Before Starting the CoC Application

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

The Collaborative Applicant is responsible for reviewing the following:

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

1A. Continuum of Care (CoC) Identification

Instructions:

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1A-1. CoC Name and Number: KS-503 - Topeka/Shawnee County CoC

1A-2. Collaborative Applicant Name: City of Topeka, Kansas

1A-3. CoC Designation: CA

1A-4. HMIS Lead: City of Topeka, Kansas

1B. Continuum of Care (CoC) Engagement

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1B-1. CoC Meeting Participants.

 For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:
 1. participated in CoC meetings;
 2. voted, including selecting CoC Board members; and
 3. participated in the CoC's coordinated entry system.

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	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
EMS/Crisis Response Team(s)	No	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	Yes	Yes
Public Housing Authorities	No	No	No
CoC Funded Youth Homeless Organizations	Not Applicable	No	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes

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

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

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

The CoC coordinates a public, monthly Homeless Task Force meeting that includes an average of 40 participants, representing a wide variety of public and private organizations, as well as individual advocates, with interest and activities focused on ending homelessness. Meeting agendas always include a formal presentation on topics and/or support services related directly to homelessness (such as domestic violence, human trafficking, LGBTQ, etc.), as well as open discussions on advocacy issues (such as anti-public camping ordinances, panhandling ordinances, public transportation fee increases, etc.). Information about CoC-funded projects shared at Homeless Task Force meetings includes presentation of program progress reports, planning for and results of CoC annual monitoring, program capacity concerns, CoC local application/ranking/review processes, and, results of any HUD monitoring conducted during the period. The CoC uses information obtained from the public meetings to shape future meeting agendas and directly inform advocacy

positions with local decision-makers. An example of the CoC's use of public feedback includes the 2019 establishment of a homeless case management workgroup, requested by members of the Homeless Task Force, to better coordinate how case management is delivered after homeless individuals and families have gone through coordinated entry. Another example includes the CoC and Homeless Task Force's advocacy testimony before the Topeka City Council as the Council considered a proposed ban on public camping. The CoC provides all materials of the Homeless Task Force to members electronically, using accessible PDF formatting, and, provides paper copies of materials at meetings. The CoC accommodates requests for other formats as requests are made. Spaces where CoC Homeless Task Force meetings are held are accessible to individuals with a wide range of disabilities.

1B-2. Open Invitation for New Members.

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

The Homeless Task Force is the governing body of the Topeka area CoC. Becoming a "member" of the Homeless Task Force/CoC is as easy as coming to a meeting and signing in. The Operating Policies of the CoC/Homeless Task Force specify voting privileges are provided to members who have consecutively attended the most recent three meetings. The HTF Secretary keeps an up-to-date, dynamic electronic attendance list to help identify participants with voting privileges at each meeting. The HTF President and meeting chair, at the beginning of meetings, reminds participants of the ability to become a voting member. The Task Force Executive Committee (elected by the full membership) reviews the membership list twice per year and identifies individuals or organizations for which specific membership invitations and outreach will be initiated. Those contacts are made by individual Executive Committee members and new contacts are added to the electronic email list by the HTF Secretary, as requested. Meetings of the Task Force are announced publicly through at least two email distribution lists that, together, exceed 200 recipients. Accessible, PDF documentation is used in email distributions. Meeting announcements are also posted in social media, including the City of Topeka's website and the Facebook pages of member agencies. CoC/HTF members who participate in street outreach and direct service delivery to homeless persons are encouraged to invite persons experiencing homelessness to accompany them to HTF meetings. In fact, the 2019 HTF membership includes persons who have previously experienced homelessness.

1B-3. Public Notification for Proposals from Organizations Not Previously Funded.

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

At the July 10, 2019 Homeless Task Force meeting an announcement was made that the CoC funding process had opened and that new project application would be accepted and where, in fact encouraged. Participating organizations were specifically informed at the meeting that the CoC would consider proposals from organizations not previously funded. The meetings of the Homeless Task Force are open to the public as well as to all interested social and public agencies in the community. Additionally, the funding availability announcement is put on the collaborative applicant's website for the community at-large. Discussions about the CoC application are held at the Homeless Task Force meetings throughout the year in addition to when the NOFA opened. Non funded agencies are encouraged to a participate in discussions on accepting and rejecting of applications. Several non funded agencies volunteer and involve themselves in the appropriate committees to share and gain knowledge. This helps with future opportunities for them to apply. Specifically, our Ranking and Review committee is made up of neutral agencies for non-biased judgement for new and renewed applications.

1C. Continuum of Care (CoC) Coordination

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

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

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
Homeless Shelters	Yes

Health and Mental Health Facilities	Yes

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

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

ESG Program Recipients are required to participate in monthly informational and planning meetings of the Topeka / Shawnee County Homeless Task Force (HTF). The HTF is the governing body of the CoC. Each year, ESG fund allocation proposals are brought before the Homeless Task Force and voted on by the full body. Additionally, the HTF annually establishes a monitoring and compliance subcommittee for ESG funded agencies. This subcommittee evaluates ESG program progress
by reviewing and analyzing the quality of data entered into the HMIS, and compliance with
protocols for ESG and CoC agencies. All results from the subcommittee's evaluation are
taken back to the HTF and ESG recipients for discussion and input. Record of the ESG discussion and input is maintained in formal meeting notes kept by the CoC.

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

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

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

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

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

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

CoC partner, the YWCA Center for Safety and Empowerment (CSE), is the local domestic and sexual violence crisis center that provides trauma-informed and victim centered services to individuals and families 24 hours a day. The Center for Safety and Empowerment has worked with the CoC partners to establish a protocol where survivors can be referred to a CSE advocate who can request emergency transfer plans with Rapid Re-Housing partners, as well as those offering Permanent Supportive Housing, in cases where the client is fleeing from domestic violence. This protocol includes the completion of a comprehensive safety plan for the transfer and other system advocacy as needed for the survivor. CSE is also participating in the coordinated entry process with other CoC partners, but through an alternate process that protects the confidentiality of survivors by assigning a non-identifying client number for the coordinated entry priority list. The CoC maximizes client choice for housing for those experiencing domestic or sexual violence by allowing them to choose their own housing location of the available options with RRH partners and PSH partners, so that they may enact their safety plan and protect the location to the extent possible from the abusive party.

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

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:
1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and
2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence.
(limit 2,000 characters)

The YWCA Center for Safety and Empowerment provides annual training at the Homeless Task Force meetings on the dynamics of sexual and domestic violence, understanding risk and lethality factors, and how to best serve survivors in a trauma-informed way. Additionally, any CoC partner agency or community agency may request additional training throughout the year at no cost. (Many do.) The YWCA advocates also attend the monthly Homeless Task Force meetings to be available to provide immediate technical assistance to the CoC as consultation is requested.

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

Applicants must describe how the CoC uses de-identified aggregate data

from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

The YWCA Center for Safety and Empowerment (CSE) is a partner agency of the CoC and uses the Osnium database, which is a HUD approved comparable database. In the annual training provided to the CoC, the Center for Safety and Empowerment provides aggregate data on the numbers of clients served as well as requests for service that were unfilled due to lack of resources. YWCA data regarding needs related to domestic violence, dating violence, sexual assault and stalking is also used to inform and improve CoC practices by Homeless Task Force attendees and CoC partner agencies to address barriers to accessing safe and affordable housing.

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

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On
Topeka Housing Authority	11.00%	No	No

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

Applicants must:
1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference–if the CoC only has one PHA within its geographic area, applicants may respond for one; or
2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

The PHA does not have a homeless preference for housing in Topeka. The CoC members actively encourage and discuss with PHA representatives the need for a homeless preference in their criteria. The Executive Homeless Task Force Committee has formalized, in writing, a request for the PHA to adopt a homeless preference policy. The Homeless Task Force (HTF) will continue outreach efforts on a ongoing basis with the PHA. The PHA is regularly invited to attend the HTF meetings where they can hear the needs of the homeless population and input from homeless and social service providers.

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

Applicants must indicate whether the CoC has a Moving On Strategy with

affordable housing providers in its jurisdiction.

Yes

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

Cornerstone of Topeka, a member agency of the Homeless Task Force (which oversees the CoC), has a transitional housing program and application to the program is by referral from a social service agency that is working with the household and can verify homelessness. Examples of social service agencies that partner with Cornerstone in this work are: the Topeka Rescue Mission, public schools, churches, hospital social workers, and a wide variety of social and human service organizations. The Transitional Housing Program offers a six month lease with all utilities paid. It is the intention for the household to secure permanent housing by the end of the 6 months. Additionally, Valeo Behavioral Health Care has a "PATH" program that assists in transitioning individuals in homelessness and aims to reintegrate consumers with financial, medical, psychiatric, and housing services. The SOAR program is designed to enhance staff ability to increase access to the income benefit programs.

1C-5. Protecting Against Discrimination.

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

The Homeless Task Force has training on Fair Housing and Discrimination annually at our meetings. All agencies participate in the training Additionally, in 2019 the CoC arranged for a presentation to the Homeless Task Force by representatives of the newly opened, "Cap City Equality Center", a safe & inclusive place that supports, educates, & empowers the LGBTQ community, allies, & neighbors. Task Force participants learned of programs/services available, and, focused on ways to identify and meet the needs of the homeless LGBTQ population in our area. The executive committee of the Homeless Task Force has modified and implemented an annual training presentation on the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity, including the Final Rule. The presentation describes elements of the Rule, provides examples of applicability, and, provides citations for more information. Each of the entities submitting applications in the 2019 CoC funding process provided signed anti-discrimination assurances. Submission of the assurances was a factor in CoC project application prioritization. The CoC advocates to the local homeless shelter to allow transgender persons to reside on the side of the mission they they identify with.

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

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

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

*1C-6. Criminalization of Homelessness.

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

1. Engaged/educated local policymakers:	X
2. Engaged/educated law enforcement:	X
3. Engaged/educated local business leaders:	X
4. Implemented communitywide plans:	X
5. No strategies have been implemented:	
6. Other:(limit 50 characters)	
Opposed Anti-Camping Ordinance	X

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

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

The Homeless Task Force covers the City of Topeka limits and Shawnee County. The Coordinated Assessment System covers the same geographic area. Agencies participating are widespread across the area defined. One of the strengths of the systems is that we have several outreach teams who focus on serving the population most in need and difficult to reach. In our area the street homeless would be the least likely to received services and we have many agencies that work with this population through our system. the coordinated assessment system will triage people and house those who are most in need first. Permanent Supportive Housing placements will be prioritized for those who have been homeless on the streets or emergency shelter for at least a year and with the highest acuity, thus serving those who are most in need and most at risk if they remain on the streets, first. Every effort will be done to place people in order and as quickly as possible.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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1D-1. Discharge Planning Coordination.

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

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

1E. Local CoC Competition

Instructions

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

Applicants must indicate whether the CoC:

1. informed project applicants in its local competition announcement about point values or other ranking criteria the CoC would use to rank projects on the CoC Project Listings for submission to HUD for the FY 2019 CoC Program Competition;	Yes
2. established a local competition deadline, and posted publicly, for project applications that was no later than 30 days before the FY 2019 CoC Program Competition Application submission deadline;	Yes
3. notified applicants that their project application(s) were being rejected or reduced, in writing along with the reason for the decision, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline; and	Yes
4. notified applicants that their project applications were accepted and ranked on the CoC Priority Listing in writing, outside of e-snaps, at least 15 days before the FY 2019 CoC Program Competition Application submission deadline.	Yes

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

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

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	Yes

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

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

(1) Each of the PY2019 applications considered by the local Review and Ranking Committee were scrutinized, in part, based on the severity of needs and vulnerabilities of the proposed, target populations. The Topeka/Shawnee County Homeless Taskforce / CoC's review and ranking criteria mirrored HUD's recommended design and scoring. There were 115 total points available to each applicant, 5 of which were specifically awarded according to "severity of needs...including individuals who are low income, no income, substance abusers, victimized, or chronically homeless." An additional 5 points could be awarded in the local process if the applicant was a victim services provider, thus providing extra emphasis to the vulnerabilities experienced by the target population. (2) In the evaluation process, Review and Ranking Committee members considered both the depth and breadth of needs/vulnerabilities of each applicant's proposed, target population. Applicants demonstrating intent to support customers with multiple needs, and/or an extreme severity of need, were eligible for the highest scores in the category. For example, an applicant targeting persistently homeless, unemployed, female vets with demonstrated substance abuse conditions would have received a higher score than an applicant targeting employed homeless people.

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

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

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	X	**1. Email**	X
2. Mail	☐	**2. Mail**	☐

3. Advertising in Local Newspaper(s)	☐	**3. Advertising in Local Newspaper(s)**	☐
4. Advertising on Radio or Television	☐	**4. Advertising on Radio or Television**	☐
5. Social Media (Twitter, Facebook, etc.)	X	**5. Social Media (Twitter, Facebook, etc.)**	X
6. Did Not Publicly Post Review and Ranking Process	☐	**6. Did Not Publicly Post CoC Consolidated Application**	☐

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

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

Reallocation: 0%

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

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

Note that the Topeka/Shawnee County CoC has not reallocated the CoC's ARD in the time frame specified in the NOFA question #1E-5. As such, the processes described in 1E-5a(1-5) were not necessary.

DV Bonus

Instructions

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1F-1   DV Bonus Projects.

Applicants must indicate whether the CoC is requesting DV Bonus projects which are included on the CoC Priority Listing: No

Applicant Name	DUNS Number
This list contains no items	

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
Please submit technical questions to the HUD Exchange Ask-A-Question at https://www.hudexchange.info/program-support/my-question/

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2A-1. HMIS Vendor Identification. Eccovia Solutions

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

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

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

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	209	0	0	0.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	95	0	0	0.00%
Rapid Re-Housing (RRH) beds	2	0	0	0.00%
Permanent Supportive Housing (PSH) beds	391	0	391	100.00%
Other Permanent Housing (OPH) beds	0	0	0	

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

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

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

The CoC lead has received the Capacity Building HMIS grant and will be getting the data from the shelter uploaded into our HMIS. At the current moment they enter into a different system however, we can convert their data with this new opportunity. We have no Safe Haven beds in our community. We are also working on helping our transitional housing providers get access and encourage them to enter into HMIS. We plan to have 100% compliance by next year.

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

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

*2A-4. HIC HDX Submission Date.

Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/30/2019

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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**2B-1. PIT Count Date.
Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).** 01/23/2019

**2B-2. PIT Count Data–HDX Submission Date.
Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).** 03/01/2019

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

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

"Not Applicable". The Topeka/Shawnee County CoC and area PIT Count's incorporation of Sheltered individuals is a robust system that receives wide participation and produces strong results. In 2018, the Homeless Task Force considered results and methodologies for the Sheltered PIT Count and determined satisfaction with the total coverage of the count and types of populations captured in the count.

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

Applicants must select whether the CoC added or removed emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially-declared disaster, resulting in a change to the CoC's 2019 sheltered PIT count.   No

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

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

"Not Applicable". The Topeka/Shawnee County CoC and area PIT Count's incorporation of unsheltered individuals engages a wide variety of volunteers and area law enforcement and identifies and targets all areas of the community where unsheltered individuals are known to be.

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

Applicants must:

Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count.   No

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

Applicants must describe the CoC's actions implemented in its 2019 PIT count to better count:
1. individuals and families experiencing chronic homelessness;
2. families with children experiencing homelessness; and
3. Veterans experiencing homelessness.
(limit 2,000 characters)

The 2019 PIT Count planning committee for Topeka and Shawnee County determined that strategies used in previous years to identify and count those experiencing chronic homelessness, families with children experiencing homelessness, and Veterans experiencing homelessness were robust and sufficiently exhaustive for the size of our community and information known about the targeted populations. Changes were not made in the 2019 PIT implementation for those individuals and families.

3A. Continuum of Care (CoC) System Performance

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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*3A-1. First Time Homeless as Reported in HDX.

 Applicants must:

Report the Number of First Time Homeless as Reported in HDX.	3

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

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

The process used to identify homelessness risk factors included full-group discussions at Homeless Task Force meetings as well as at meetings of the HTF Executive Committee. CoC members identified risk factors as including, but not limited to: lack of income, disability, criminal background, human trafficking, lack of health insurance, substance abuse/addiction, domestic violence, and, adverse rental histories. Risk factors are heightened in the CoC resulting from the area's lack of affordable, decent housing as well as our community's high levels of human trafficking. Topeka is on Interstate 70, the nation's most-used transportation route for human sex traffickers. Our CoC's strategy to address individuals/families at risk for homelessness is to establish

intentional, formal partnerships that provide supports to help families and individuals mitigate the identified risk factors. 92% of the HTF member agencies actively offer supports specifically addressing one or more of the identified risk factors and attempting to prevent homelessness from occurring. HTF monthly meetings include a detailed explanation of safety net/self-sufficiency-related services, as well as explanations of which organizations have supports currently available. Note: The HMIS data insufficiently reflects the number of first-time homeless persons identified in our community. Actual information from CoC-funded agencies and anecdotal information from Homeless Task Force members puts the number of first-time homeless encountered in 2019 at an estimated 40 individuals. The CoC Lead Agency has established plans for additional training and communication with CoC and Homeless Task Force member organizations to more accurately collect first time homeless data in 2020. The Topeka CoC applied for and was awarded supplemental HMIS funds from HUD to help address such training and data needs. The Executive Committee of the HTF oversees the CoC strategies related to reducing first-time homelessness.

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

Applicants must:

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.	1,264

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

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

Placement in the CoC's Shelter Plus Care or Permanent Supportive Housing program is coordinated by an active partnership between the CoC programs, the area homeless shelter, and the area's leading mental and behavioral health services provider. The CoC-funded programs have signed MOU's with the mental health provider and in the PSH project, there is shared office-space. The formal relationships facilitate prompt reactions when eligible individuals enter the shelter or are otherwise identified as homeless. Both CoC programs have protocols in place to "fast-track" housing applications from individuals identified through our partners. For example, units in the PSH project rarely remain off-lease for longer than 5 days. In 2019, the City's SPC program successfully piloted a "housing first" approach to reach over 60 unsheltered homeless individuals. Identification and housing of individuals with longer periods of homeless histories is achieved through the CoC-funded program's work directly with the mental health provider and the homeless shelter. Those entities supply case-by-case length of homelessness data and use that data as a measure for

prioritizing referrals to the Coc-funded projects. The Homeless Task Force, the governing body for the CoC, oversees the CoC strategy to reduce the length of time individuals and families remain homeless.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	22%
2. Report the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	97%

3A-3a. Exits to Permanent Housing Destinations/Retention of Permanent Housing.

Applicants must:
1. describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;
2. provide the organization name or position title responsible for overseeing the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations;
3. describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations; and
4. provide the organization name or position title responsible for overseeing the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.
(limit 2,000 characters)

Both CoC-funded projects in Topeka are considered Permanent Housing. Thus, the same CoC strategies applicable to reducing length of homelessness (addressed in 3A-2a), are applicable in addressing retention of permanent housing. The CoC collaborates formally and actively with the area's leading mental and behavioral health center and the local homeless shelter to identify persons in emergency shelters and transitional housing and connect eligible individuals to CoC permanent housing supports. Our exit rates to permanent housing are held back only by lack of available, permanent housing funding supports and an inadequate stock of affordable, decent housing. Entering and retaining permanent housing are supported through CoC partners in the Homeless Task Force that help CoC customers with targeted, strengths-based case management, employment assistance, and supports related to the identified risk factors for becoming homeless. For example, coordinated entry and similar case-specific coordination by Homeless Task Force members often

results in recently housed individuals also receiving supports with landlord/tenant relations, job skills training, employment seeking assistance, home weatherization, access to Head Start or Early Head Start, and other strategies aimed at helping the individual(s) retain permanent housing. Our 97% housing retention rate is a strong indicator of the success of the collaborative strategy. The Homeless Task Force, as the governing body to the area CoC, is the organization responsible for overseeing the strategies to exit to permanent housing and retain permanent housing.

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

Applicants must:

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

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

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

The CoC-funded programs, along with other HUD-funded projects and organizations participating in the citywide HMIS, have kept a high level of data, over multiple years, that allows the CoC to analyze returns to homelessness as well as access to support systems by those who were formerly homeless. When a formerly homeless household or individual is noted to begin accessing a higher number of recorded support services, area helping agency staff are trained to recognize and inquire about the household's overall stability and help the individual(s) prioritize permanent housing retention. The Topeka CoC's 6 and 12 month return rate of 2% is a strong indicator of the Continuum's successful strategies and commitment to preventing recidivist homelessness. The Homeless Task Force, as the CoC governing body, is the organization responsible for overseeing the CoC strategy to reduce the rate of returns to homelessness.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	38%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	31%

3A-5a. Increasing Employment Income.

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

Each local CoC funded agency is required, through CoC application and evaluation policies, to implement strategies to increase income and employment for their customers. The CoC-funded projects (City of Topeka Shelter Plus Care and Community Action Tanglewood PSH) meet the requirement by providing case management to each participant. Case management includes a variety of assessments and support systems, including determining eligibility for mainstream benefits and/or employment supports. Opportunities, such as access to the local Workforce Center where consumers can get assistance with resume writing and job interview skills, are discussed with participants and assistance is provided to complete program applications, attend group class sessions and individual appointments, and even to attend work or training on a regular basis. Training programs offer extensive personalized employment readiness skills and opportunities. Training helps the participant increase their cash income, along with skills necessary to maintain employment. Overall CoC strategy for increased job and income growth is coordinated by the Homeless Task Force as the governing body to the CoC.

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

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

Each local CoC funded agency is required, through CoC application and evaluation policies, to implement strategies to increase income for their customers.The population targeted by the local CoC programs is, notably and historically, difficult to employ. Participation in the Community Action Tanglewood PSH program, for example, requires a diagnosis of a severe and persistent mental illness, which can oftentimes be a barrier to regular employment. Community Action staff, City of Topeka staff, and partnering

organizations (including the local mental and behavioral health center, the local Community Mental Health Center (CMHC) and area domestic violence program, assist customers who qualify for non-employment cash (like SSI) to obtain those resources. The Homeless Taskforce, which serves as the CoC governing body, oversees implementation of strategies to increase non-employment cash income, and, in 2019, members undertook new efforts to work with street outreach teams to identify homeless individuals seeking permanent housing, provide Shelter Plus Care vouchers, and follow-up with personalized case management that included assistance in accessing non-employment cash sources and mainstream benefits. The CoC, under the lead of the City of Topeka, has also been in planning stages of a new approach to working with identified homeless students and their families through a local public school district and establishing a one-stop networking center in which customers can better access benefits and supports, including non-employment cash income. As with all oversight matters, the Homeless Task Force oversees the CoC strategy on this issue.

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

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

The Topeka-area CoC-funded programs primarily work with partnering organizations to further employment goals for project participants. CoC case management includes a variety of assessments and support systems, including determining eligibility for mainstream benefits and/or employment supports. Opportunities, such as access to the local Workforce Center, brings participants interested in employment in direct contact with hundreds of job opportunities in our community. The Workforce Center hosts approximately 20 job fairs per year and CoC-project participants are notified of such opportunities through program Case Managers. As noted early, many of the Topeka-aarea CoC-program participants live with severe and persistent mental illness, which can be a barrier to increasing employment status and maintaining employment. Nonetheless, our programs encourage customers who want employment to participate in Workforce Center activities or other training and volunteer projects that may enhance their skills and eventual employability.

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

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

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

3A-6. System Performance Measures Data–HDX Submission Date   05/30/2019

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

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

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
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3B-1. Prioritizing Households with Children.

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

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

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

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

assistance ends; and
 3. provide the organization name or position title responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of them becoming homeless.
(limit 2,000 characters)

The Coordinated Assessment is completed on all households so all their needs get addressed, not just housing. Once the Coordinated Assessment is completed, households with children are prioritized in the queue of people being referred to programs. This helps them stay in their home by having other resources available to them. The Homeless Task Force members and the Coordinated Assessment Leader are responsible for achieving this strategy.

3B-1b. Antidiscrimination Policies.

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

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

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

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

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

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

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

1. History of, or Vulnerability to, Victimization (e.g., domestic violence, sexual assault, childhood abuse)	X
2. Number of Previous Homeless Episodes	
3. Unsheltered Homelessness	X
4. Criminal History	
5. Bad Credit or Rental History	

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

Applicants must describe how the CoC increased availability of housing and services for:
1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive; and
2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.
(limit 3,000 characters)

All CoC funded agencies work collaboratively with the members of the local government and the Homeless Task Force to increase the availability of housing and services for youth. Members of the Homeless Task Force attend the Mayor's Affordable Housing Task Force which has ongoing conversation related to better addressing youth homelessness. The city partners with Kansas Children's Service League that provides services to youth who are at-risk of running away, or who have run away, through federal funding under the Runway and Homeless Youth Act (RHY). The Oasis program serves youth ages 10-17 through what is called a host home program and shelter is utilized up to 21 days with the goal to resolve the conflict in the home with the parent so the youth can return to their home and no longer be on the street or living from couch to couch. As a basic entry program, Oasis provides trauma-informed individual, group and family counseling, recreational youth programs, and outreach to youth who may need assistance and aftercare services for youth after host home placement. The CoC monitors the program outcomes for accomplishments and each outcome measure is reported back to the Homeless Task Force. The Homeless Task Force has also discussed with potential partners regarding a homeless youth residential housing for at-risk/juvenile offenders/victims of trafficking and a LGBTQ+ youth homeless shelter.

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

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

The partnering agency, Kansas Children Service League, has been awarded a new funding source to assist those at-risk/homeless youth outside of Federal funding limitations. The effectiveness of the strategies are measured by the individual partners and reported to the CoC/Homeless Task Force at-least annually. As the partnering agencies within the CoC work directly with youth experiencing homelessness, the CoC/Homeless Task Force recognizes that those agencies are the most equipped to determine those measurements.

3B-1e. Collaboration–Education Services.

Applicants must describe:

1. the formal partnerships with:
   a. youth education providers;
   b. McKinney-Vento LEA or SEA; and
   c. school districts; and

2. how the CoC collaborates with:
   a. youth education providers;
   b. McKinney-Vento Local LEA or SEA; and
   c. school districts.
(limit 2,000 characters)

The CoC Lead has implemented a new project called Impact Avenues that works with the children and families identified in the school district as McKinney-Vento. An MOU has be established with the school district and wrap around services will be provided to these families during the year.
Through the Homeless Task Force, CoC funded programs network with local school districts, early childhood education providers, and a large variety of organizations providing before/after school, as well as Summer educational and recreational opportunities. The Homeless Task Force consists of several education providers that attend regularly to educate the CoC funded agencies on related issues. Community Action, which runs the CoC Tanglewood Supportive Housing program, has formal, collaborative agreements with TARC (which provides education and support services to children/families with intellectual disabilities), and runs a Head Start/Early Head Start program.

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

Education Services Eligibility.

Applicants must describe policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.
(limit 2,000 characters)

The CoC adopted a policy and procedure to inform individuals and families who become homeless of their eligibility for education services during the Coordinated Entry process. If consumers inquire about the need for educational services, the CoC then makes a referral to partnering agencies that provide/collaborate with educational service providers.

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

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

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

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

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

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

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

3B-2b. Housing First for Veterans.

Applicants must indicate whether the CoC has sufficient resources to ensure each veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach.   Yes

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

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

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

3B-3a. Addressing Racial Disparities.

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

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

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.
Please submit technical questions to the HUD Exchange Ask-A-Question at https://www.hudexchange.info/program-support/my-question/

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

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

4A-1. Healthcare–Enrollment/Effective Utilization

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

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

4A-1a. Mainstream Benefits.

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

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

The two CoC=funded programs are administered through organizations that also administer a variety of other anti-poverty and community enhancement services targeted specifically to helping low-income people improve their financial and general well-being. As such, staff at both organizations are continuously engaged in the delivery of direct supports to low-income people, including providing information to customers about available mainstream resources. Staff are kept up to date via program updates issued by the State and Federal governments, information delivered through professional webinar trainings, and, participation in community-based meetings including, but not limited to those of the monthly Homeless Task Force. The CoC is represented by the Homeless Task Force and there are, technically, just two projects funded through the CoC. Dissemination of information regarding mainstream resources typically comes directly to the two CoC projects from State and Federal government entities, or from partnering organizations in the community. Information is also shared at monthly Homeless Task Force meetings. The CoC funded projects use case management staff to collaborate with healthcare organizations to assist program participants with enrolling in health insurance. The major health care providers in the community are active participants in the Homeless Task Force, as are the managed care businesses in the State, making access to and effective use of Medicaid easier for customers served through CoC resources. The Homeless Taskforce oversees the CoC's strategy for providing mainstream benefits to customers.

4A-2. Lowering Barriers to Entry Data:

Applicants must report:

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

4A-3. Street Outreach.

 Applicants must:
 1. describe the CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
 2. state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;
 3. describe how often the CoC conducts street outreach; and

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

The CoC's street outreach efforts are primarily conducted through partnering members of the Homeless Task Force. The Topeka Rescue Mission, Valeo Behavioral Health Care, and the Topeka Police Department, have established a collaborative street outreach effort to identify and build supportive relationships with unsheltered homeless individuals. Street Outreach is occurring daily, in the urban part (City of Topeka) of our CoC geographic area of Shawnee County Kansas. The addition of the mental health partners to the street outreach efforts has helped build a higher level of comfort among persons experiencing homelessness who may be otherwise less trusting of law enforcement and/or the faith-based homeless shelter personnel. The Outreach Team provides regular updates at monthly meetings of the Homeless Task Force. Examples of the CoC's collaborative outreach work include the creation of a Google Docs link enabling HTF and other community members to see and interact with a list of resources needed for the Street Outreach Team's support of unsheltered individuals in the city. A recent "Tent Party" held to build relationships and provide services to unsheltered individuals experiencing homelessness resulted in participation by approximately 50 consumers. 17 reduced-fare bus pass IDs were distributed, 10 Topeka City IDs were distributed, 22 people completed a Grace Med referral form, 8 – 10 people received immunizations, 6 people completed the Topeka Housing Authority's pre-application, and, 39 general information surveys were completed. The next such event will be held prior to the end of 2019.

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

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

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	2	0	-2

4A-5. Rehabilitation/Construction Costs–New Projects.

No

Applicants must indicate whether any new project application the CoC ranked and submitted in its CoC Priority Listing in the FY 2019 CoC Program Competition is requesting $200,000 or more in funding for housing rehabilitation or new construction.

4A-6. Projects Serving Homeless under Other Federal Statutes.

No

Applicants must indicate whether the CoC is

**requesting to designate one or more of its
SSO or TH projects to serve families with
children or youth defined as homeless under
other federal statutes.**

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
_FY 2019 CoC Competition Report (HDX Report)	Yes	2019 Competition ...	09/10/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners' Preference.	No		
1C-4. PHA Administrative Plan Homeless Preference.	No		
1C-7. Centralized or Coordinated Assessment System.	Yes	Coordinated Asses...	09/10/2019
1E-1.Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.	Yes	Projects Accepted	09/10/2019
1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.	Yes	Projects Rejected	09/10/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	Proof of Posting	09/10/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	Local Competition...	09/10/2019
1E-4.Public Posting–CoC-Approved Consolidated Application	Yes		
3A. Written Agreement with Local Education or Training Organization.	No		
3A. Written Agreement with State or Local Workforce Development Board.	No		
3B-3. Summary of Racial Disparity Assessment.	Yes	2019 Racial Dispa...	09/12/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No		
Other	No		
Other	No		

Other	No		

2019 HDX Competition Report

PIT Count Data for KS-503 - Topeka/Shawnee County CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	**381**	**356**	**408**	**441**
Emergency Shelter Total	249	264	287	305
Safe Haven Total	0	0	0	0
Transitional Housing Total	85	58	60	68
Total Sheltered Count	**334**	**322**	**347**	**373**
Total Unsheltered Count	**47**	**34**	**61**	**68**

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	**194**	**119**	**141**	**192**
Sheltered Count of Chronically Homeless Persons	181	114	94	143
Unsheltered Count of Chronically Homeless Persons	13	5	47	49

2019 HDX Competition Report
PIT Count Data for KS-503 - Topeka/Shawnee County CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	**31**	**36**	**38**	**35**
Sheltered Count of Homeless Households with Children	31	36	38	34
Unsheltered Count of Homeless Households with Children	0	0	0	1

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	**43**	**40**	**61**	**58**	**55**
Sheltered Count of Homeless Veterans	41	31	54	49	47
Unsheltered Count of Homeless Veterans	2	9	7	9	8

2019 HDX Competition Report

HIC Data for KS-503 - Topeka/Shawnee County CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	305	0	0	0.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	68	0	0	0.00%
Rapid Re-Housing (RRH) Beds	0	0	0	NA
Permanent Supportive Housing (PSH) Beds	425	0	425	100.00%
Other Permanent Housing (OPH) Beds	0	0	0	NA
Total Beds	798	0	425	53.26%

2019 HDX Competition Report

HIC Data for KS-503 - Topeka/Shawnee County CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	0	14	14	80

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

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC			0	

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC			2	

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

Summary Report for KS-503 - Topeka/Shawnee County CoC

Measure 1: Length of Time Persons Remain Homeless

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	491	492	1048	1495	447	899	1264	365
1.2 Persons in ES, SH, and TH	491	492	1048	1495	447	899	1264	365

b. This measure is based on data element 3.17.

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

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

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2017	FY 2018	Submitted FY 2017	FY 2018	Difference	Submitted FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	493	492	1049	1495	446	899	1264	365
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	493	492	1049	1495	446	899	1264	365

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	5	0	0%	1	20%	1	20%	2	40%
Exit was from ES	1	0	0%	0	0%	0	0%	0	0%
Exit was from TH	6	1	17%	0	0%	0	0%	1	17%
Exit was from SH	0	0		0		0		0	
Exit was from PH	74	0	0%	1	1%	3	4%	4	5%
TOTAL Returns to Homelessness	86	1	1%	2	2%	4	5%	7	8%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	356	408	52
Emergency Shelter Total	264	287	23
Safe Haven Total	0	0	0
Transitional Housing Total	58	60	2
Total Sheltered Count	322	347	25
Unsheltered Count	34	61	27

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	494	492	-2
Emergency Shelter Total	494	492	-2
Safe Haven Total	0	0	0
Transitional Housing Total	0	0	0

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	194	185	-9
Number of adults with increased earned income	4	2	-2
Percentage of adults who increased earned income	2%	1%	-1%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	194	185	-9
Number of adults with increased non-employment cash income	25	17	-8
Percentage of adults who increased non-employment cash income	13%	9%	-4%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	194	185	-9
Number of adults with increased total income	28	18	-10
Percentage of adults who increased total income	14%	10%	-4%

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	82	88	6
Number of adults who exited with increased earned income	9	6	-3
Percentage of adults who increased earned income	11%	7%	-4%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	82	88	6
Number of adults who exited with increased non-employment cash income	29	27	-2
Percentage of adults who increased non-employment cash income	35%	31%	-4%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	82	88	6
Number of adults who exited with increased total income	34	33	-1
Percentage of adults who increased total income	41%	38%	-3%

2019 HDX Competition Report
FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1	3	2
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.	1	3	2
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)	0	0	0

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

	Submitted FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	208	278	70
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.	12	19	7
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.)	196	259	63

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2018 (Oct 1, 2017 - Sept 30, 2018) reporting period.

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

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	119	207	88
Of persons above, those who exited to temporary & some institutional destinations	10	31	21
Of the persons above, those who exited to permanent housing destinations	52	14	-38
% Successful exits	52%	22%	-30%

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

FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	3	87	84
Of the persons above, those who exited to permanent housing destinations	3	78	75
% Successful exits	100%	90%	-10%

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

	Submitted FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	501	515	14
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	477	502	25
% Successful exits/retention	95%	97%	2%

2019 HDX Competition Report

FY2018 - SysPM Data Quality

KS-503 - Topeka/Shawnee County CoC

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

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

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

2019 HDX Competition Report
FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	314	314	261	273	78	100	62	95	400	420	380	391				2				
2. Number of HMIS Beds	234	234	40	20	78	29	30	15	400	420	380	391				0				
3. HMIS Participation Rate from HIC (%)	74.52	74.52	15.33	7.33	100.00	29.00	48.39	15.79	100.00	100.00	100.00	100.00				0.00				
4. Unduplicated Persons Served (HMIS)	0	330	493	492	0	0	73	95	0	840	494	520	0	330	37	104	0	34	129	0
5. Total Leavers (HMIS)	0	2	13	2	0	0	5	0	0	840	115	123	0	330	37	50	0	0	86	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8	0	0	0	0
7. Destination Error Rate (%)		0.00	0.00	0.00			0.00			0.00	0.00	0.00		0.00	0.00	16.00			0.00	

2019 HDX Competition Report
Submission and Count Dates for KS-503 - Topeka/Shawnee County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/23/2019	

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	3/1/2019	Yes
2019 HIC Count Submittal Date	4/30/2019	Yes
2018 System PM Submittal Date	5/30/2019	Yes

Topeka/Shawnee County Continuum of Care Coordinated Assessment System

Policies & Procedures

Rev. 8/9/2017

TABLE OF CONTENTS

1. **Background**
   a) *What is Coordinated Assessment?*

Coordinated Assessment (also known as Coordinated Entry) is a consistent, community process to match people experiencing homelessness to community resources that are the best fit for their situation. In a community using coordinated assessment, homeless individuals and families complete a standard triage assessment survey that identifies the best type of services for that household. Participating programs accept referrals from the system, reducing the need for people to traverse the county seeking assistance at every provider separately. When participating programs do not have enough space to accept all referrals from the system, people prioritized for services based on need.

In Topeka Shawnee County we plan to start phase one of coordinated assessment with permanent housing programs (permanent supportive housing and rapid rehousing), and in later phases add other resources, such as emergency shelter.

   b) *HUD Requirement*

Under the interim rule for the U.S. Department of Housing and Urban Development's (HUD) Continuum of Care (CoC) program, each Continuum of Care(CoC) must establish and operate a centralized or coordinated assessment system (24 CFR 578.7(a)(8)). HUD defines a centralized or coordinated assessment system as "a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool" (24 CFR 578.3).

Participation in the coordinated assessment system is required for grantees HUD CoC and Emergency Solutions Grant (ESG) funds.

   c) *Community Vision*

Our community vision for coordinated assessment is that we all have a fully engaged coordinated assessment system with standardized assessment and all emergency shelter, transitional housing, permanent supportive housing, and rapid rehousing placements made through system. Coordinated assessment will encompass all populations and prioritize and place people effectively and efficiently, quickly matching people to the housing type that is most likely to get them permanently housed.

In phase one, the coordinated assessment process will provide referrals for permanent housing interventions, including permanent supportive housing and rapid rehousing. Later phases of implementation will add assessment and referral processes for emergency shelter and transitional housing.

d) *Benefits of Coordinated Assessment*

Coordinated assessment will benefit our community by:

- Using existing resources effectively by connecting people to the housing program that is the best fit for their situation.
- Reducing the need for people to call around to multiple housing programs and fill out multiple applications to join waitlists. Coordinated assessment will assess people for all participating permanent housing programs at the same time.
- Providing clear communication about what housing is available.
- Collecting information about how many people in Topeka/Shawnee County need different types of housing. This information will help us advocate for more resources to provide housing and services to homeless people in Topeka/Shawnee County.

2. System Overview

In Topeka/Shawnee County's Coordinated Assessment system, all homeless individuals and families will complete a standard triage assessment survey that considers the household's situation and identifies the best housing intervention to address their situation. The standard triage assessment survey that will be used in Topeka Shawnee County is the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT). The VI-SPDAT will be integrated into the standard HMIS intake for people who are homeless and conducted at HMIS partner agencies, including service centers, transitional housing programs, and outreach programs: anywhere that people who are homeless first encounter our system of care.

Permanent housing programs, including permanent supportive housing and rapid rehousing, will fill spaces in their programs from a community queue of eligible households generated from HMIS. The queue will be prioritized based on length of time homeless and VI-SPDAT scores to ensure that we house those with the greatest need first. This coordinated process will reduce the need for people to traverse the county seeking assistance at every provider separately.

3. Access Points

a) *Requirements for Access Points*

Access points are locations where people who are homeless can complete the assessment survey to participate in coordinated assessment. To ensure access to emergency services during hours where the collaborative applicant is not operating, the survey will be available on the website. In Topeka/Shawnee County, all CoC and ESG funded partner agencies will serve as access points and the triage assessment survey (VI-SPDAT) will be incorporated into the standard HMIS intake.

In order to participate as an access point, organizations must have a current, signed HMIS partner agency agreement and meet the following requirements:

1) Participate in HMIS and follow all HMIS user agency requirements (domestic violence victim service providers are exempt from this requirement).
2) Agree to follow the community guidelines for completing the assessment and communicating about the coordinated assessment system.
3) Agree to provide additional referrals to other community services, as appropriate, to people completing the assessment.

b) *Communication and Frequently Asked Questions*

As the original point where people connect with the coordinated assessment system, access points are also likely to get questions from people asking about their status on "the list" and when they will get referred to housing. Organizations should be able to:

1) Check HMIS to determine if the individual or household has a current (less than one year old) VI-SPDAT entered in HMIS.
   a. If so, communicate to the individual or household that they are current in the system and will be contacted if services that are good fit for them become available.
   b. If the individual / household do not have any record of a VI-SPDAT in HMIS, work with them to complete the standard HMIS intake and VI-SPDAT.
   c. If the individual's/ household's VI-SPDAT is over one year old, have them complete an annual update.
2) Check to make sure that the individual's/household's contact information is current and up to date it if needed.

Organizations should not communicate the individual's or household's number or place in the community queue in HMIS as this placement may change frequently as new assessments are entered into the system.

c) *Outreach and Marketing*

An outreach strategy will be developed to reach all individuals and families who are homeless within Topeka Shawnee County. This strategy will be implemented in phases to facilitate a more manageable transition to the new system.

- **Phase One – Late 2017:** HMIS partner agencies will serve as access points, providing a diverse, countywide network of service providers that are easily accessible to homeless individuals and families throughout the country. Additionally, domestic violence providers will serve as access points for domestic violence survivors. Together, these organizations reach tens of thousands of individuals each

year and provide services including outreach, shelter, drop-in services, and transitional housing providing a built-in network of reaching homeless people throughout the community.

- **Phase Two – Early 2018:** Additional outreach will be developed to spread information about coordinated assessment to non-CoC member organizations that serve people that are homeless, including schools, hospitals, libraries, and government offices. This phase of outreach will be delayed to avoid overwhelming the new system in the beginning when organizations will be assessing all of their current clients.

4. **Assessments**

a) *The VI-SPDAT*

Topeka Shawnee County uses the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) as the standard triage assessment tool. This assessment will be used for all homeless individual and households in Topeka/Shawnee County. There are three versions of the VI-SPDAT in use for different populations:

- Individuals
- Families
- Transition Age Youth

The VI-SPDAT is to be completed by all individuals and families who are homeless under Category 1 (Literally Homeless) and Category 4 (Fleeing Domestic Violence) of HUD's definition of homelessness. The VI-SPDAT will be conducted as part of the standard HMIS intake.

b) *Training and Authorization of Users*

The VI-SPDAT can only be conducted by staff or volunteers who have successfully completed training and been authorized by COT.

COT staff will monitor the quality and consistency of assessments entered into HMIS and provide feedback, training, and adjustments to policies and procedures as necessary to address issues that may arise.

c) *Confidentiality and Releases of Information*

The VI-SPDAT is covered under the standard HMIS Release of Information (ROI). The ROI authorizes HMIS partner agencies to conduct the HMIS intake and the VI-SPDAT, enter the information in HMIS, and share the individual's or household's information with other

participating organizations in order to facilitate connecting the household with housing and services. The ROI *MUST* be completed and uploaded into HMIS before any other information, including the VI-SPDAT, including the VI-SPDAT, can be entered into HMIS.

> d) *Conducting the Assessment*

The VI-SPDAT will be conducted as part of the standard intake for HMIS and as part of annual updates in HMIS. It may be directly entered into HMIS or completed or paper and then entered into HMIS.

The VI-SPDAT should be conducted in a setting that promotes privacy and confidentiality. The staff member or volunteer conducting it must follow the community guideline for explaining what the assessment is and how coordinated assessment works.

All of the questions on the VI-SPDAT are designed to be answered with one-word "yes" or "no" answers. There is no need for respondents to go into detail describing their situation or past history. Respondents should be told that it is important to answer the questions honestly and accurately in order to match them to the best services for them.

The VI-SPDAT and HMIS standard intake must be conducted in person and the release of information must be uploaded into HMIS.

After completing the assessment, the volunteer or staff member should provide the individual/household with referrals to meet immediate needs. It is very unlikely that a housing placement will be available immediately or even in the near term, due to the overwhelming need in our community. Thus, it is important to provide information about resources that can meet immediate needs, such as shelter, food, and health care.

Individuals and households that score in the low acuity range should be provided with referrals to other resources to meet their housing needs, since they will not matched with permanent supportive housing or rapid rehousing. Referrals should be based on the individual's/household's specific situation.

> e) *Updates to Assessments*

As long as individuals/families remain homeless, they should complete the VI-SPDAT annually to capture changes in their circumstances. In addition, individuals/households may complete an update whenever they experience a significant change their circumstances. The update would include an HMIS update and a new VI-SPDAT.

5.   Community Queue

Topeka/Shawnee County maintains a community queue in HMIS based on the VI-SPDAT scores and intake records in HMIS. HMIS also contains the inventory and eligibility criteria for each

permanent housing provider, including permanent supportive housing and rapid rehousing programs.

a) *Match to Program Type*

Topeka/Shawnee County uses the VI-SPDAT to determine the best type of housing interventions for the individual or household being assessed. Those who are identified to have high acuity are referred to permanent supportive housing. Those with moderate acuity are referred to rapid rehousing. People who are assessed to be low acuity most likely will be able to resolve their homelessness without a housing intervention. Since Topeka Shawnee County has limited housing capacity, housing interventions will be prioritized for those who most need it. Individuals and households with low acuity will be referred to other, non-permanent housing interventions. This could include deposit assistance and/or make sure they are connected to public benefits, and referring to other services in the community.

b) *Prioritization*

Topeka/Shawnee County has a significant shortage of housing opportunities compare to the need. Thus, the coordinated assessment system will triage people and house those who are most in need first. Permanent Supportive Housing placements will be prioritized for those who have been homeless on the streets or emergency shelter for at least a year and with the highest acuity, thus serving those who are most in need and most at risk if they remain on the streets, first. Persons doing street outreach will screen individuals in the same manner as any other person who is assessed with coordinated entry. All individuals can abstain from disclosing and sharing information.

Using VI-SPDAT scores, individuals/households are assigned to the most appropriate type of housing intervention (permanent supportive housing, rapid rehousing, or no housing intervention). Within those groups, individuals and households will be prioritized based on:

Permanent Supportive Housing Prioritization Criteria:

1) VI-SPDAT Score – Those who have been on the street, in emergency shelter, and/or places not meant for human habitation for at least a year with the highest acuity will be served first.
2) Length of Time Homeless - Among those with the same VI-SPDAT score, individuals, households who have been homeless the longest will be prioritized first.
3) High Use of Services – Among those with the same VI-SPDAT score and the same length of time homeless, individuals/households will be prioritized based on those with the highest utilization served first.

To reflect our commitment to serve those most in need and most at risk, the CoC will work with all CoC funded permanent supportive housing projects to phase in turnover beds to be dedicated or prioritized for the chronically homeless.

Rapid Rehousing Prioritization Criteria:

1) VI-SPDAT Score – Those with the highest score within the rapid rehousing range will be served first.
2) Risks Score – Among those with the same VI-SPDAT score, individuals/households with the highest Risks sub-score in the VI-SPDAT will be prioritized first.
3) Length of Time on the Community Queue - Among those with the same VI-SPDAT score and the same Risks score, individual/households will be served in the order they completed the assessment.

6.   Housing Referrals

a)   Matches to Housing Opportunities

Matches are facilitated by staff in the City of Topeka (COT). When a permanent housing program has space available, the designated COT representative will use the community queue in HMIS to identify the household or individual to be referred by:

1) Filtering the community queue based on the type of housing intervention (permanent supportive housing or rapid rehousing) so that is pulls a list of individuals/households that have matched to that type of housing.
2) Filtering the community queue based on the eligibility criteria of the housing program.
3) Prioritizing the community queue based on the prioritization methodology described above.

The COT representatives will then make a referral in HMIS to the permanent housing program.

COT staff will provide human judgment and discretion in making referrals based upon the prioritization and match-making methodology laid out in this document. Discretion may include taking into account a client's known preferences when making matched, avoiding referrals to programs where an individual/household has had a serious violation in the past and addressing inconsistencies or concerns in the assessment or eligibility information entered in HMIS.

a)   Provider Responsibilities

When a permanent housing program receives a referral in HMIS, the provider will follow these steps:

1) **Locate the Individual/household:** It is expected that the provider will **make at least 3-5 reasonable attempts** to find the individual/household. In addition to trying to contact information in the person's HMIS account, attempts should include seeking the person out in locations and at other service providers that they are known to frequent.

   a. All attempts to find the individual/household must be documented in HMIS.

2) **Verify eligibility:** Information in the individual's/household's HMIS account (including the VI-SPDAT) is primarily self-reported. Providers will need to conduct their own program intake and documentation of eligibility.

3) **Enter the individual/household into the program in HMIS.**

If the individual/household turns out to be ineligible for the program, they will be referred back to the community queue and COT staff will initiate a new match. The program should provide information regarding why the individual/household was not eligible and a note will be made in HMIS. Depending on the reason for ineligibility, COT staff may initiate a review of the client's information and/or request that the client complete an updated assessment (for example, if inaccurate or out of date information on the assessment led COT to believe the client would be eligible).

If the individual/household declines a referral, they will be referred back to the community queue and COT staff will initiate a new match. Individuals/households have the right to decline any and all referrals. COT staff will continue to offer referrals as many times as it takes to match the individual/household with housing. However, COT will follow some basic guideline:

1) COT staff will not re-refer an individual or household to the same program multiple times if the person/household has communicated that they are not interested in that program. Instead, the individual/household will be referred to other programs in the community.

2) If an individual/household declines 3 referrals, COT staff will wait three months before making the next referral.

3) If an individual/household declines 6 referrals, COT staff will communicate with the individual/household that they will not be given any new referrals until they inform COT that they are interested in receiving a new referral.

   c) *Project Specific Wait Lists*

One of the benefits of coordinated assessment is that it simplifies the path to housing by replacing the multitude of existing project specific wait lists with a shared community queue. However, some projects have requirements form their funders that may conflict with coordinated assessment. In those situations, COT will work with the provider to determine the best possible way to participate in coordinate assessment.

7.   Confidential Process for Domestic Violence Survivors

A separate, confidential process is available for domestic violence survivors who are receiving services form designated domestic violence service providers in the community. This process allows service providers to maintain confidentiality and safety for their clients, while also ensuring that homeless survivors have access to the full array of housing opportunities in the

community. The YWCA- Center for Safety and Empowerment has a hotline to ensure safety planning and protections to victims of domestic violence not staying at the shelter.

a)   Assessment

The participating domestic violence service providers will conduct the VI-SPDAT triage assessment with the individuals and families staying in their shelters and transitional housing programs. These service providers are prohibited by law from using HMIS, so the VI-SPDAT and additional eligibility criteria that is usually included in the HMIS standard intake will be completed on a paper form. This modified intake form will only include the minimum information necessary to determine eligibility and prioritization and it will specifically exclude personally identifying information, including: name, date of birth, social security number, and last permanent address. The service provider completing the form will include the name of the agency, the appropriate staff contact, and an alternate staff contact. All communication about the assessment and any possible placements will be conducted through the service provider to maintain client confidentiality. The domestic violence service provider will include an internally generated ID number that the agency can associate with the client, but that cannot otherwise be identified with the client. COT staff will use the number to identify the client when communicating with the service provider.

b)   Community Queue

COT will maintain a separate Community Queue outside of HMIS for survivors referred by domestic violence service providers. No client data will be entered into HMIS, in order to maintain confidentiality and safety for survivors and compliance with federal law. Anytime there is an opening in a permanent housing program, COT staff will reference both the HMIS community queue outside of HMIS to determine the most highly prioritized eligible individual/household.

c)   Housing Referrals

When an anonymous client from a domestic violence service provider receives a housing referral, OSH staff will contact the service provider. It is the responsibility of the service provider to reach out to the client and connect them with the permanent housing provider. The standard policies regarding the length of time to look for someone and the individual's/household's right to decline a referral still apply.

8.   **Transition Process -** *Existing Project Specific Wait Lists*

COT will work with projects that have existing project-specific wait lists to transition to using coordinated assessment to fill program spaces. Transition plans will be made on a project-by-project basis and will take into account funding and regulatory requirements specific to each project. Some possible transition plans include:

1) **One-Time Transition** – The project notifies every individual or household on their wait list that they will change the method for accepting applicants. Everyone on the wait list is directed to complete the VI-SPDAT at an access point organization. The wait list is disbanded and the project begins filling all units from community queue referrals.

2) **Phased Transition** – The project designates some portion of their units to be filled utilizing coordinated assessment, while continuing to fill the remaining units from the existing wait list until it is gone. No new individuals or households should be added to the project specific wait list.

9.   Administrative Structure

a)   *System Oversight*

Oversight of the coordinated assessment system, including implementation of the VI-SPDAT, community queue, prioritization and match-making, will be provided by the City of Topeka (COT). COT serves as the Topeka/Shawnee County CoC's collaborative applicant and is a member of the CoC Board and the CoC Coordinated Assessment Work Group.

b) *Grievance Procedures*

Any person participating in the coordinated assessment process has the right to file a grievance. Grievances related to a particular service provider (for example, a grievance related to how an assessment was conducted at a particular provider) should be resolved through that provider's grievance procedure. Grievances specific to the coordinated assessment system (for example, a grievance related to the match making process), should be forwarded to COT.

c) *Revisions to Policies and Procedures*

The Policies and Procedures document will be reviewed and, if necessary, updated at least annually by Coordinated Assessment Work Group and COT staff.

d) *Participating Providers:*

All CoC and ESG funded service providers must participate in the coordinated assessment system. For permanent housing providers (both rapid rehousing and permanent supportive housing) that means working with the coordinated assessment system to take referrals from the community queue. The CoC strongly encourages all other permanent housing providers with housing dedicated to people who are homeless to participate as well.

10.   Definitions

- **Chronic Homelessness –** HUD's definition of chronically homeless is an individual (or a family with an adult head of household) who:
    - Is homeless and lives in a place not meant for human habitation, a safe haven, or an emergency shelter;
    - 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 on year or on at least four separate occasions in the last three years; AND
    - Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, and developmental disability, and post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability.

  An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and who meet all of the criteria above before entering that facility is also considered chronically homeless (24 CFR 578.3).

- **Collaborative Applicant –** The eligible applicant that has been designated by the Continuum of Care to apply for a grant for Continuum of Care planning funds on behalf of the Continuum. The collaborative applicant for Topeka Shawnee County is the Office of Supportive Housing.

- **Community Queue –** A prioritized list in HMIS of people who have completed the triage assessment survey and are in need of permanent housing. The list can be sorted by basic eligibility criteria and is prioritized so that individuals and families with the greatest need are housed first.

- **Continuum of Care (CoC) –** The Topeka Shawnee County Continuum of Care carries out the responsibilities required under HUD regulations, set forth at 24 CFR 578 – Continuum of Care Program. The CoC is comprised of a broad group of stakeholders dedicated to ending and preventing homelessness in Topeka Shawnee County. CoC membership is open to all interested parties and included representatives from organizations within Topeka Shawnee County. The overarching CoC responsibility is to ensure community-wide implementation of efforts to end homelessness and ensuring programmatic and systemic effectiveness of the local continuum of care program.

- **Emergency Solutions Grant (ESG) –** ESG is a grant program of the U.S. Department of Housing and Urban Development (HUD) that funds emergency assistance for people who are homeless or at-risk of homelessness. ESG grantees are required to participate in Coordinated Assessment.

- **Homeless –** HUD's definition of home (24 CFR 578.3) has four categories:
  - **Category 1 –** Literally homeless individuals/families
  - **Category 2 –** Individuals/families who will imminently lose their primary nighttime residence with no subsequent residence, resources, or support networks.
  - **Category 3 –** Unaccompanied youth or families with children/youth who meet the homeless definition under another federal statute.
  - **Category 4 -** individuals/families fleeing or attempting to flee domestic violence.

- **Homeless Management Information System (HMIS) –** a local information technology system used to collect data on the provision of housing and services to homeless individual and families.

- **Housing and Urban Development (HUD) –** The United States Department of Housing and Urban Development.

- **Literally Homeless –** Category 1 of HUD's definition of homelessness. Literally homeless means an individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning the individual or family has a primary nighttime residence that is a public or private place not meant for human habitation, the individual or family is living in a public or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by charitable organization or federal, state, or local government programs), or the an emergency shelter or place not meant for human habitation immediately before entering that institution.

- **Permanent Supportive Housing (PSH) –** a type of permanent housing designed for chronically homeless and other highly vulnerable individuals and families who need long-term support to stay housed. Permanent supportive housing provides housing linked with case management and other supportive services. Permanent supportive housing has no time limitation, providing support for as long as needed and desired by the resident.

- **Rapid Rehousing (RRH) –** The consent form that individuals/households complete and sign to gran consent for their personal information to be entered into HMID and used for coordinated assessment. Signing the release of information is not required to participate in coordinated assessment and receive referrals for housing; however, it is required that information be entered into HMIS.

- **Service Prioritization Decision Assistance Tool (SPDAT) –** an assessment tool that is designed to help guide case management and improve housing stability outcomes.

- **Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) –** a pre-screening tool that can be conducted to quickly determine whether a client has high, moderate, or low acuity.

TOPEKA/SHAWNEE COUNTY

HOMELESS
TASK FORCE

August 23, 2019

To: Corrie Wright, City of Topeka

The letter is your notification that you application for the CoC Planning Grant was accepted by the review and ranking committee.

Please let me know if you have any questions.

Thank you,

Doug Wallace
Review and Ranking Committee
Topeka / Shawnee County Homeless Task Force

TOPEKA/SHAWNEE COUNTY

HOMELESS
TASK FORCE

August 23, 2019

To: Corrie Wright, City of Topeka

The letter is your notification that you application for the Permanent Housing Project was accepted by the review and ranking committee. Your application was ranked second.

Please let me know if you have any questions.

Thank you,

Doug Wallace
Review and Ranking Committee
Topeka / Shawnee County Homeless Task Force

2019 Review and Ranking Committee Decision

The review and ranking committee ranked the projects in the following order:

_3_ City of Topeka - Planning Grant (not ranked, accepted or rejected)

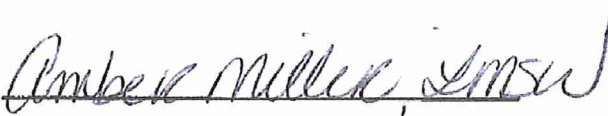_2_ City of Topeka -- Shelter Plus Care Program

_1_ Community Action - Tanglewood Program

Rejected Winifred Carter - U Can Begin Again

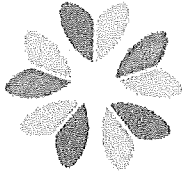By signing I agree to the ranking outlined above on August 19, 2019:

_____

Doug Wallace

_____

Amber Miller

_____

Dora Coronel

TOPEKA/SHAWNEE COUNTY

HOMELESS
TASK FORCE

August 23, 2019

Barbara Wright
You Can Begin Again, Inc
2401 SE 11th Street
Topeka, Ks 66607

To: Ms. Barbara Wright, You Can Begin Again, Inc

This letter is to notify you that your new project application for CoC Bonus funds was rejected by the Review and Ranking committee. The committee did not feel the application met the criteria established by HUD for a Joint TH & PH-RRH project.

Please let me know if you have any questions.

Thank you,

Doug Wallace
Review and Ranking Committee
Topeka / Shawnee County Homeless Task Force