

The Southeastern Oklahoma Continuum of Care

The Southeastern Oklahoma Continuum of Care is committed to prevent and end the tragedy of homelessness among individuals and families.

Serving Atoka, Bryan, Carter, Choctaw, Coal, Haskell, Hughes, Johnston, Latimer, LeFlore, Love, Marshall, McCurtain, McIntosh, Murray, Muskogee, Okfuskee, Okmulgee, Pittsburg, Pontotoc, and Pushmataha Counties.

The mid-year meeting of the Southeastern Oklahoma Continuum of Care will be held:

Friday, August 16, 2019
1:00 p.m.
Kiamichi Technology Center
McAlester, OK

Agenda

1. Introductions
2. Supportive Services for Veteran Families Program
 - a. BRRX
 - b. KI BOIS CAF - Rapid Resolution
3. Homeless Management Information System (HMIS) – New HMIS Lead
4. 2019 Point in Time Count
5. 2019 System Performance Measures
6. 2018 Competition Debriefing
7. 2019 Longitudinal Systems Analysis (LSA) - formerly the AHAR
8. Governance Charter
9. CoC and ESG Program Operating Procedures
10. Coordinated Entry System
 - a. Coordinated Entry Policies
 - b. Coordinated Entry Assessment Tool
11. 2019 HUD CoC NOFA
 - a. Bonus Application
 - b. Planning Grant
 - c. Consolidated Application
 - d. Project Review Tool
 - e. Reallocation Process
 - f. SEO CoC Request for Proposals
12. Housing First – FY 20 Changes
13. Homeless Prevention, Diversion, and Rapid Exit Guidance
14. ESG Focus Group – Rebekah Zahn, Oklahoma Department of Commerce
15. Discussion and Announcements
16. Adjourn

If you have any questions please contact Linda Love at 1-918-967-3325.

Please note that attendance at this meeting is required to qualify as an active member.

Point-in-Time Count OK-507 Southeastern Oklahoma Regional CoC

Population: Sheltered and Unsheltered Count

Persons in Households with at least one Adult and one Child

	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total Number of Households	19	0	12	31
Total Number of persons (Adults & Children)	53	0	43	96
Number of Persons (under age 18)	33	0	22	55
Number of Persons (18 - 24)	4	0	9	13
Number of Persons (over age 24)	16	0	12	28

Gender (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Female	34	0	25	59
Male	19	0	18	37
Transgender	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0

Ethnicity (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Non-Hispanic/Non-Latino	46	0	43	89
Hispanic/Latino	7	0	0	7

Point-in-Time Count OK-507 Southeastern Oklahoma Regional CoC

Race (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
White	24	0	27	51
Black or African-American	2	0	5	7
Asian	0	0	0	0
American Indian or Alaska Native	17	0	8	25
Native Hawaiian or Other Pacific Islander	0	0	0	0
Multiple Races	10	0	3	13

Chronically Homeless (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total number of households	3		2	5
Total number of persons	8		5	13

Population: Sheltered and Unsheltered Count

Persons in Households with only Children

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	12	0	0	1	13
Total Number of children (under age 18)	12	0	0	2	14

Gender (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	5	0	0	0	5
Male	7	0	0	2	9
Transgender	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0

Ethnicity (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	12	0	0	2	14
Hispanic/Latino	0	0	0	0	0

Race (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional			
White	7	0	0	2	9
Black or African-American	2	0	0	0	2
Asian	0	0	0	0	0
American Indian or Alaska Native	1	0	0	0	1
Native Hawaiian or Other Pacific Islander	0	0	0	0	0
Multiple Races	2	0	0	0	2

Chronically Homeless (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total number of persons	0		0	0	0

Point-in-Time Count OK-507 Southeastern Oklahoma Regional CoC

Population: Sheltered and Unsheltered Count

Persons in Households without Children

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	149	0	0	25	174
Total Number of persons (Adults)	152	0	0	31	183
Number of Persons (18 - 24)	10	0	0	3	13
Number of Persons (over age 24)	142	0	0	28	170

Gender (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	57	0	0	7	64
Male	95	0	0	24	119
Transgender	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0

Ethnicity (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	143	0	0	29	172
Hispanic/Latino	9	0	0	2	11

Point-in-Time Count OK-507 Southeastern Oklahoma Regional CoC

Race (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
White	111	0	0	22	133
Black or African-American	15	0	0	6	21
Asian	0	0	0	0	0
American Indian or Alaska Native	17	0	0	2	19
Native Hawaiian or Other Pacific Islander	0	0	0	0	0
Multiple Races	9	0	0	1	10

Chronically Homeless (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total number of persons	17		0	3	20

Date of PIT Count: 1/24/2019

Population: Sheltered and Unsheltered Count

Total Households and Persons

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	180	0	0	38	218
Total Number of Persons	217	0	0	76	293
Number of Children (under age 18)	45	0	0	24	69
Number of Persons (18 to 24)	14	0	0	12	26
Number of Persons (over age 24)	158	0	0	40	198

Gender

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	96	0	0	32	128
Male	121	0	0	44	165
Transgender	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0

Ethnicity

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	201	0	0	74	275
Hispanic/Latino	16	0	0	2	18

Race

Point In Time Summary for OK-507 - Southeastern Oklahoma Regional CoC

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
White	142	0	0	51	193
Black or African-American	19	0	0	11	30
Asian	0	0	0	0	0
American Indian or Alaska Native	35	0	0	10	45
Native Hawaiian or Other Pacific Islander	0	0	0	0	0
Multiple Races					
Chronically Homeless	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total number of persons	25		0	8	33

Point-in-Time Counts of People Who Are Homeless
CoC: OK-507 Southeastern Oklahoma Regional CoC

01/29/ 2009	01/28/ 2010	01/27/ 2011	01/26/ 2012	01/24/ 2013	01/30/ 2014	01/29/ 2015	Difference 14-15	01/28/ 2016	Difference 15-16	01/26/ 2017	Difference 16-17	01/25/ 2018	Difference 17-18	01/24/2 019	Difference 18-19
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Sheltered People in Households...

With at Least One Adult and One Child	80	147	151	95	121	89	90	1	51	-39	77	26	43	-34	53	10
Under Age 18	*	*	*	*	78	51	49	-2	28	-21	46	18	28	-18	33	5
Age 18 - 24	*	*	*	*	9	9	9	0	7	-2	3	-4	1	-2	4	3
Over Age 24	*	*	*	*	34	29	32	3	16	-16	28	12	14	-14	16	2
Average household size	3.2	2.5	3.4	3.2	3.3	2.7	2.5	-0.20	2.6	0.05	2.7	0.11	3.1	0.42	2.79	-0.28
With Only Children	*	40	22	59	43	0	17	17	22	5	10	-12	9	-1	12	3
In one-child Households	*	*	*	*	24	0	*		*		*		*		*	
In multi-child households	*	*	*	*	19	0	*		*		*		*		*	
Average household size		1.0	1.0	2.0	1.3	0.0	1.2	1.21	1.0	-0.21	1.0	0.00	1.0	0.00	1.00	0.00
Without Children	61	115	160	110	159	136	130	-6	144	14	119	-25	133	14	152	19
Age 18 - 24	*	*	*	*	17	20	21	1	21	0	32	11	19	-13	10	-9
Over Age 24	*	*	*	*	142	116	109	-7	123	14	87	-36	114	27	142	28
Average household size	1.0	1.0	1.2	1.2	1.0	1.0	1.1	0.10	1.0	-0.12	1.0	0.00	1.0	-0.02	1.02	0.02
All Sheltered People	141	302	333	264	323	225	237	12	217	-20	206	-11	185	-21	217	32
Average household size	2.1	1.51	1.85	2.12	1.6	1.87	1.62	-0.25	1.52	-0.09	1.56	0.03	1.69	0.13	1.60	-0.09

01/29/ 2009	01/28/ 2010	01/27/ 2011	01/26/ 2012	01/24/ 2013	01/30/ 2014	01/29/ 2015	Difference 14-15	01/28/ 2016	Difference 15-16	01/26/ 2017	Difference 16-17	01/25/ 2018	Difference 17-18	01/24/2 019	Difference 18-19
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Unsheltered People in Households...

With at Least One Adult and One Child	153	515	167	*	83	113	46	-67	40	-6	25	-15	16	-9	43	27
Under Age 18	*	*	*	*	53	46	25	-21	22	-3	15	-7	7	-8	22	15
Age 18 - 24	*	*	*	*	6	23	4	-19	3	-1	1	-2	1	0	9	8
Over Age 24	*	*	*	*	24	44	17	-27	15	-2	9	-6	8	-1	12	4
Average household size	3.3	2.7	3.1		2.4	5.7	3.1	-2.58	3.3	0.27	4.2	0.83	3.2	-0.97	3.6	0.38
With Only Children	*	13	7	*	6	0	45	45	45	0	5	-40	0	-5	2	2
In one-child Households	*	*	*	*	0	0	*		*		*		*		*	
In multi-child households	*	*	*	*	6	0	*		*		*		*		*	
Average household size		1.0	1.0		1.0	0.0	1.2	1.22	1.2	0	1.0	-0.22	0.0	-1.00	2.0	2.00
Without Children	95	315	141	*	113	104	125	21	134	9	115	-19	41	-74	31	-10
Age 18 - 24	*	*	*	*	20	23	45	22	52	7	6	-46	1	-5	3	2
Over Age 24	*	*	*	*	93	81	80	-1	82	2	109	27	40	-69	28	-12
Average household size	1.0	1.0	1.0		1.1	1.5	1.4	-0.07	1.2	-0.22	1.1	-0.08	1.4	0.25	1.2	-0.13
All Unsheltered People	248	843	315	*	202	217	216	-1	219	3	145	-74	57	-88	76	19
Average household size	2.1	1.58	1.71		1.50	2.38	1.90	-0.48	1.92	0.01	2.09	0.18	2.28	0.19	2.27	-0.01

01/29/ 2009	01/28/ 2010	01/27/ 2011	01/26/ 2012	01/24/ 2013	01/30/ 2014	01/29/ 2015	Difference 14-15	01/28/ 2016	Difference 15-16	01/26/ 2017	Difference 16-17	01/25/ 2018	Difference 17-18	01/24/2 019	Difference 18-19
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All People in Households...

With at Least One Adult and One Child	233	662	318	95	204	202	136	-66	91	-45	102	11	59	-43	96	37
Under Age 18	*	*	*	*	131	97	74	-23	50	-24	61	11	35	-26	55	20
Age 18 - 24	*	*	*	*	15	32	13	-19	10	-3	4	-6	2	-2	13	11
Over Age 24	*	*	*	*	58	73	49	-24	31	-18	37	6	22	-15	28	6
Average household size	3.2	2.7	3.2	3.2	2.8	3.8	2.7	-1.14	2.8	0.18	2.9	0.07	3.1	0.22	3.2	0.05
With Only Children	*	53	29	59	49	0	62	62	67	5	15	-52	9	-6	14	5
In one-child Households	*	*	*	*	24	0	*	*	*	*	*	*	*	*	*	*
In multi-child households	*	*	*	*	25	0	*	*	*	*	*	*	*	*	*	*
Average household size		1.0	1.0	2.0	1.5	0.0	1.2	1.22	1.1	-0.08	1.0	-0.14	0.5	-0.50	1.5	1.00
Without Children	156	430	301	110	272	240	255	15	278	23	234	-44	174	-60	183	9
Age 18 - 24	*	*	*	*	37	43	66	23	73	7	38	-35	20	-18	13	-7
Over Age 24	*	*	*	*	235	197	189	-8	205	16	196	-9	154	-42	170	16
Average household size	1.0	1.0	1.1	1.2	1.1	1.2	1.3	0.07	1.1	-0.16	1.1	-0.04	1.2	0.12	1.1	-0.05
All People	389	1,145	648	264	525	442	453	11	436	-17	351	-85	242	-109	293	51
Average household size	2.1	1.5	1.8		1.5	2.1	1.8	-0.36	1.7	-0.04	1.8	0.11	2.0	0.16	1.9	-0.05

*No data entered for this category on this date

The age categories ("Under Age 18", etc.) were added in 2013.

Continuum of Care Program Competition Debriefing

FY 2018

CoC Name: Southeastern Oklahoma Continuum of Care

CoC Number: OK-507

This document summarizes the scores your Continuum of Care (CoC) received during the Fiscal Year (FY) 2018 CoC Program Competition and includes:

1. High Priority CoC Application Questions;
2. CoC Scoring Summary—on the four sections of the application; and
3. Overall Scores for all CoCs—including highest and lowest scores.

The scores are organized in the same manner as the CoC application. HUD included a FY 2018 CoC Application NOFA Cross Reference in the Detailed Instructions of the FY 2018 CoC Application which indicated how the CoC application questions relate to the NOFA for the FY 2018 CoC Program Competition.

1. High Priority CoC Application Questions		
CoC Application Questions	Maximum Score Available	CoC Score Received
1E. Continuum of Care (CoC) Project Review, Ranking, and Selection		
<p><i>This question assessed whether a CoC used objective criteria and past performance to review and rank projects. To receive full points, CoCs would have had to use performance-based criteria to at least partially evaluate and rank projects. Examples of performance criteria include reducing the length of time people experienced homelessness and the degree to which people exited programs for permanent housing destinations.</i></p> <p>1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition: (1) objective criteria; (2) at least one factor related to achieving positive housing outcomes; (3) a specific method for evaluating projects submitted by victim services providers; and (4) attach evidence that supports the process selected.</p>	18	15
<p>1E-2. Severity of Needs and Vulnerabilities. Applicants must describe: (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.</p>	4	4
2A. Homeless Management Information System (HMIS) Bed Coverage		
<p>2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type: (1) total number of beds in 2018 HIC; (2) total beds dedicated for DV in the 2018 HIC; and (3) total number of beds in HMIS.</p>	6	0

1. High Priority CoC Application Questions		
CoC Application Questions	Maximum Score Available	CoC Score Received
3A. Continuum of Care (CoC) System Performance		
3A-1. First Time Homeless as Reported in HDX. Applicants must: (1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time; (2) describe the CoC's strategy to address individuals and families at risk of becoming homeless; and (3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.	3	3
3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must: (1) provide the average length of time individuals and persons in families remained homeless (i.e., the number); (2) describe the CoC's strategy to reduce the length-of-time individuals and persons in families remain homeless; (3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and (4) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.	14	11
3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must: (1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and (2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations. Applicants must: (1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and (2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.	11	9
3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX. Applicants must: 1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness; (2) describe the CoC's strategy to reduce the rate of additional returns to	8	7

1. High Priority CoC Application Questions		
CoC Application Questions	Maximum Score Available	CoC Score Received
homelessness; and (3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families returns to homelessness.		
3A-5. Job and Income Growth. Applicants must: (1) describe the CoC's strategy to increase access to employment and non-employment cash sources; (2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and (3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.	4	2
3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017. (mm/dd/yyyy)	6	6
3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives		
3B-2.2. Applicants must: (1) describe the CoC's current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless; (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.	3	3
4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies		
4A-2. Housing First: Applicants must report: (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	7	0
4A-3. Street Outreach. Applicants must: (1) describe the CoC's outreach; (2) state whether the CoC's Street Outreach covers 100	3	3

1. High Priority CoC Application Questions		
CoC Application Questions	Maximum Score Available	CoC Score Received
percent of the CoC's geographic area; (3) describe how often the CoC conducts street outreach; and (4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.		
4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.	10	10

2. CoC Scoring Summary		
Scoring Category	Maximum Score (Points)	Your CoC Score (Points)
Part 1: CoC Structure and Governance	52	39.25
Part 2: Data Collection and Quality	49	40
Part 3: CoC Performance and Strategic Planning	77	54.25
Part 4: Cross-Cutting Policies	22	15
Total CoC Application Score	200	148.5

3. Overall Scores for all CoCs	
Highest Score for any CoC	190
Lowest Score for any CoC	47.75
Median Score for all CoCs	160
Weighted Mean Score* for all CoCs	166.75

*The weighted mean score is the mean CoC score weighted by Annual Renewal Demand. CoCs that scored higher than the weighted mean score were more likely to gain funding relative to their Annual Renewal Demand, while CoCs that scored lower than the weighted mean were more likely to lose money relative to their Annual Renewal Demand.

The Southeastern Oklahoma Continuum of Care

Continuum of Care (CoC) and Emergency Solutions Grant (ESG) Program Policies and Procedures

Revisions for Approval at Mid-Year Meeting 08/16/19

Changes and additions are highlighted in yellow.

Page 3

Coordinated Entry

Minimum standards for the coordinated entry and assessment system are:

All ESG and CoC providers shall participate in the Continuum of Care developed and adopted a coordinated entry system in accordance with HUD's requirements (24 CFR Part 578) for that assessment system. For detailed information, please refer to the Coordinated Entry System Policies and Procedures.

Page 7

5. **Permanent Supportive Housing.** The CoC standard for determining and prioritizing which eligible individuals and families will receive permanent supportive housing assistance: CoC providers shall use an intake process with the coordinated assessment to determine and prioritize which persons are best served by placement in any available Permanent Supportive Housing unit. The determination will be documented in the client file. Chronically homeless persons are prioritized for PSH beds in accordance with HUD guidance in CPD Notice 16-011 (Attachment B).

From the SEO CoC Governance Charter -

All CoC funded permanent supportive housing projects shall adhere to Notice CPD-16-011, "Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing." The Continuum of Care Membership formally adopted Notice CPD-16-011 on August 2, 2016.

Southeastern Oklahoma Regional Continuum of Care

Coordinated Entry System

Policies and Procedures

Revisions and Updates for Approval at Mid-Year Meeting 08/16/19

1. **Definitions** were moved from Appendix A to the first page after the Table of Contents.

2. **Page 2 Added statement about assessment tool.**

The tool gathers information and scores answers to assessment questions. Scores are tallied then used to determine which Priority Category (1 – 4) a participants will be assigned.

3. **Page 12, 13, and 14 Added the following statement to prioritization for specific housing categories.**

Priority Categories from the Assessment Tool will be used to initially prioritize households. Households will be further prioritized within their category using the following parameters.

4. **Page 13 and 14 Added stalking and human trafficking to the statement “Victims of Domestic Violence.”**

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence, Stalking, or Human Trafficking
- Youth (18 – 24 years of age)
- First presented for assistance

5. **Page 15 Added information about referral rejection.**

Both, Service Providers and households, may deny or reject a referral. Service Provider denials should be infrequent and must be documented with a specific justification for the denial or rejection. All Service Providers must provide the reason for a denial, and may be subject to a limit on the number of service denials allowed. If a program is consistently rejecting referrals (more than 25%) the Coordinating Entity will meet with the Service Provider to discuss the issues causing the denials.

Examples of specific justification for a denial:

- Client/household does not meet required criteria for program eligibility

- Client/household unresponsive to three communication attempts
- Client resolved crisis without assistance
- Client/household safety concerns (The Client's/household's health or well-being or the safety of current program participants would be negatively impacted due to staffing, location, or other programmatic issues).
- Client/household needs cannot be addressed by the program (The program does not offer the services and/or housing supports necessary to successfully serve the household).
- Program at bed/unit/service capacity at time of referral
- Property management denial (include specific reason cited by property manager)
- Conflict of interest

6. Added Appendix C: Assessment Tool

7. Added Appendix D: Order of Priority

This has been in our Governance Charter and is mentioned in the CES Policies but was not defined anywhere in the document.

FAQ ID:
1892

What is the order of priority for CoC Program-funded PSH beds that are either dedicated or prioritized for the chronically homeless?

Where the CoC has adopted the orders of priority described in the Prioritization Notice, recipients of either dedicated or prioritized CoC Program-funded PSH must select persons for permanent supportive housing in the following order:

Order of Priority 1 - A household should be prioritized first in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3; and,
2. The length of time the individual or head of household has been homeless is at least 12 months continuously or over a of at least four occasions in the past 3 years where the total length of time homeless totals at least 12 months; and,
3. The individual or head of household has been identified as having severe service needs.

Order of Priority 2 - A household should be prioritized second in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3; and,

2. The length of time the individual or head of household has been living in a place not meant for human habitation, a safe haven, or in an emergency shelter is at least 12 months continuously or over a period of at least four occasions in the past 3 years where the total length of time homeless totals at least 12 months; and,
3. The individual or head of household has **not** been identified as having severe service needs; and,
4. There are no chronically homeless households within the CoC's geographic area that meet the criteria under Order of Priority 1 for dedicated or prioritized PSH.

Order of Priority 3 - A household should be prioritized third in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3; and,
2. The length of time the individual or head of household has been living in a place not meant for human habitation, a safe haven, or in an emergency shelter is at least four occasions in the past 3 years where the total length of time homeless totals less than 12 months; and,
3. The individual or head of household has been identified as having severe service needs; and
4. There are no chronically homeless households within the CoC's geographic area that meet the criteria under Order of Priority 1 and 2 for dedicated or prioritized PSH.

Order of Priority 4 - A household should be prioritized fourth in dedicated or prioritized PSH if all of the following are true:

1. Individual or head of household meets the definition of chronically homeless per 24 CFR 578.3;
2. The length of time the individual or head of household has been living in a place not meant for human habitation, a safe haven, or in an emergency shelter is at least four occasions in the past 3 years where the total length of time homeless totals less than 12 months (see [FAQ 1897](#)); and,
3. The individual or head of household has **not** been identified as having severe service needs; and
4. There are no chronically homeless households within the CoC's geographic area that meet the criteria under Order of Priority 1, 2, and 3 for dedicated or prioritized PSH.

Taken from the HUD Exchange website:

<https://www.hudexchange.info/faqs/1892/what-is-the-order-of-priority-for-coc-program-funded-psh-beds-that-are/>

**Southeastern Oklahoma Continuum of Care
Coordinated Entry System Assessment Tool**

Client Information		
Name (First, Middle, Last):		
Who referred you to us?		
What is your social security number?		
What is your birth date?		
What is your gender?	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Refused	
What is your race?	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Caucasian/White <input type="checkbox"/> African American/Black <input type="checkbox"/> Native American <input type="checkbox"/> Asian/Pacific Islander </div> <div> <input type="checkbox"/> 2 or more races <input type="checkbox"/> Refused <input type="checkbox"/> Other </div> </div>	
Are you Hispanic?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have we spoken before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have a mailing address/post office box where we can reach you?		
Prioritization Assessment Questions	Prioritization Assessment Answers	Prioritization Points/Scoring
Where did you stay last night?	<input type="checkbox"/> Place not meant for habitation <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Transitional Housing <input type="checkbox"/> Permanent Housing for Homeless <input type="checkbox"/> Psychiatric Hospital or Facility <input type="checkbox"/> Substance Abuse Facility <input type="checkbox"/> Hospital <input type="checkbox"/> Jail, Prison, or Juvenile Detention <input type="checkbox"/> Staying or living with family <input type="checkbox"/> Staying or living with a friend <input type="checkbox"/> Foster Care <input type="checkbox"/> Rental by client with subsidy <input type="checkbox"/> Rental by client with other subsidy <input type="checkbox"/> Rental by client with no subsidy <input type="checkbox"/> Owned by client with subsidy <input type="checkbox"/> Owned by client with no subsidy <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	<input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0

**Southeastern Oklahoma Continuum of Care
Coordinated Entry System Assessment Tool**

How long can you stay there?	<input type="checkbox"/> 1 week or less <input type="checkbox"/> More than 1 week, less than a month <input type="checkbox"/> 1 to 3 months	<input type="checkbox"/> More than 3 months, less than a year <input type="checkbox"/> 1 year or longer <input type="checkbox"/> Refused
Annual HH Gross income amount?	<input type="checkbox"/> 0-14% AMI <input type="checkbox"/> 15-30% AMI <input type="checkbox"/> More than 30% AMI	<input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
What is the last grade of school you completed?	<input type="checkbox"/> Less than high school <input type="checkbox"/> Some high school <input type="checkbox"/> High school diploma/GED <input type="checkbox"/> Some College <input type="checkbox"/> Technical degree <input type="checkbox"/> College Degree 2 yrs <input type="checkbox"/> College degree 4 yrs <input type="checkbox"/> Post graduate <input type="checkbox"/> Other	<input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 0
At least one dependent child under age 6?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Single Parent with minor child(ren)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Household size of 5 or more?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Are you pregnant?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 0
Do you have disabling condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Are you currently residing in, or trying to leave, an intimate partner who threatens you or makes you fearful?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Do you want services that are specifically geared to domestic violence survivors OR do you need a confidential location to stay?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Number of times you have been on the streets, in Emergency Shelter or Safe Haven in the past 3 years including today?	<input type="checkbox"/> 4+ <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> Never	<input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0

**Southeastern Oklahoma Continuum of Care
Coordinated Entry System Assessment Tool**

Total number of months homeless in the past 3 years?	<input type="checkbox"/> Less than a month <input type="checkbox"/> 1 Month <input type="checkbox"/> 2-5 Months <input type="checkbox"/> 6+ Months	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Number of time you have had to move because of economic factors in the last 2 years?	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Court ordered rental evictions on your record within the past 3 years?	<input type="checkbox"/> 4 or more <input type="checkbox"/> 2-3 <input type="checkbox"/> 1 <input type="checkbox"/> No prior evictions	<input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 0
Criminal record for arson, drug dealing or manufacture, or felony offense against persons or property?* *Convictions	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Registered Sex Offender	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3 <input type="checkbox"/> 0
Means of Transportation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0 <input type="checkbox"/> 2
Were you ever on active duty in the Armed Forces in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0 <input type="checkbox"/> 1
Do you have a military ID?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 0 <input type="checkbox"/> 1
Discharge Status?	<input type="checkbox"/> Honorable <input type="checkbox"/> General <input type="checkbox"/> Other Than Honorable <input type="checkbox"/> Bad Conduct <input type="checkbox"/> Dishonorable <input type="checkbox"/> Uncharacterized <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused	<input type="checkbox"/> 0 <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 0 <input type="checkbox"/> 0

Prioritization Scale			
Total Client Points		<input type="checkbox"/> Priority 1	20 or more
		<input type="checkbox"/> Priority 2	15-19
Client's Priority		<input type="checkbox"/> Priority 3	10-14
		<input type="checkbox"/> Priority 4	9 or under

Interviewer's Name:		Date:
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Please look at the next page for further prioritization instructions. You may also refer to the Coordinated Entry System Policies and Procedures Manual for additional guidance.

**Southeastern Oklahoma Continuum of Care
Coordinated Entry System Assessment Tool**

Priority Categories from the Assessment Tool will be used to initially prioritize households. Households will be further prioritized within their category using the following parameters.

Prioritizing Dedicated/Prioritized CoC PSH

- Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence
- Youth (18 – 24 years of age)
- First presented for assistance

Prioritizing Non-Dedicated/Prioritized CoC PSH

- Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs
- Homeless Individuals and Families with a Disability with Severe Service Needs.
- Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.
- Homeless Individuals and Families with a Disability Coming from Transitional Housing.
 - An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence, Stalking, or Human Trafficking
- Youth (18 – 24 years of age)
- First presented for assistance

Prioritizing for RRH

- CoC & ESG Program RRH
 - Eligible participants are referred to the Rapid Re-housing program for which they are eligible and prioritized based the following prioritization:
 - Chronically Homeless individuals and families with the Longest History of Homelessness and with the Most Severe Service Needs.
 - Non-Chronically Homeless individuals and families with the Longest History of Homelessness and with the Most Severe Service Needs.

In instances where two or more households have equal priority, applicants shall be further prioritized as follows:

- Veterans Not Eligible for Housing/Health VA Services
- Victims of Domestic Violence
- Youth (18 – 24 years of age)
- First presented for assistance

- SSVF RRH
 - Eligible participants will be prioritized or targeted based on the agreed upon standards set forth in the provider's SSVF grant agreement.

The Southeastern Oklahoma Regional Continuum of Care 2019 Rating Tool

Project: _____

Project Year: _____

Population Served: _____

	4	3	2	1	0	Score	Weight	Total (Score X Weight)
Target Population	CH Families	CH Individuals	DV	Veterans	General		15	
Bed Utilization Rate	During the last reporting period, this project had a bed utilization rate of 90-100%	During the last reporting period, this project had a bed utilization rate of 80-90%	During the last reporting period, this project had a bed utilization rate of 70 – 79%	During the last reporting period, this project had a bed utilization rate of 60 – 69%	During the last reporting period, this project had a bed utilization rate of 59% or lower		25	
Program Participant Length of Stay	With this project, participants stay housed for 6 or more months on average.	With this project, participants stay housed between 4-5 months on average.	With this project, participants stay housed for 3 months on average, but less than 4 months.	With this project, participants stay housed for 2 months on average, but less than 3 months.	With this project, participants stay housed for 1 month or less.		20	
Program Participant Employment	With this project, 21% or more participants have obtained employment income.	With this project, 11 - 20% or more participants have obtained employment income.	With this project, 6 - 10% or more participants have obtained employment income.	With this project, 1 - 5% or more participants have obtained employment income.	With this project, less than 1% of participants have obtained employment income.		15	
Program Participant Mainstream Resources	With this project, 21% or more participants have obtained income through mainstream resources.	With this project, 11 - 20% of participants have obtained income through mainstream resources.	With this project, 6-10% of participants have obtained income through mainstream resources.	With this project, 1- 5% of participants have obtained income through mainstream resources.	With this project, less than 1% of participants have obtained income through mainstream resources.		15	
Case Management Contacts	Client contact 2 or more times per week.	Client contact 1 time per week.	Client contact 2 times per month.	Client contact 1 time per month.	Client contact less than 1 time per month		10	
Leveraging of Resources	This project meets the match requirement through existing community resources.	-----	-----	-----	This project has not leveraged the required match and/or community resources.		10	
Agency Capacity	Agency has operated in CoC and served homeless population for 10 or more years.	Agency has operated in CoC and served homeless population for 8 or more years.	Agency has operated in CoC and served homeless population for 5 or more years.	Agency has operated in CoC and served homeless population for 3 or more years.	Agency has operated in CoC and served homeless population for less than 2 years		1	

Points Scored: _____

Date Scored: _____

The Southeastern Oklahoma Continuum of Care

The Southeastern Oklahoma Continuum of Care is committed to prevent and end the tragedy of homelessness among individuals and families.

Serving Atoka, Bryan, Carter, Choctaw, Coal, Haskell, Hughes, Johnston, Latimer, LeFlore, Love, Marshall, McCurtain, McIntosh, Murray, Muskogee, Okfuskee, Okmulgee, Pittsburg, Pontotoc, and Pushmataha Counties.

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. These project types include: Permanent Supportive Housing for chronically homeless individuals or families and Rapid Re-housing units for families.

During the 2019 CoC competition, the Southeastern Oklahoma CoC will not be reallocating funds from its existing project.

The Southeastern Oklahoma Continuum of Care

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Request for Renewal or Bonus Project Applications ONLY 07/17/2019

The Southeastern Oklahoma Continuum of Care (CoC) is accepting applications for renewal and permanent housing/rapid re-housing and/or domestic violence bonus projects for inclusion with the Continuum's 2019 Continuum of Care consolidated application to the U.S. Department of Housing and Urban Development (HUD). Due to funding limitations, HUD will not consider requests for new funding outside of the reallocation process, bonus projects, CoC planning and Unified Funding Agency costs. The CoC is open to and will consider applications from organizations that have not previously received CoC Program funding. All applications will be submitted in the HUD e-snaps online system.

The FY2019 CoC Program Competition will be administered under the [FY 2019 CoC Program Competition NOFA](#) and [24 CFR part 578](#).

In accordance with [Home, Together: Federal Strategic Plan to Prevent and End Homelessness](#), HUD's policy priorities continue to focus on 1) ending homelessness for all persons, 2) creating a systemic response to homelessness, 3) strategically allocating and using resources, 4) using an evidence-based approach, 5) increasing employment, and 6) providing flexibility for Housing First with service participation requirements. In order to achieve these priorities, HUD strongly encourages CoCs to include them as part of their local planning process. For more information on HUD's homeless policy and program priorities, please refer to [Section II of the Continuum of Care NOFA](#).

In order to ensure the Continuum's application is in line with HUD's national goals, priority will be given to renewal and bonus projects that are also in line with HUD's national goals.

Renewal projects must be located in one or more of the Continuum counties listed above, currently in operation and have a signed agreement expiring between January 1, 2019 and December 31, 2019. Permanent Housing Bonus projects must also be located in one or more of the Continuum counties listed above and create new permanent supportive housing projects that meet the requirements of DedicatedPLUS (see definition below); will exclusively serve chronically homeless individuals and families, rapid re-housing projects that will serve individuals, families, including unaccompanied youth who come directly from the streets, emergency shelters, or are fleeing domestic violence, or other persons who meet the criteria outlined in the NOFA; or Joint Transitional Housing (TH) and Permanent Housing – Rapid Re-housing (PH-RRH) component projects. New projects created through a permanent housing bonus must meet the project eligibility and threshold requirements established by [HUD in Section V. of the Continuum of Care NOFA](#). The maximum amount allowed for a bonus project is 5% of the Continuum's pro-rata share. This will be \$124,362.00 for the FY'19 competition (this amount is subject to change based on HUD publications).

In the FY 2019 Competition, provision has been made for a Domestic Violence Bonus. New projects that want to be considered for the DV Bonus, may be: (a) Permanent Housing-Rapid re-housing projects dedicated

to serving survivors of domestic violence, dating violence, sexual assault, or stalking that are defined as homeless at 24 CFR 578.3; (b) Joint TH and PH-RRH component projects as defined in Section III.C.3.m of this NOFA dedicated to serving survivors of domestic violence, dating violence, sexual assault, or stalking that are defined as homeless at 24 CFR 578.3; or (c) Supportive service only-coordinated entry project to implement policies, procedures, and practices that equip the CoC's coordinated entry to better meet 30 of 84 the needs of survivors of domestic violence, dating violence, sexual assault, or stalking. The maximum amount allowed for Domestic Violence Bonus projects is 10% of the Continuum's pro-rata share. This will be \$97,727.00 for the FY'19 competition.

Please carefully read all instructions related to Bonus projects *prior* to making your decision to apply. Should your agency choose to apply for a bonus project, please send an "intent to apply" e-mail to Linda Love (linda.love@kibois.org) by close of business, August 7, 2019.

Applicants who submit project applications will be notified within 15 days of the final HUD deadline of September 30, 2019 whether their project will be accepted or rejected. Applicants whose projects are rejected will be notified in writing. Projects that believe they were not allowed to participate in a fair and open process and were rejected by the CoC may appeal the rejection directly to HUD by submitting as a Solo Application prior to the HUD application deadline.

All SEO CoC NOFA submission components will be posted on www.kibois.org website two days prior to the HUD deadline.

**CoC Application Deadline: Renewal and Bonus Applications –
Friday, August 30, 2019 at 11:59 pm CST**

For more information:

Visit: <https://www.hudexchange.info/homelessness-assistance/>

or Contact: Linda Love
 KI BOIS Community Action Foundation, Inc.
 P. O. Box 727
 Stigler, OK 74462
 linda.love@kibois.org
 918-967-3325
 800-299-4479

DedicatedPLUS - A permanent supportive housing project where 100 percent of the beds are dedicated to serve individuals with disabilities and families in which one adult or child has a disability, including unaccompanied homeless youth, that at intake are:

1. experiencing chronic homelessness as defined in [24 CFR 578.3](#);
2. residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
3. residing in a place not meant for human habitation, emergency shelter, or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;

4. residing in transitional housing funded by a Joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project;
5. residing and has resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; or
6. receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.

Project applicants may use DedicatedPLUS when creating a new project application through reallocation or permanent housing bonus and renewal project applications may choose to change a 100 percent dedicated project to a DedicatedPLUS project in the FY 2017 CoC Program Competition.

For more information on DedicatedPLUS, please visit <https://www.hudexchange.info/faqs/3247/can-you-explain-the-difference-between-beds-dedicated-to-chronically/>

II. HUD's Homeless Policy Priorities and Program Highlights

A. Policy Priorities. This section provides additional context regarding the selection criteria found in Section VII.B of this NOFA and is included here to help applicants better understand how the selection criteria support the goal of ending homelessness:

1. Ending homelessness for all persons. To end homelessness, CoCs should identify, engage, and effectively serve all persons experiencing homelessness. CoCs should measure their performance based on local data that consider the challenges faced by all subpopulations experiencing homelessness in the geographic area (e.g., veterans, youth, families, or those experiencing chronic homelessness). CoCs should have a comprehensive outreach strategy in place to identify and continuously engage all unsheltered individuals and families. Additionally, CoCs should use local data to determine the characteristics of individuals and families with the highest needs and long experiences of unsheltered homelessness to develop housing and supportive services tailored to their needs. Finally, CoCs should use the reallocation process to create new projects that improve their overall performance and better respond to their needs.

2. Creating a systemic response to homelessness. CoCs should be using system performance measures such as the average length of homeless episodes, rates of return to homelessness, and rates of exit to permanent housing destinations to determine how effectively they are serving people experiencing homelessness. Additionally, CoCs should use their Coordinated Entry process to promote participant choice, coordinate homeless assistance and mainstream housing and services to ensure people experiencing homelessness receive assistance quickly, and make homelessness assistance open, inclusive, and transparent.

3. Strategically allocating and using resources. Using cost, performance, and outcome data, CoCs should improve how resources are utilized to end homelessness. CoCs should review project quality, performance, and cost effectiveness. HUD also encourages CoCs to maximize the use of mainstream and other community-based resources when serving persons experiencing homelessness. CoCs should also work to develop partnerships to help CoC Program participants sustainably exit permanent supportive housing, such as through partnerships with Public Housing Authorities (PHAs) and other government, faith-based, and nonprofit resources specializing in areas such as treating mental illness, treating substance abuse, job training, life skills, or similar activities, including those that help CoC Program participants, whenever possible, reach recovery, self-sufficiency, and independence. Finally, CoCs should review all projects eligible for renewal in FY 2019 to determine their effectiveness in serving people experiencing homelessness, including cost effectiveness.

4. *Using an Evidence-Based Approach.* CoCs should prioritize projects that employ strong use of data and evidence, including the cost-effectiveness and impact of homelessness programs on positive housing outcomes, recovery, self-sufficiency, and reducing homelessness. Examples of measures that CoCs may use to evaluate projects include, but are not limited to: rates of positive housing outcomes, such as reduced length of time homeless and reduced rates of return to homelessness; improvements in employment and income; and improvements in overall well-being, such as improvements in mental health, physical health, connections to family, and safety.

5. *Increasing employment.* Employment provides people experiencing homelessness with income to afford housing. Employment also improves recovery outcomes for individuals with mental illness or addiction. CoCs and CoC-funded projects should work with local employment agencies and employers to prioritize training and employment opportunities for people experiencing homelessness. CoC's should also promote partnerships with public and private organizations that promote employment.

6. *Providing Flexibility for Housing First with Service Participation Requirements.* The traditional Housing First approach has two basic parts: First, individuals are rapidly placed and stabilized in permanent housing without any preconditions regarding income, work effort, sobriety or any other factor. Second, once in housing, individuals never face requirements to participate in services as a condition of retaining their housing. The first part, placement into permanent housing without preconditions, is an important priority to ensure that federal funds are allocated to providers that serve the most vulnerable homeless individuals. This NOFA maintains the commitment to unconditional acceptance of individuals into housing, especially for people with a high degree of vulnerability. At the same time, allowing service participation requirements once a person has been stably housed may promote important outcomes (e.g., employment, increased income, reduced substance use, and strengthened social connection), so this NOFA also provides communities and programs with flexibility, without penalty, to use service participation requirements after people have been stabilized in housing (consistent with 24 CFR 578.75(h)).



Homelessness Prevention, Diversion, and Rapid Exit

Home, Together, the federal strategic plan to prevent and end homelessness in America, recognizes that to end homelessness, every community must have in place a systemic response that ensures that homelessness is a rare, brief, and a one-time experience.

In their efforts to develop effective systems, communities are increasingly focused on implementing stronger homelessness prevention and diversion efforts. And they are exploring ways to create more rapid exits out of homelessness through a housing problem-solving approach that doesn't depend upon dedicated permanent housing resources or subsidies. But there is often a lack of clarity about what these terms mean, how these strategies differ from one another, and the most important considerations for implementing these strategies.

This document, which was developed collaboratively by the U.S. Interagency Council on Homelessness, the Department of Housing and Urban Development, and the Department of Veterans Affairs, is intended to support more effective implementation of prevention, diversion, and rapid exit services. We recognize that federal resources may be limited for traditional homelessness prevention services, but that diversion and rapid exit are more targeted efforts that offer the potential to significantly reduce inflows and demand for limited housing resources available through the crisis response system. Diversion and rapid exit options should be offered to all those who contact coordinated entry systems.

Distinctions in Terms: Agreeing on a Common Language

We believe greater clarity about terminology will be helpful for several reasons. A common language is necessary for effective communication among community partners and stakeholders, as well as across communities. Agreed upon terminology also helps move us forward as we discuss the scale and sources of funding needed for the various activities and stages of the process. Finally, a common language helps foster consistency and effectiveness in our work, and a shared approach to measuring that effectiveness.

We recognize that drawing clear lines between these terms can seem somewhat artificial because there are specific situations that may strain the distinctions. After all, each of these interventions is for individuals and families who are facing housing crises and need help to solve that crisis quickly. And the strategies highlighted here are not standalone programs; it is not in the best interests of the person at risk or experiencing homelessness to be shuffled from one "program" to the next in short order. Instead, these strategies should be considered different elements of a unified, seamless approach to help the household avoid homelessness or exit as quickly as possible—even when they may not be prioritized for higher levels of financial assistance and support services.

In practice, there is much overlap between these approaches. All may include a combination of financial assistance, mediation with landlords, legal services, employment services, and other supports. Strong identification efforts through the implementation of housing stability assessments are important tools to effectively identify the most at-risk households, connect them to the resources that will best respond to their housing crisis, and avert homelessness.

Of course, the same household may move through more than one of the strategies as we have described them below. For example, consistent with the progressive engagement approach, if initial diversion attempts are unsuccessful, the most appropriate place to stay may very well be in the emergency shelter; continuing housing-focused services will then be aimed at helping the household exit rapidly from the shelter; however, if additional barriers and vulnerabilities are identified through continuing engagement, rapid re-housing may ultimately be the appropriate intervention for that household. With this approach, there should be no point at which attempts at quick resolution of the housing crisis cease, regardless of where the person is staying or how much financial assistance might be available to them.

With those considerations in mind, below we define the terms homelessness prevention, diversion, and rapid exit, including indicating when such services are provided, and offer some considerations for effective implementation.

Homelessness Prevention

Homelessness prevention strategies represent a wide array of efforts to prevent housing crises from occurring and to prevent people who face such crises from experiencing homelessness. Prevention strategies are described in *Home, Together* as falling into the following categories:

1. Activities that reduce the prevalence of risk of housing crises within communities;
2. Activities that reduce the risk of homelessness while households are engaged with or are transitioning from systems; and
3. Activities that target assistance to prevent housing crises that do occur from escalating further and resulting in homelessness.

Important Considerations and Practices

Homelessness prevention activities across the three categories described above are not the responsibility of the homelessness services system alone. Rather, homelessness prevention requires a multi-sector approach and an active focus on reducing the prevalence of housing crises.

In the first category of prevention, we recognize that housing crises can be reduced systemically when multiple sectors focus on big picture goals: (1) ensuring an adequate supply of affordable housing; (2) addressing systemic racial inequities; (3) improving education and meaningful and gainful employment; and (4) ensuring access to affordable child care, legal assistance, and physical and behavioral health care. While these multisector strategies may be less often framed as homelessness prevention, they can have the greatest impact on preventing homelessness.

In the second category, homelessness can be prevented through enhanced cross-system collaboration, including systems such as health care, child welfare, and corrections. Such collaboration includes increased awareness and attentiveness to housing stability, as well as effective transition and/or discharge planning. In this category,

systems must ensure that individuals are linked effectively to mainstream resources, including employment and health care, to reduce the risk of homelessness upon discharge or following the end of service provision.

Finally, in the third category of prevention, assistance helps prevent housing crises that do occur from escalating further and resulting in homelessness. In most communities, this assistance is provided through mainstream systems and/or through the homelessness services system. Prevention services in this category often include a combination of financial assistance, mediation with landlords, legal services, and other supports. When multiple systems provide prevention assistance, it is critical that they be coordinated and utilizing common assessment tools to identify and assist those at the greatest risk of homelessness.

Diversion

Diversion strategies and practices assist people to resolve their immediate housing crisis by accessing alternatives to entering emergency shelter or the experience of unsheltered living. This typically occurs at the point people request emergency services, such as entry into emergency shelter, or could take place in a day center or through outreach before a person spends a night unsheltered.

Important Considerations and Practices

Diversion occurs at a “front door” of the homelessness service system (e.g., coordinated entry access point, services center, emergency shelter) but before the person spends a night at a shelter, in a motel with a voucher, in a place not meant for human habitation, or unsheltered. In diversion, there is a focused conversation aimed at helping the person identify an immediate housing arrangement that is a safe alternative to shelter or sleeping unsheltered. This housing arrangement may be temporary, allowing time to identify a permanent housing option while avoiding the immediate trauma of homelessness, or it may allow those involved to explore the possibility of extending a temporary arrangement into a permanent one.

Approaching diversion from a client-centered service perspective is critical. Diversion is not a process of turning people away or declining to provide needed services. Rather, diversion offers a valuable service that helps people avoid the experience of being in shelter or unsheltered. Integrating diversion practices into the system helps ensure that scarce resources are better utilized. More importantly, good diversion processes focus on serving the household in crisis by helping them find positive alternatives to entering the shelter system or staying outdoors.

Rapid Resolution

The VA’s Supportive Services for Veteran Families program may provide rapid resolution assistance for Veterans. This approach emphasizes the use of services, problem-solving conversations, and financial assistance to help households be diverted from homelessness or rapidly exit homelessness. Rapid resolution, then, encompasses both diversion and rapid exit as we have defined those terms here.

As with prevention, diversion assistance may be limited to services alone, such as conflict resolution or help connecting with family or friends. Alternatively, diversion may combine services with financial assistance, which may take a variety of forms, such as a bus pass to stay with a family member, assistance with past-due rent, or a grocery gift card for the friend with whom the person has been staying. Effective diversion involves keen active listening skills, understanding and access to community-based resources, and flexibility.

Rapid Exit

Rapid exit strategies are appropriate after a household has entered emergency shelter or stayed in an unsheltered setting, and serves to help them move as quickly as possible back into housing with the support of services and a minimal level of financial assistance.

Important Considerations and Practices

Rapid exit interventions are provided to a household as soon as possible after the household enters a shelter, a transitional housing program, or an unsheltered setting. A focus on rapid exit approaches is built upon the recognition that many people who experience homelessness can effectively resolve their own homelessness independently or with very limited help. By utilizing strengths-based, housing-focused case management, rapid exits can be facilitated for households that would not likely be prioritized for a housing intervention such as rapid re-housing or supportive housing, both of which involve deeper and longer-term rent assistance.

Rapid exit approaches often take the form of housing-focused services intended to help the person identify ways to exit homelessness quickly and, when possible, without utilizing homelessness-dedicated resources. Even when the exit does not occur quickly, attempts at resolving a person's housing crisis with housing-focused services should continue. And, because rapid exit depends primarily on case management skills, it is critical to invest in training that equips staff to provide effective light touch services and implement progressive engagement with all those in shelters and other temporary programs and through outreach. Depending on the community and funding streams, limited short-term financial assistance may also be used, when necessary, to facilitate returns to housing.

Conclusion

By integrating effective homelessness prevention, diversion, and rapid exit approaches into systems, our focus is on providing assistance earlier in a household's housing crisis. It is the goal of these approaches to lessen trauma, identify and create new pathways to housing, reduce isolation, preserve scarce housing resources, and empower households to be partners in their housing plans. Implementing these strategies can best be achieved with clarity regarding terminology, timing, and the nature of the activities and services provided. This in turn reduces the prevalence of homelessness, the length of episodes of homelessness, and trauma, all of which better serve people facing housing crises.

Because these interventions better serve households in crisis, they also improve system effectiveness by reducing inflow and expediting outflow. With system-wide prevention, diversion, and rapid exit approaches, communities will see improvements in their system performance measures – shorter lengths of time people experience homelessness, reduced numbers of households experiencing homelessness for the first time, and fewer households returning to the system.



Adopting Housing Problem-Solving Approaches with Prevention, Diversion, and Rapid Exit Strategies

Home, Together, the federal strategic plan to prevent and end homelessness in America, recognizes that to end homelessness, every community must have in place a systemic response that ensures that homelessness is a rare, brief, and one-time experience. Using a housing problem-solving approach can prevent homelessness and help people exit homelessness more quickly.

Adopting a housing problem-solving approach means helping households use their strengths, support networks, and community resources to find housing. It should be attempted with virtually everyone interacting with the homelessness services system, often more than once.

Housing problem-solving is not a new project type or component, and it typically does not operate as a standalone program. Instead, [housing problem-solving techniques](#) are used within existing programs across the entire homelessness services system.

Housing problem-solving approaches support the effective implementation of [homelessness prevention, diversion, and rapid exit strategies](#) – strategies that should be a part of every coordinated entry process and are offered as potential housing pathways for all populations.

Adopting a housing problem-solving approach across your system utilizes potentially untapped resources and may significantly improve communities' system performance measures. Housing problem-solving can reduce lengths of time homeless, numbers of households experiencing first-time homelessness, and the share of households returning to homelessness.

Housing Problem-Solving: The Practice

Housing problem-solving starts with conversations intended to:

1. Identify the household's strengths and existing support networks;
2. Explore safe housing options outside the homelessness services system, even if temporary when a part of a diversion or rapid-exit intervention; and
3. Connect the household to community supports and services.

Effective housing problem-solving involves much more than simply asking a prescribed set of questions. It is carried out by skilled, trained, and flexible staff who engage in open-ended, exploratory conversations to understand a household's strengths and existing support networks. These staff members use empathy, active

listening, conflict resolution, and mediation skills, and draw on their understanding of and access to community-based resources.

Housing problem-solving explores options that the household may not have been able to identify or felt comfortable enough to explore on their own. After identifying options, staff members determine what other types of services or supports may be necessary to make the identified option a reality.

Sometimes the solutions are as simple as mediating a conflict with a family member or connecting a household to community resources like health, social services, and employment. At other times, the solution might include one-time financial assistance. Since financial assistance isn't always necessary, communities can implement housing problem-solving regardless of whether financial assistance is available. Of course, there may also be instances when ongoing follow up is necessary to provide continued support to families as they work through conflict or other challenges.

Below are examples of services and financial assistance, depending on the funding support that may be available, that can be provided as part of a housing problem-solving approach:

Services could include:

- Strengths-based case management
- Conflict resolution
- Housing search
- Landlord-tenant mediation
- Connection to mainstream resources
- Family mediation
- Tenant legal services
- Credit repair

Financial assistance might be used for:

- Rental application fees
- Security or utility deposits
- Utility or rental arrears
- Moving costs
- Bus, train, or airplane tickets to help facilitate return to family
- Food assistance
- Car repairs, bus passes, gas, vehicle repairs, and other expenses for job-related transportation
- Costs associated with obtaining identification documents
- Employment supplies, like uniforms, work boots, or cell phones
- Employment-related training certifications

Conclusion

As communities implement multiple strategies to prevent and end homelessness, adopting a housing problem-solving approach across the system will better serve households experiencing or at risk of homelessness. Calling upon natural support systems, mainstream resources, and limited financial assistance, skilled staff can help a household avoid homelessness altogether or help them exit to housing rapidly and retain stable housing.