are searched for the first available family meeting the targeted funding criteria. The PHA reserves the right to use this assistance under the “Interim Use” policy. [See Glossary under “Interim Use” for definition].

Applicants who are admitted under targeted funding which are not identified as a Special Admission are identified by codes in the automated system. The PHA has the following "Targeted" Programs:

- Veterans Affairs Supportive Housing (VASH)
- Mainstream Allocation Plan for Persons with Disabilities
- Shelter Plus Care
- Welfare-to-Work
- Voucher allocation for Non-Elderly Persons with Disabilities in Support of Designated Housing Plans

For any Voucher allocation for Non-Elderly Persons with Disabilities (NED) in Support of Designated Housing Plans, the PHA will identify a non-elderly disabled family, as defined by HUD, on the PHA’s waiting list that will not be housed due to an approved or submitted Designated Housing Plan.

At turnover:

If a voucher issued to a FUP-eligible family under the 2008 FUP program is terminated, the voucher will be reissued, to the extent practicable, to another FUP eligible family. If the award on turnover is not practicable, FUP vouchers may be used by HOC for such families based upon local needs.

Re-issuance upon turnover of vouchers in the Non-Elderly Persons with Disabilities in Support of Designated Housing Plans 2008 allocation will be to Non-Elderly Persons with Disabilities on the waiting list.

**J. PREFERENCE AND INCOME TARGETING ELIGIBILITY** [24 CFR 5.410]

**Change in Circumstances**

Changes in an applicant's circumstances while on the waiting list may affect the family's entitlement to a preference. Applicants are required to update their on-line application when their circumstances of change.

**Cross-Listing of Different Housing Programs and Section 8** [24 CFR 982.205(a)]

The PHA will maintain a consolidated master waiting list for all of its housing programs. An applicant will be considered for admission to any program for which they are eligible until such time that documentation is presented that establishes a client in ineligible for a housing program(s). If a client is determined to be ineligible for the voucher program, their application will be maintained on the consolidated waiting list so that they may continue to be considered for other opportunities.

**Other Housing Assistance** [24 CFR 982.205(b)]

Other housing assistance means a federal, State or local housing subsidy, as determined by HUD, including public housing.

The PHA may not take any of the following actions because an applicant has applied for, received, or refused other housing: [24 CFR 982.205(b)]

- Refuse to list the applicant on the PHA waiting list for tenant-based voucher assistance;
- Deny any admission preference for which the applicant is currently qualified;
- Change the applicant's place on the waiting list based on a preference, date of application, or other factors affecting selection under the PHA selection policy; or
- Remove the applicant from the waiting list.

However, the PHA may remove the applicant from the waiting list for tenant-based assistance if the PHA has offered the applicant assistance under the voucher program.

**K. ORDER OF SELECTION** [24 CFR 982.207(e)]

The PHA's method for selecting applicants from a preference category leaves a clear audit trail that can be used to verify that each applicant has been selected in accordance with the method specified in the Administrative Plan.

**Tenant-Based Voucher Waiting List**

**Local Preferences**

The PHA has selected the following system to apply local preferences:

Local preferences will be aggregated using the following system:

Each preference will receive an allocation of points. The more preference points an applicant receives, the higher the applicant's position on the waiting list.

### **Among Applicants with Equal Preference Status**

Among applicants with equal preference status, the tenant-based voucher waiting list will be organized by the lottery selection process for the first 365 days after the wait list is opened in the summer of 2015. Thereafter, applicants with equal preference status on the tenant-based voucher waiting list will be organized by date and time stamp.

### **Project-Based List**

The PHA has selected the following system to apply local preferences:

Local preferences will be aggregated using the following system:

Each preference will receive an allocation of points. The more preference points an applicant receives, the higher the applicant's position on the waiting list.

The project-based voucher sub list will be organized by family size and the corresponding bedroom size as follows:

- One and two person families are eligible for a one-bedroom unit.
- Three and four person families are eligible for a two bedroom unit.
- Five and six person families are eligible for a three bedroom unit.
- Seven and eight person families are eligible for a four bedroom unit.

Exceptions to this policy will be made in accordance with HOC's policies of reasonable accommodation for persons with disabilities.

The number of persons per bedroom is subject to compliance with the Montgomery County Code, Chapter 26-5, Space, Use and Location. Paragraph (b) of Chapter 26-5 is shown below:

b) *Floor area, sleeping.* In every dwelling unit of 2 or more rooms, every room occupied for sleeping purposes by one occupant must contain at least 70 square feet of habitable space, and every room occupied for sleeping purposes by more than one occupant must contain at least 50 square feet of habitable space for each occupant. However, in a mobile home every room occupied for sleeping purposes by one occupant must contain at least 50 square feet of habitable space; by 2 occupants, at least 70 square feet of habitable space; and by more than 2 occupants, at least an additional 50 square feet of habitable space for each additional occupant."

Among Applicants with equal preference status, the project-based voucher waiting list will be organized by the regular date-time selection process for each bedroom size.

## **L.1 PROJECT-BASED VOUCHER REFERRALS**

Applicants referred to HOC for housing subsidy through Project-Based Vouchers by way of Offender Reentry programs sponsored by the Silver Spring Interfaith Housing Coalition and Threshold Services, Inc. will be granted an eligibility criminal background exception. The participant does not have rights to the HOC Grievance Procedures.

The eligibility exception would not be extended to the following individuals:

1. Persons convicted of manufacturing or producing methamphetamine;
2. Any person having been evicted from federally assisted housing for a serious violation of the lease (for three years following the eviction);
3. Any person who fails to sign and submit consent forms to obtaining information in accordance with the Administrative Plan Part 5, subparts B and F;
4. Any person required under HUD regulation to establish citizenship or eligible immigration status;
5. Any person subject to a life time registration requirement under a state sex offender registration program; and
6. Any persons convicted for violent felonies.

## **L.2 PROJECT-BASED VOUCHER REFERRALS**

In an effort to minimize displacement of families, if a unit that is to be included in the Project-Based Voucher contract is occupied by an eligible family, the in-place family must be placed on the program waiting list. When eligibility is determined, the family must be given an absolute selection reference and referred to the project owner for an appropriately size Project-Based Voucher contract.

A preference will be extended through the Project-Based Voucher program (only) for services offered. In selecting families, the Housing Opportunities Commission may give a preference to disabled families who need services offered at a particular project. This preference (more specifically a referral) is limited to the population of families with disabilities that significantly interfere with their ability to obtain and maintain themselves in housing who, without appropriate supportive services, will not be able to maintain themselves in housing.

Selection of applicants in the targeted funding Family Unification Program (FUP) 2008 allocation will be completed in conjunction with referrals from Montgomery County Health and Human Services. HOC will accept families certified by the MCHHS as eligible applicants for FUP. HOC will compare the names provided with the names on the current HOC waiting list.

Any referred family on the HOC waiting list will be served first. Those families referred and not on the HOC waiting list will be added to the waiting list and served based on date of referral or on a first come first served basis.

**M. FINAL VERIFICATION OF PREFERENCES** [24 CFR 5.415]

Preference information on pre-applications will be updated as applicants are selected from the waiting list. At that time, the PHA will obtain necessary verifications of preference(s) at the interview and by third party verification.

**Subsection A – Secondary Review/Credit Checks**

Before issuing vouchers to applicant families, the Housing Authority requests a credit report of all new applicant families, all adults (persons 18 years of age and older) who will reside in the assisted household. The credit report will be reviewed by the Housing Authority. Applicant households claiming they have zero income will automatically undergo a credit check review. The information contained in the credit check will be used to confirm the information provided to the Housing Authority by the family. Specially, the credit report will be used to confirm:

1. **Employment:** A credit report will list any employers the applicant has listed in any recent credit applications. If the credit report reveals employment for any adult household member within the last 12 months that was not disclosed, the family will be asked to provide additional documentation to resolve the discrepancy. Failure to disclose current employment may result in denial of participation in the Housing Choice Voucher and Section 8 programs.
2. **Aliases:** A credit report can provide information on other names that have been used for the purposes of obtaining credit. Common reasons for use of other names include a recent marriage or a divorce. If an alias has not been disclosed to the Housing Authority, the family will be asked to provide additional evidence of the legal identity of all adult family members.
3. **Current and previous addresses:** A credit report can provide a history of where the family has lived. This is particularly important because the Housing Authority provides a residency preference. If the family has provided one address to the Housing Authority and the credit report indicates a different address, the family will be asked to provide additional proof of residency. This may include a history of utility bills, bank statements, school enrollment records for children, credit card statements, or other relevant documentation. Failure to provide adequate proof could result in denial of the residency preference.
4. **Credit card and loan payments:** A credit report will usually include a list of the family's financial obligations. Examples of the items that may show up include car loans, mortgage loans, student loans and credit cards payments. The Housing Authority will review this information to confirm the income and asset information provided by the family. If the family's current financial obligations

(total amount of current monthly payments) exceed the amount of income reported by the family, the Housing Authority will ask the family to disclose how they are currently meeting their financial obligations. Accounts that have been charged off or are significantly delinquent are not included in this calculation. Failure to provide adequate proof of income could result in denial of participation in the Housing Choice Voucher and Section 8 programs.

5. **Multiple Social Security Numbers:** A credit report may list multiple Social Security numbers if an adult family member has used different Social Security numbers to obtain credit. If the credit report information does not match the information provided by an adult family member, the family member or head of household will be required to obtain written confirmation of the Social Security number that was issued to him/her from the Social Security Administration.

A family will not be issued a voucher until all discrepancies between the information provided by the applicant family and the information contained in the credit report have been cleared by the applicant family and approved by the Housing Authority.

When discrepancies are found, the family will be contacted by the Housing Authority. In most cases, the family will be allowed a maximum of ten (10) business days to provide the additional information. On a case-by-case basis, as a reasonable accommodation, the family may be granted additional time. If additional time is granted, the family receives written notification of the new deadline. No second or additional extensions will be granted. Failure to provide the required information to the Housing Authority could result in denial of participation in the Housing Choice Voucher and Section 8 Programs.

When the credit report reveals multiple discrepancies which require interview appointments, the Housing Authority will schedule up to two interview appointments. An additional appointment may be scheduled as a reasonable accommodation. Failure to appear at the interview session could result in denial of participation in the Housing Choice Voucher and Section 8 Programs.

#### **N. PREFERENCE DENIAL** [24 CFR 5.415]

If the PHA denies a preference, the PHA will notify the applicant in writing of the reasons why the preference was denied and offer the applicant an opportunity for an informal review. If the preference denial is upheld as a result of the review, or the applicant does not request a review, the preference will be removed from the applicant's entry on the waiting list, returning the applicant to their regular date-time positioning. Applicants may exercise other rights if they believe they have been discriminated against.

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

#### **O. REMOVAL FROM THE WAITING LIST AND PURGING** [24 CFR 982.204(c)]

The Housing Opportunities Commission will not remove an applicant's name from the waiting list unless:

1. The applicant requests in writing that their name be removed;
2. The applicant fails to respond to an electronic or written request for information or a request to declare their continued interest in the program; or
3. The applicant does not meet either the eligibility or suitability criteria for the program.
4. The applicant refuses two housing units without good cause.

### **Obligation to Annually Confirm Application Information**

Each year, or at such time as the Housing Opportunities Commission determines reasonable, the Housing Opportunities Commission will issue notice to all applicants requesting that each applicant update their application information. Failure to update the information in a timely manner will result in removal from the waiting list.

The Housing Opportunities Commission will provide notice to update the information and set a date by which that information must be updated or confirmed as having not changed. The Housing Opportunities Commission will send notices thirty days, fifteen days, five days, and one day prior to the date when that update or confirmation is due.

All notices under this Section shall be sent by the Housing Opportunities Commission electronically to the last known e-mail address and by SMS text to the mobile number listed on the application. To the extent a family does not have an e-mail address, the Housing Opportunities Commission can assist the family in obtaining a free email account. It will be the applicant's sole responsibility to check that email account from time to time and to respond to any email and SMS text from the Housing Opportunities Commission. To the extent an applicant requires assistance, upon request, staff from the Housing Opportunities Commission will be available to assist with electronic submissions and may issue postcard notification of the need to certify continued interest in housing programs.

**Should an applicant not respond to the request for updated information or to their selection for the program for any reason, prior to the established deadline, the applicant will be deleted from the waiting list. Reasons for non-response, resulting in deletion from the list, include (but are not limited to) negligence in completing the electronic update/application in a timely manner and relocation resulting in a return of the e-notice to the Housing Opportunities Commission with no forwarding e-mail address provided.**

### **Missed Appointments**

All applicants who fail to keep a scheduled appointment with the Housing Opportunities Commission will be sent a written notice of termination of the process for eligibility. That written notification of termination may be sent as an attachment to an e-mail.

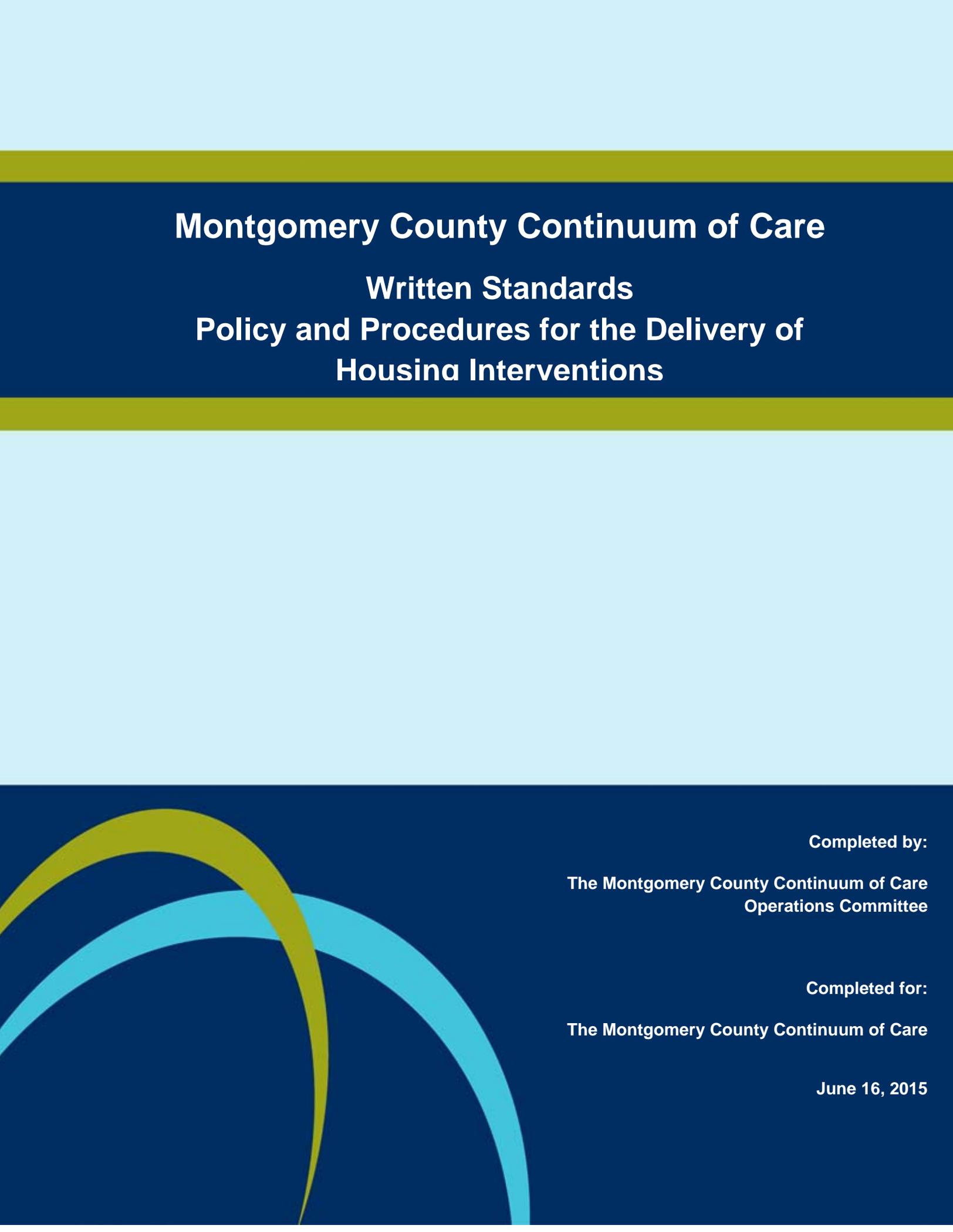
The Housing Opportunities Commission will allow the family to reschedule for good cause. Generally, no more than one opportunity will be given to reschedule without good cause, and no more than two opportunities will be given for good cause. When good cause exists for missing an appointment, the Housing Opportunities Commission will work closely with the family to find a more suitable time. Applicants will be advised of their right to an informal review before being removed from the waiting list.

### **Notification of Negative Actions**

Any applicant whose name is being removed from the waiting list will be notified by the Housing Opportunities Commission, in writing, that they have ten (10) calendar days from the date of the written correspondence to present mitigating circumstances or request an informal review. The letter will also indicate that their name will be removed from the waiting list if they fail to respond within the timeframe specified. The Housing Opportunities Commission system of removing applicant names from the waiting list will not violate the rights of persons with disabilities. If an applicant claims that their failure to respond to a request for information or updates was caused by a disability, the Housing Opportunities Commission will verify that there is in fact a disability, that the disability is what caused the failure to respond, and then provide a reasonable accommodation. An example of a reasonable accommodation would be to reinstate the applicant on the waiting list based on the date and time of their original application.

### **Purging the Waiting List**

The Housing Opportunities Commission will update and purge its waiting list as needed to ensure that the pool of applicants reasonably represents the interested families for whom the Housing Opportunities Commission has current information, i.e. applicant's address, family composition, income category, and preferences.



**Montgomery County Continuum of Care**  
**Written Standards**  
**Policy and Procedures for the Delivery of**  
**Housing Interventions**



**Completed by:**

**The Montgomery County Continuum of Care  
Operations Committee**

**Completed for:**

**The Montgomery County Continuum of Care**

**June 16, 2015**

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## Regulatory Requirement and Background

The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 reauthorized the McKinney-Vento Homeless Assistance programs. Through the enactment of the HEARTH Act, the Department of Housing and Urban Development (HUD) published the new Continuum of Care (CoC) Program interim rule.<sup>1</sup> The CoC Program interim rule requires that the CoC must establish and consistently follow written standards for providing CoC assistance, in consultation with recipients of the Emergency Solutions Grant program. At a minimum, these written standards must include:

- Policies and procedures for evaluating individuals' and families' eligibility for assistance in the CoC Program
- Policies and procedures for determining and prioritizing which eligible individuals and families will receive assistance for permanent supportive housing assistance, transitional housing assistance, and rapid re-housing assistance

The goals of the written standards are to:

- Establish community-wide expectations on the operations of projects within the community
- Ensure that the system is transparent to users and operators
- Establish a minimum set of standards and expectations in terms of the quality expected of projects
- Make the local priorities transparent to recipients and subrecipients of funds
- Create consistency and coordination between recipients' and subrecipients' projects within the Montgomery County CoC

The Montgomery County CoC agrees that these standards must be applied consistently across the entire Montgomery County CoC's defined geographic area. Additionally, Montgomery County CoC members agree to administer their assistance in compliance with the CoC's written standards on awarding CoC funds.<sup>2</sup> Recipients and sub recipients of CoC and local funds may develop additional standards for administering program assistance, but these additional standards cannot be in conflict with those established by the Montgomery County CoC or the CoC Program interim rule.

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<sup>1</sup> US Department of Housing and Urban Development. (2012). *Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program*. (HUD 24 CFR Part 578 [Docket No. FR-5476-I-01] RIN 2506-AC29). Washington, DC. Retrieved from [https://www.hudexchange.info/resources/documents/CoCProgramInterimRule\\_FormattedVersion.pdf](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf)

<sup>2</sup> US Department of Housing and Urban Development. (2012). *Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program*. (HUD 24 CFR Part 578 [Docket No. FR-5476-I-01] RIN 2506-AC29). Washington, DC. Retrieved from [https://www.hudexchange.info/resources/documents/CoCProgramInterimRule\\_FormattedVersion.pdf](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf)

## Themes of the Montgomery County Coordinated Entry System

Over the last ten years, the Montgomery County CoC has implemented a *Housing First* model that provides a range of housing services to persons experiencing or at-risk of homelessness, including outreach and engagement, emergency and transitional housing, safe havens, rapid re-housing, and permanent supportive housing. The CoC has incorporated the *Housing First* model as well as non-discrimination policies into the coordinated entry system.

### Housing First

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- *Housing First* is a programmatic and systems approach that centers on providing people who are homeless with housing quickly and then providing services as needed.
- Housing is not contingent on compliance with services.
- Participants are expected to comply with a standard lease agreement and are provided with services and supports to help maintain housing and prevent eviction.
- Services are provided post-housing to promote housing stability and well-being.
- All programs are expected to ensure low barriers to program entry for program participants.

### Non-discrimination

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- Providers must have non-discrimination policies in place and assertively outreach to people least likely to engage in the homeless system.
- Providers must comply with all federal statutes including the Fair Housing Act<sup>3</sup> and the Americans with Disabilities Act<sup>4</sup>.
- Montgomery County CoC practices a person-centered model that strongly incorporates participant choice and inclusion of subpopulations present in Montgomery County, including, but not limited to, homeless veterans, youth, families with children, and victims of domestic violence.

## Components of the Coordinated Entry System

### Access Points

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The Montgomery County CoC coordinated entry system serves the entire geographic area of Montgomery County through multiple access points for families and individuals seeking homeless services for permanent supportive housing, rapid re-housing, and transitional housing.

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<sup>3</sup> US Department of Justice. The Fair Housing Act. Accessed May 2015. <http://www.justice.gov/crt/about/hce/title8.php>.

<sup>4</sup> US Department of Housing and Urban Development. Section 504 of the Rehabilitation Act of 1973. Accessed May 2015. <http://portal.hud.gov/hudportal/HUD?src=/programdescription/sec504>.

The current access points within the Montgomery County CoC coordinated entry system are provided in the following chart.

### Agencies and Shelters Where Assessments can be performed

Access Points for Single Adults			
Program Name and Address	Phone Number	Outreach Area Served	Services
Bethesda Cares 7728 Woodmont Avenue Bethesda, MD 20814	301-907-9244	Bethesda	Monday, Wednesday and Friday: 9:00am-12:30pm and 2:00-5:00pm Thursday: 9:00am-12:30pm and 3:00-5:00pm Street outreach and case management provided
City of Gaithersburg 31 S Summit Avenue Gaithersburg, MD 20877	301-258-3690	Gaithersburg	Street outreach in the City of Gaithersburg; Case management provided
Community Vision 8210 Dixon Avenue Silver Spring, MD 20910	301-585-4471	Silver Spring	Monday-Friday: 8:00am–5:00pm Monday-Friday: Breakfast 8:00am Monday, Thursday and Friday: <b>9:00am sign up</b> for showers, laundry, and case management services Classes and groups per monthly calendar
People Encouraging People – Homeless Outreach 251 N. Stonestreet Avenue Rockville, MD 20850	301-637-6700	Montgomery County	Monday-Friday: 9:00am–4:00pm drop in hours Provide street outreach and case management.

Access Points for Families with Minor Children		
DHHS Office	Phone Number	Services
Housing Stabilization Services 1301 Piccard Drive, 2 <sup>nd</sup> Fl. Rockville, MD 20850	240-777-4550	8:30am–5:00p.m. provides emergency assistance on a first-come first served basis, for homeless prevention, utility assistance, and homeless assessment. Tuesday evening hours are available from 5:00–7:00p.m.
Housing Stabilization Services 12900 Middlebrook Lane 2 <sup>nd</sup> Fl. Germantown, MD 20874	240-777-4448	8:30am–5:00p.m. provides emergency assistance on a first-come first served basis, for homeless prevention, utility assistance, and homeless assessment. Tuesday evening hours are available from 5:00–7:00p.m.
Housing Stabilization Services 8818 Georgia Avenue Silver Spring, MD 20910	240-777-3075	8:30am–5:00p.m. provides emergency assistance on a first-come first served basis, for homeless prevention, utility assistance, and homeless assessment. Tuesday evening hours are available from 5:00–7:00p.m.
Crisis Center 1301 Piccard Drive, 1 <sup>st</sup> Fl. Rockville, MD 20850	240-777-4000	After 5:00p.m. The Crisis Center which is 24 Hours / 7 days a week, utilized for providing information regarding the homeless system for Single Adults and Families with Minor Children

The coordinated entry system is publically advertised through the Montgomery County’s Department of Health and Human Services (DHHS) website, through the County’s 3-1-1 system, and community events. Entry points are also advertised through trainings for service providers and information is passed along from emergency shelter and street outreach workers

directly to people sleeping on the street. The broad advertisement of the system ensures that all people within Montgomery County in need of homeless services will have fair and equal access to the system regardless of where or how the household presents at any entry point. Outreach conducted by emergency shelter and street outreach workers ensures that people who are sleeping on the streets are equally prioritized for assistance as anyone else presenting with service needs.

## Assessments

In the Montgomery County CoC, all coordinated entry locations offer the same assessment approach and referrals using transparent and uniform decision-making process. The Montgomery County CoC currently uses two different assessment tools to measure vulnerability and need for a housing intervention; one tool for individuals, and another tool for families. The Vulnerability Index-Service Prioritization and Decision Assessment Tool (VI-SPDAT) is used to assess individuals who are in need of housing intervention(s) and the locally-developed Housing Options Targeting Tool is used to assess families. Coordinated entry access points use the tools in order to initially prioritize the needs of each presenting household. The tools are short in nature and are used to collect the minimum amount of information necessary to initially assess individuals or families who enter the coordinated entry system. The following table shows the scores needed for various housing considerations for each tool.

Home Assessment Tool Results	
Consideration	Household Score Needed
Prioritization for Permanent Supportive Housing	15 and up
Prioritization for Transitional Housing	7 to 15
Prioritization for Rapid Re-Housing	7 to 15

VI-SPDAT	
Consideration	Household Score Needed
Prioritization for Permanent Supportive Housing	10 or above
Prioritization for Transitional Housing	5 to 9
Prioritization for Rapid Re-Housing	5 to 9

## Referrals

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All housing programs will report vacancies to the County Coordinator within five business days of unit/bed availability. The County Coordinator will be responsible for ensuring that appropriate referrals are made for vacancies based on prioritization as determined by the Housing Priority Committee.

Within 30 days of an intake interview and receipt of a complete intake packet, the housing provider will determine eligibility and acceptance or rejection into the program.

## Provider Decline Policy

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Rapid re-housing, transitional housing, and permanent supportive housing providers may only decline households found eligible for their programs under limited circumstances—such as when:

- There is no actual vacancy available
- The household presents with more people than referred by the coordinated entry system
- The provider has determined, based on their individual program policies and procedures, that the household cannot be safely accommodated or cannot meet tenancy obligations with the supports provided by the program

Providers are allowed one household denial per vacancy.

An intake decision notification will include, at a minimum, the following details, if applicable:

- The first available move-in date
- The reason the client cannot enter the program, including the reason for rejection by the client or program
- Instructions for appealing the decision, including the contact information for the person to whom and under what time frame the appeal should be submitted

If the household is accepted, the provider must document that acceptance and notify the household within two business days.

## Client Decline Policy

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Consumers may decline one referral per housing intervention because of program requirements that are inconsistent with their needs or preferences. Client choice is an important theme of the coordinated entry system in Montgomery County. Therefore, households should only be referred to housing interventions they are eligible for and have an interest in living/participating in.

At their discretion, the Housing Priority Committee will request a case conference to review and resolve rejection decisions by consumers. The purpose of the case conference will be to resolve barriers to the client receiving the indicated and desired level of service.

## Permanent Supportive Housing: Eligibility and Prioritization

### Eligible Households<sup>5</sup>

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For permanent supportive housing programs, households must meet both the HUD definition of homelessness under Category I, and have a disability. Once meeting the Category I eligibility requirements, households are then prioritized by Montgomery County's target populations. Programs may not establish additional eligibility requirements beyond those specified in Category I and those required by funders.

### Category I: Literally Homeless<sup>6</sup>

Households qualify as Category I if they are:

- Sleeping in a place not designed for or used as a regular sleeping accommodation, including the street, a car, park, abandoned building, bus or train station, airport, camping ground etc.
- Living in a shelter designed to provide temporary living arrangements (including emergency shelter, congregate shelters, transitional housing, hotels and motels paid for by charitable organizations or by government programs)
- Exiting an institution where they resided for  $\leq 90$  days, and were residing in an emergency shelter or place not meant or human habitation immediately prior to entering the institution

### Prioritizing Eligible Households for Permanent Supportive Housing<sup>7</sup>

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Of those eligible households the populations must be prioritized in accordance with:

- Montgomery County's *Strategic Plan to End Homelessness*
- The U.S. Interagency Council on Homelessness (USICH) plan, *Opening Doors*
- HUD's guidance on prioritization of chronically homeless households and policy brief on coordinated entry systems

Montgomery County CoC has established the following priority populations for permanent supportive housing for individuals and families. These priorities have been established because

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<sup>5</sup> Households may include people presenting as individuals or as families with children.

<sup>6</sup> US Department of Housing and Urban Development. Federal Register. Vol. 76, No. 233. Accessed May 2015. [https://www.hudexchange.info/resources/documents/HEARTH\\_HomelessDefinition\\_FinalRule.pdf](https://www.hudexchange.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf)

<sup>7</sup> In accordance with program/agency funding sources and applicable Fair Housing Laws, individual programs may set additional standards as long they do not contradict the CoC Program Interim Rule or the Montgomery County CoC written standards.

solving homelessness for Montgomery County CoC's most vulnerable people and highest users of resources will enhance the CoC's goal of quickly transitioning people who are homeless to permanent supportive housing, and ultimately eradicating homelessness throughout the entire geographic area. This prioritization encompasses Montgomery County CoC's coordinated entry system:

1. Chronically homeless individuals and families with the most severe service needs
2. Chronically homeless individuals and families with the longest history of homelessness
3. All other chronically homeless individuals and families
4. Homeless individuals and families with a disability with the most severe service needs
5. Homeless individuals and families with long period of continuous or episodic homelessness
6. Homeless individuals and families coming from places not meant for human habitation (such as emergency shelters, streets, safe havens, etc.)

The most severe service needs will be determined by the household's score on the VI-SPDAT or the Homeless Assessment Tool, and projects will prioritize those with the highest scores within each category first.

As a part of Montgomery County's Strategic Plan to End Homelessness, the CoC is dedicated to eradicating veteran homelessness by 2015. The CoC will prioritize veterans over non-veterans in each prioritization category listed above. Essentially, this means that if two households present for assistance and both fall under the same order of priority (e.g. both chronically homeless and fall under Priority 1), but one is a veteran household and the other is not, the veteran household should be prioritized first. In general, the CoC will prioritize veteran households that are not eligible for VA housing or services.

### **Minimum Standards for Permanent Supportive Housing Programs**

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All referrals to permanent supportive housing will be made through the coordinated entry system. The following minimum standards will be applied to all permanent housing programs:

- Support services must be provided throughout the duration of stay in housing.
- Program participants must enter into a lease agreement for a term of at least one year, which is terminable for cause. The lease must be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.
- There is no designated length of stay for program participants

### **Rapid Re-Housing Programs: Eligibility and Prioritization**

For rapid re-housing programs, households must meet the HUD's definition of homelessness under Category I, any subsequent CoC Program Notice of Funding Availability (NOFA) eligibility requirements, and any additional funder eligibility requirements. Once meeting the rapid re-

housing eligibility requirements, households are then prioritized by Montgomery County's target populations.<sup>8</sup>

### Prioritizing Eligible Households for Rapid Re-Housing Programs

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Of those eligible households, the following populations must be prioritized in accordance with:

- Montgomery County's *Strategic Plan to End Homelessness*
- The USICH plan, *Opening Doors*
- HUD's guidance on prioritization of chronically homeless households and policy brief on coordinated entry systems.

Programs may not establish additional eligibility requirements beyond those required by funders.

Montgomery County CoC has established the following priority populations for rapid re-housing programs for individuals and families. These priorities have been established because solving homelessness for Montgomery County CoC's most vulnerable people and highest users of resources will enhance the CoC's goal of quickly transitioning people who are homeless to rapid re-housing and ultimately eradicating homelessness throughout all the entire geographic area. This prioritization encompasses Montgomery County CoC's coordinated entry system.

Montgomery County CoC has several different rapid re-housing program models based on national and local proven success. The coordinated entry system is design to ensure that households with the most needs are referred to the appropriate model of rapid re-housing first. The process for prioritizing participants for rapid re-housing resources will first include that eligible participants are referred to the rapid re-housing program which they are eligible for, and then secondly be based the following prioritization:

1. Families with a score of 7 and 15 on the Homeless Assessment Tool and individuals with a score of 5-9 on the VI-SPDAT
2. Households with the ability to increase their income and pay the entire rent by the end of the assistance period
3. Households with the longest history of homelessness
4. Households expected to sustain housing once they have addressed housing barriers through case management

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<sup>8</sup> Recipients and subrecipients of CoC and local funds may develop additional standards for administering program assistance, but these additional standards cannot be in conflict with those established by the Montgomery County CoC or the CoC Program interim rule.

## Rent Limits for Rapid Re-Housing Programs<sup>9</sup>

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Depending on the program model rental assistance will be either a fixed rate (e.g. \$400 per month) or based on household income (e.g. 30% of the household's monthly adjusted income).

## Minimum Standards for Rapid Re-Housing Programs

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All referrals to rapid re-housing will be made through the coordinated entry system. The following minimum standards will be applied to all rapid re-housing programs:<sup>10</sup>

- Maximum participation in a rapid re-housing program cannot exceed 24 months.
- Support services must be provided throughout the duration of stay in housing.
- Program participants must enter into a lease agreement for a term of at least one year, which is terminable for cause. The lease must be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

## Transitional Housing: Eligibility and Prioritization

### Eligible Households<sup>11</sup>

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For transitional housing programs in the Montgomery County CoC, households must meet both the HUD definition of homelessness, under Categories I or IV. Once meeting the following eligibility requirements, households are then prioritized by Montgomery County's target populations based on the unique criteria for the CoC's transitional housing programs. Programs may not establish additional eligibility requirements beyond those specified below and those required by funders.

#### Category I: Literally Homeless<sup>12</sup>

Households qualify as Category I if they are:

- Sleeping in a place not designed for or used as a regular sleeping accommodation, including the street, a car, park, abandoned building, bus or train station, airport, camping ground etc.

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<sup>9</sup> Currently the CoC does not have any HUD funded CoC RRH programs, but in the future, if awarded CoC RRH projects the CoC will set a max. limit on rent contribution

<sup>10</sup> US Department of Housing and Urban Development. (2012). *Homeless Emergency Assistance and Rapid Transition to Housing: Continuum of Care Program*. (HUD 24 CFR Part 578 [Docket No. FR-5476-I-01] RIN 2506-AC29). Washington, D.C. Retrieved from [https://www.hudexchange.info/resources/documents/CoCProgramInterimRule\\_FormattedVersion.pdf](https://www.hudexchange.info/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf)

<sup>11</sup> Households may include people presenting as individuals or as families with children

<sup>12</sup> US Department of Housing and Urban Development. Federal Register. Vol. 76, No. 233. Accessed May 2015. [https://www.hudexchange.info/resources/documents/HEARTH\\_HomelessDefinition\\_FinalRule.pdf](https://www.hudexchange.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf)

- Living in a shelter designed to provide temporary living arrangements (including emergency shelter, congregate shelters, transitional housing, hotels and motels paid for by charitable organizations or by government programs)
- Exiting an institution where they resided for  $\leq 90$  days, and were residing in an emergency shelter or place not meant or human habitation immediately prior to entering the institution

#### **Category IV: Fleeing/Attempting to Flee Domestic Violence**

Households qualify as Category IV if they meet the following requirements:

- They are fleeing, or attempting to flee domestic violence
- No subsequent residence has been identified
- They have no resources or support networks to obtain permanent housing

#### **Prioritizing Eligible Households for Transitional Housing Programs**

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The process for prioritizing households for transitional housing first includes eligible households based on HUD's homeless definition, and then secondly based on the below prioritization. Transitional Housing facilitates the movement of homeless households to permanent housing within 24 months of entering transitional housing.

In Montgomery County, each transitional housing program has its own eligibility criteria. At entry, this may be based on the sub-population served—such as age, gender, family composition, severity of behavioral health issues, etc. If multiple households meet the transitional housing programs individualized eligibility criteria, then prioritization will take place in the following order:

1. Families with a score of 7 and 15 on the Homeless Assessment Tool and individuals with a score of 5-9 on the VI-SPDAT—based on their score, households with the highest service needs will be prioritized first
2. Length of time homeless
3. Falling under one of the target populations for transitional housing:
  - a. Family with head of household between the ages of 18-24 years old
  - b. Households with behavioral health needs
  - c. Households fleeing domestic violence

#### **Minimum Standards for Transitional Housing Programs**

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All referrals to transitional housing must come through the coordinated entry system. The following minimum standards will be applied to all transitional housing programs:

- Maximum length of stay cannot exceed 24 months.
- Assistance in transitioning to permanent housing must be made available/provided.
- Support services must be provided throughout the duration of stay in transitional housing.

- Program participants in transitional housing must enter into a lease, sublease or occupancy agreement for a term of at least one month. The lease, sublease or occupancy agreement must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months.

## Appendix I: HUD Definitions

### Chronically Homeless<sup>13</sup>

The term “chronically homeless” means, with respect to an individual or family, that the individual or family— (i) is homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter; (ii) 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 1 year or on at least 4 separate occasions in the last 3 years; and (iii) has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions. For a family to be defined as chronically homeless, the family must have an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the above criteria, including a family whose composition has fluctuated while the head of household has been homeless.

### Homeless Individual with a Disability<sup>14</sup>

The term “homeless individual with a disability” means an individual who is homeless, as defined in section 103, and has a disability that— (i)(I) is expected to be long-continuing or of indefinite duration; (II) substantially impedes the individual’s ability to live independently; (III) could be improved by the provision of more suitable housing conditions; and (IV) is a physical, mental, or emotional impairment, including an impairment caused by alcohol or drug abuse, post traumatic stress disorder, or brain injury; (ii) is a developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002); or (iii) is the disease of acquired immunodeficiency syndrome or any condition arising from the etiologic agency for acquired immunodeficiency syndrome.

<sup>13</sup> Department of Housing and Urban Development. (2007) *Defining Chronic Homelessness: A Technical Guide for HUD Programs*. Washington, D.C. Office of Community Planning and Development, Special Needs Programs. Retrieved from <https://www.hudexchange.info/resources/documents/DefiningChronicHomeless.pdf>

<sup>14</sup> US Department of Housing and Urban Development. Federal Register. Vol. 76, No. 233. Accessed May 2015. [https://www.hudexchange.info/resources/documents/HEARTH\\_HomelessDefinition\\_FinalRule.pdf](https://www.hudexchange.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf)

# Performance Measurement Module (Sys PM)

## Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH		2489		93			57	
1.2 Persons in ES, SH, and TH		2724		143			68	

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	-	-	-	-	-	-	-
1.2 Persons in ES, SH, and TH	-	-	-	-	-	-	-	-

## Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	47	9	19%	4	9%	3	6%	16	34%
Exit was from ES	520	31	6%	29	6%	41	8%	101	19%
Exit was from TH	134	11	8%	3	2%	5	4%	19	14%
Exit was from SH	17	1	6%	1	6%	1	6%	3	18%
Exit was from PH	340	1	0%	1	0%	5	1%	7	2%
TOTAL Returns to Homelessness	1058	53	5%	38	4%	55	5%	146	14%

# Performance Measurement Module (Sys PM)

## Measure 3: Number of Homeless Persons

### Metric 3.1 – Change in PIT Counts

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

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	891	1100	209
Emergency Shelter Total	515	676	161
Safe Haven Total	36	36	0
Transitional Housing Total	245	285	40
Total Sheltered Count	796	997	201
Unsheltered Count	95	103	8

### Metric 3.2 – Change in Annual Counts

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

	Previous FY	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons		2798	
Emergency Shelter Total		2477	
Safe Haven Total		79	
Transitional Housing Total		418	

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

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		316	
Number of adults with increased earned income		52	
Percentage of adults who increased earned income		16%	

## Performance Measurement Module (Sys PM)

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		316	
Number of adults with increased non-employment cash income		163	
Percentage of adults who increased non-employment cash income		52%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		316	
Number of adults with increased total income		189	
Percentage of adults who increased total income		60%	

Metric 4.4 – Change in earned income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		122	
Number of adults who exited with increased earned income		30	
Percentage of adults who increased earned income		25%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		122	
Number of adults who exited with increased non-employment cash income		53	
Percentage of adults who increased non-employment cash income		43%	

Metric 4.6 – Change in total income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		122	
Number of adults who exited with increased total income		74	
Percentage of adults who increased total income		61%	

## Performance Measurement Module (Sys PM)

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

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.		2338	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		732	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)		1606	

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.		2570	
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.		921	
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)		1649	

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

This Measure is not applicable to CoCs in 2016.

## Performance Measurement Module (Sys PM)

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

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

	Previous FY	Current FY	Difference
Universe: Persons who exit Street Outreach		261	
Of persons above, those who exited to temporary & some institutional destinations		82	
Of the persons above, those who exited to permanent housing destinations		45	
% Successful exits		49%	

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

	Previous FY	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited		2139	
Of the persons above, those who exited to permanent housing destinations		680	
% Successful exits		32%	

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

	Previous FY	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH		1886	
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations		1842	
% Successful exits/retention		98%	