

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 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 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:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: MA-508 - Lowell CoC

1A-2. Collaborative Applicant Name: City of Lowell, Massachusetts

1A-3. CoC Designation: CA

1A-4. HMIS Lead: City of Lowell, Massachusetts

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	Yes	No
Hospital(s)	Yes	Yes
EMS/Crisis Response Team(s)	Yes	Yes
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	No
Disability Advocates	Yes	No
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Not Applicable	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	No
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	No
LGBT Service Organizations	Yes	No
Agencies that serve survivors of human trafficking	Yes	No
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Mental Illness Advocates	Yes	Yes
Substance Abuse Advocates	Yes	No

Other:(limit 50 characters)		
N/A	Not Applicable	No

1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 2,000 characters)

The CoC regularly coordinates with other organizations and systems of care working to end homelessness to solicit, determine and implement strategies to meet that shared goal of preventing and ending homelessness in Lowell. CoC board members are active in the community and there is significant overlap between CoC membership and Lowell’s Hunger Homeless Commission (HHC). The HHC holds monthly meetings and the CoC makes regular presentations to solicit and consider opinions, and to ensure that the CoC and the HHC are pursuing the same goals and addressing the same challenges. The HHC has broad participation from across the City, while fulfilling the requirements of a City Commission.

First responders including police and emergency medical staff have been regular attendees at the CoC meetings. The City of Lowell, like many communities, is facing a significant opioid crisis. The response to this crisis overlaps with the community's response to homelessness and there is overlap between these organizations and people as the Lowell Transitional Living Center (LTLC) has a grant from the MA Department of Public Health which they use to provide services to people in their shelter program.

The veterans subcommittee has identified organizations and locations around the City where homeless veterans seek services including the VA, SSVFs, State and local CAP and PHA agencies that will continue to work together to prevent and end Veterans homelessness. The LTLC houses various programs to support individuals experiencing homelessness including those experiencing chronic homelessness. Community Teamwork hosts various classes and workshops to empower people and give them skills. These workshops are available to people that obtain services in other programs.

**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 often the CoC solicits new members; and
(4) 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 CoC has an inclusive membership and open invitation process to join that is publicly available to individuals and agencies within the CoC and throughout

the region. Membership in the CoC comes from regional and statewide agencies as well as representatives of government entities such as the Department of Mental Health, and the Department of Transitional Assistance as well as the local police department of representatives from the City's Planning Department. The CoC includes many individual members from the Greater Lowell area. The CoC has a dedicated page on the City's website and the CoC staffs a table at local events and fairs. Nonprofit organizations that provide housing and services to people experiencing homelessness are encouraged to participate in strategic discussions, as well as by sharing data to measure both project and system performance.

At Hunger and Homeless Commission monthly meetings participants are routinely invited to join the CoC and participate in CoC meetings and workshops; many others learn of the opportunity through member word of mouth; and outreach to organizations and other systems of care addressing homelessness is regularly undertaken by CoC Board members and the City of Lowell as staff to the CoC and Collaborative Applicant. In addition, an open invitation appears on the City's Continuum of Care webpage for anyone interested in participating.

1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals. (limit 2,000 characters)

On July 30, 2018 the CoC published a request for proposals in the Lowell Sun newspaper and on July 10th, 2018, the notice was posted on the City's CoC webpage, and on bulletin boards within City buildings. Email solicitations were sent to a variety of agencies and stakeholders on July 2nd. The notice was available at the Hunger and Homeless Commission's monthly meeting and the CoC broadened an invitation to a July meeting to discuss funding available through reallocation, housing and DV bonus projects. The CA/Department of Planning and Development also announced that it will provide technical assistance in understanding federal regulations and application submission details to entities not previously funded by the CoC Program.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

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)	Not Applicable
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)	
	Not Applicable
	Not Applicable

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; and
 (2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.
 (limit 2,000 characters)

There is 1 Consolidated Plan jurisdiction and both CoC and CP are administered by Lowell’s Department of Planning and Development (DPD).
 (1) The DPD/CA consults with CP ESG and HOWPA recipients within the geographic area on the plan for allocating ESG and CoC funds and reporting on

and evaluating the performance of ESG and CoC subrecipients. ESG & CoC recipients, CAP agency and others, and DPD/CA also interact at the HMIS/Coordinated Entry System (CES) monthly meetings.

(2) CoC and CP are in the same office, 2 staff currently access/oversee HMIS PIT, HIC, Data Scorecards, Systems Performance Measures reporting for all HUD programs related to homelessness including the CP. DPD/CA also solicits input in developing Annual Action Plans online from the community at large through the city's website; and more directly through meetings with their Community Action Committee, CoC Advisory Board, CoC subcommittees and Hunger Homeless Commission.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area? Yes to both

1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)? No

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 the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and
(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.
(limit 2,000 characters)**

Lowell has several resources available for people experiencing domestic violence including shelter and housing programs, and public and private community-based services. People fleeing domestic violence, dating violence sexual assault and stalking survivors will find safety and support in Lowell. There are several ways that people may access services. Alternative House is the domestic violence services provider in the region. There is also a domestic violence coordinator that works out of the City's Department of Transitional Assistance Office. Whether seeking emergency shelter or community-based services, all survivors receive a safety assessment, safety planning and access to a range of services. Alternative House has emergency shelter (ES), transitional housing (TH), and permanent housing (PH) programs dedicated to people fleeing domestic violence. CTI's New Horizons program ensure that persons fleeing DV have access to housing and services that prioritize their safety and accommodate their unique circumstances and needs. The AH ES program is funded through the ESG program while the TH program is funded through the CoC. CTI's New

Horizon’s program is funded through the MA Emergency Assistance program. AH chairs the DV Task Force that brings together victim services, non-victims providers, educational, healthcare and correctional institutions, and business leaders to educate and engage the community on DV, family and teen safety. This task force also identifies all housing options in order to maximize client choice for housing. This will be enhanced if the CoC is funded for a new RRH bonus project. All CoC service and housing providers ensure and maintain safety for clients through comprehensive personalized safety plans including emergency transfers when necessary . AH provides training on confidentiality and privacy rights of DV survivors, included in the Violence Against Women Act and MA state law to CoC and non-CoC members.

1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

Alternative House provides training on confidentiality and privacy rights of DV survivors, included in the VAWA and MA State law to CoC and non-CoC members. Danger risk assessment training is discussed at Lowell’s Hunger Homeless Commission meetings with annual trainings at provider locations. The CES process is evolving with a CoC planning grant and funding for a CES project manager. Currently DV clients enter the CES through a comparable system initiated by 3, 24/hour hotlines Massachusetts SafeLink, National Domestic Violence or locally AH hotline. (2) AH tracks aggregate data, comparable CoC data, statistics and best practices related to DV, dating violence, sexual assault, bullying, stalking, and leads the area’s DV Task Force. (3) The comparable CES assesses the danger and specific areas of vulnerability for adults and children. Assessments are used to prioritize survivors in the greatest danger. AH training ensures that assessments are handled in a sensitive and appropriate manner.

1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)

The region continues to advance the use of HMIS data for all programs including tracking information related to domestic violence in order to meet the needs of people with DV histories that are entering the homeless response system. Alternative House is the lead DV agency in the region and they are members of the Jane Doe Inc., the Massachusetts Coalition Against Domestic Violence and Sexual Assault. Alternative House monitors and tracks the needs of domestic violence victims through a variety of ways: 24 hour, staffed crisis hotline; through community based advocates placed at Lowell District Court House and CTI’s resource center, as well as through clients submitting applications for our transitional housing program. Alternative House receives thousands of calls a year for survivors requesting shelter, support groups, financial assistance, safety planning or general support. As of June 30th, 2018 we received 1,401 crisis hotline calls on our 24-hour crisis hotline from victims

seeking services and/or shelter. CoC members also collaborate on cases involved domestic violence, as needed. This information is tracked through the members various HMIS reporting systems. Moving forward, reports and dashboards will be used to demonstrate the scope of community needs as well as the efficacy of the response over time.

**1C-4. DV Bonus Projects. Is your CoC Yes
applying for DV Bonus Projects?**

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

SSO Coordinated Entry	<input type="checkbox"/>
RRH	<input type="checkbox"/>
Joint TH/RRH	<input checked="" type="checkbox"/>

1C-4b. Applicants must describe:

- (1) how many domestic violence survivors the CoC is currently serving in the CoC’s geographic area;**
- (2) the data source the CoC used for the calculations; and**
- (3) how the CoC collected the data.
(limit 2,000 characters)**

The region serves individuals and families experiencing domestic violence in a variety of capacities.

1. Approximately 72 people in families with children who are experiencing domestic violence and homelessness are seen in our designated family shelters every night. The State funded Emergency Assistance program also serves a large number of people experiencing domestic violence and a report shows that of the 375 people that responded to this question, 111 -or 29% report a history of domestic violence. In addition, 33 people reported domestic violence within the emergency shelter that serves individuals. It is important to note that of those people that responded to the question regarding domestic violence, half reported having experienced it.

Additionally, there are also six units of supported permanent housing that serve 15 people. Community-based services such as a crisis hotline, financial literacy classes, and meals reach an additional 10-25 people each day at Alternative House and an additional 20 clients per month come through the Resource Center at CTI who identify as needing domestic violence services.

2. Tracking data for people experiencing domestic violence is a challenge due to the needs regarding confidentiality. For data from DV programs, we used what we captured on the night of the Point in Time count, from HMIS comparable data sources, and agency files. We used HMIS to capture data from non-confidential programs.

3.The CoC used HUD reporting and agency reports

1C-4c. Applicants must describe:

- (1) how many domestic violence survivors need housing or services in the CoC's geographic area;**
 - (2) data source the CoC used for the calculations; and**
 - (3) how the CoC collected the data.**
- (limit 2,000 characters)**

1.All of the people, and family members of people, that identify domestic violence as part of their past and also meet the definition of homelessness need housing. There are additional needs for services for people that may not need housing at this time but who would benefit from services such as financial literacy, job training, education, and life skills. The CoC has identified 25 adults in families and 33 unaccompanied adults that are homeless and domestic violence survivors in need of housing and services in the CoC's geographic area. The shelter programs in the region are generally at capacity throughout the year.

The Resource Center at Community Teamwork, Inc. screens for domestic violence needs as part of their regular intake process. They identify approximately 25 people per month that are referred for DV services. In addition, Alternative House receives 1-3 calls per day for individuals looking for housing needs that cannot be met. On a yearly average, Alternative House assists an average of 25 families in need of utility or rental assistance. Funding is restricted to \$1,000 per person or to more than the average of 25 families. There is a large demand of over 50 people yearly who come to us in need of housing and the financial assistance to obtain it. The Resource Center at Community Teamwork, Inc. conducts assessments for domestic violence as part of their regular screening.

2.Tracking data for people experiencing domestic violence is a challenge due to the needs regarding confidentiality. For data from DV programs, we used what we captured on the night of the Point in Time count, from HMIS comparable data sources, and agency files. We used HMIS to capture data from non-confidential programs.

3.The CoC used HUD reporting and agency reports

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:

- (1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;**
 - (2) quantify the unmet need for housing and services for DV survivors;**
 - (3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and**
 - (4) describe how the CoC determined the unmet need for housing and services for DV survivors.**
- (limit 3,000 characters)**

1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:

- (1) rate of housing placement of DV survivors;**
 - (2) rate of housing retention of DV survivors;**
 - (3) improvements in safety of DV survivors; and**
 - (4) how the project applicant addresses multiple barriers faced by DV survivors.**
- (limit 4,000 characters)**

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:

- (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;**
- (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and**
- (3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 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. move on?
Public Housing	8.00%	Yes-Public Housing	No
HCV	7.00%	Yes-HCV	No
CoC-funded TH program	100.00%	Yes-Both	No
State Housing	14.00%	Yes-Both	No
HOPWA	100.00%	No	No

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

1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)

Lowell Housing Authority has a limited homeless preference for FAMs and INDs. A total of 8% of all new LHA admissions, 7% HCVP admissions, 5% MRVP admissions, 14% State Housing admissions, 100% HOPWA admissions

and 100% THP admissions were homeless at entry. The LHA has entered into contracts with the Lowell Transitional Living Center (12 units), and House of Hope (8 units), as well as 8 HOPWA participant slots via the City of Lowell to provide project-based/tenant-based rental assistance to homeless individuals and families requiring supportive services. These programs are geared toward assisting those with mental health issues, substance abuse issues, victims of domestic violence and those suffering from chronic health issues (HIV). To date, these programs have been very successful in establishing a stable housing environment and providing the supportive services that participants need to maintain housing and acquire self-sufficiency. As units and HCVPs become available the CCAB/DPD-CA continues to encourage member LHAs to expand their limited homeless preference policy through meetings with their Board of Directors.

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? No

1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness. (limit 2,000 characters)

The City of Lowell and the Lowell CoC proactively address the needs of Lesbian, Gay, Bisexual and Transgender individuals. The CoC recognizes that youth who identify as lesbian, gay, bisexual, transgender or other gender or sexual orientation identities have particular service needs and the renewal and new project that are being submitted with this application will support all youth who are experiencing homelessness.

In addition to the work being done within each organization, Lowell has 17 clinical social workers/therapists/Counselors in the city that provide LGBT services to adolescents, adults and families. The Center for Hope and Healing at UMass Lowell provides information, resources and group counseling to support the community and to facilitate a greater visibility, awareness, and understanding of LGBTQ issues. Finally, UMass Lowell and the Lowell Hunger Homeless Commission also provide regular training opportunities in the field to front line workers and to train allies to stand with, and advocate for, LGBTQ people.

Programs are designed to work towards promoting community commitment to diversity and creating a safe and healthy city/campus environment through education, support, advocacy and the fostering of equity for all residents and students, regardless of sexual orientation or gender identity. Please see 3B-2.4. for detail on City/CoC's mandated anti-discrimination policy.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

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 implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	No
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	No

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1C-8. Centralized or Coordinated Assessment System. 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 homelessness assistance in the absence of special outreach;
 (3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
 (4) attach CoC's standard assessment tool.
 (limit 2,000 characters)

Coordinated entry covers the entire geographic area of the Lowell CoC. The approach for coordinated entry is different for families experiencing homelessness than it is for individuals. Families experiencing homelessness are

generally served through the State-funded Emergency Assistance program and families can do an intake over the phone, or can access services, including diversion resources, at Community Teamwork. Information on how to apply for assistance is provided on a public-facing website and can easily be found using common search engines. Individuals can access the Coordinated Entry system through multiple channels throughout the City. In addition to utilizing HMIS, the region is currently piloting mobile technology that will allow designated “navigators” to track information on the people they interact with on a daily basis. Navigators include street outreach staff, first responders, as well as staff at community meal programs and other service-based sites that regularly come in contact with individuals experiencing homelessness.

Coordinated entry reaches people who are least likely to apply for services by having multiple points of entry. By providing access to CE through mobile technology, the region has reduced barriers to entry.

The region uses a by-name list to support the prioritization process that aligns with the HUD Prioritization Notice. The warehouse creates a By-Name-List by integrating HMIS data and data collected from the mobile app to identify people’s total length of homelessness, as well as information related to disability and more. Information from the mobile app will be compiled along with the information gathered in HMIS to produce a more complete longitudinal record of each person’s homeless history along with details on services provided, referrals made, etc. This more complete picture of homelessness will enable the region to adjust the prioritization model over time to target services and resources in a timely manner.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed 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:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-2. 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:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

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

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:

- (1) objective criteria;**
- (2) at least one factor related to achieving positive housing outcomes;**
- (3) a specific method for evaluating projects submitted by victim services providers; and**
- (4) attach evidence that supports the process selected.**

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	No

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:

- (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and**
- (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.**

(limit 2,000 characters)

1. There are several non-HUD funded programs in the area that are designed to meet the housing and service needs of people experiencing chronic homelessness and those with disabilities. The CoC is utilizing both HUD, and non-HUD funding, to address the needs of homeless youth, as well as individuals and families fleeing domestic violence. This has been apparent in the activities within the region, and in the project-proposals being submitted with this application with reallocated and bonus funds. These population-based housing and services were prioritized within tier one programs.

2. The CoC made the decision to use funds available through reallocation to keep all renewal projects at 100% and in tier one with projects funded through the housing bonus as well as the DV bonus project. In addition, the CoC used the following guidelines to prioritize:

- Prioritize renewals over new projects to preserve current CoC housing and program capacity. Projects that didn't meet CoC and HUD priorities have been reallocated or reduced to improve effectiveness.
- Prioritize capacity building grants such as CE, HMIS, and planning grant above all, then first year renewals.

- Renewal projects serving transitional age youth, survivors of domestic violence, and chronic homelessness will be prioritized in this order.
- Projects of the same time that are being renewed (PH only) will be prioritized based on eLOCCS expenditures and timely spend-downs of funds.
- Prioritize new reallocation projects after renewals.
- Prioritize new DV project last based on how the bonus is structured and that if the DV Bonus project is selected for conditional award, it will be removed from ranking and if the DV Bonus project is not conditionally selected with DV Bonus funds, the DV Bonus project will be reclassified to bonus and will be considered in the normal ranking process. So if the project wants to fund the housing bonus project, the DV project should go last.

1E-3. Public Postings. Applicants must indicate how the CoC made public:

- (1) objective ranking and selection process the CoC used for all projects (new and renewal);**
- (2) CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and**
- (3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.**

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	<input type="checkbox"/>	CoC or other Website	<input type="checkbox"/>
Email	<input type="checkbox"/>	Email	<input type="checkbox"/>
Mail	<input type="checkbox"/>	Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>	Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>	Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>	Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between the FY 2014 and FY 2018 CoC Program Competitions.

Reallocation: Yes

1E-5. Local CoC Competition. Applicants must indicate whether the CoC:
(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application

**deadline–attachment required;
(2) rejected or reduced project application(s)–attachment required; and
(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline–attachment required. :**

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required. Yes

2A-1a. Applicants must: pg 8 of Gov Charter
(1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and
(2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).

2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required. Yes

2A-3. HMIS Vender. What is the name of the HMIS software vendor? Social Solutions - ETO

2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area. Regional (multiple CoC)

2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:
(1) total number of beds in 2018 HIC;
(2) total beds dedicated for DV in the 2018 HIC; and

(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	768	63	700	99.29%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	37	21	16	100.00%
Rapid Re-Housing (RRH) beds	9	0	9	100.00%
Permanent Supportive Housing (PSH) beds	121	18	102	99.03%
Other Permanent Housing (OPH) beds	0	0	0	

2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months. (limit 2,000 characters)

This CoC exceeds this threshold for HMIS participation.

2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept? 1

2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/30/2018

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy). 01/31/2018

2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy). 04/30/2018

2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC’s sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC’s sheltered PIT count results.
 (limit 2,000 characters)**

Significant work was done for the 2018 PIT to align HMIS with the projects on the HIC. The region was therefore able to rely on HMIS for most sheltered projects including all of the family programs, with the exception except dv projects. The DV programs were able to submit data using a proprietary excel-based report generation tool that was designed to allow providers to enter basic information needed for the Count and generate a HUD-compliant PIT report. The unsheltered count was conducted early in the morning and included volunteers from various sectors including service providers, police officers, hospital workers, City employees and others. Data for the unsheltered population was collected using a proprietary mobile application (Counting US) and a regional Command Center. These tools were also used to capture data for emergency shelter programs that do not participate in HMIS. The staff at our individual emergency shelter did not capture all of the necessary details regarding disabling conditions which will likely contribute to an undercount of people considered to be chronically homeless.

Data from HMIS, the DV excel tool, and the Command Center was integrated to create a final HUD-compliant PIT report.

2C-2. Did your CoC change its provider coverage in the 2018 sheltered count? Yes

2C-2a. If “Yes” was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

Beds Added:	49
Beds Removed:	0
Total:	49

2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your No

CoC add or remove 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 2018 sheltered PIT count?

2C-3a. If “Yes” was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable. No

2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count? Yes

2C-5a. If “Yes” was selected for question 2C-5., applicants must describe: (1) how stakeholders serving youth experiencing homelessness were engaged during the planning process; (2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and (3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count. (limit 2,000 characters)

Yes, the Lowell Continuum of Care (CoC) implemented specific measures to identify youth experiencing homelessness in its 2018 PIT count. The CoC’s strategy is to reach out to all shelter programs and housing and homeless providers in the city such as UTEC, the Lowell Transitional Living Center, Community Teamwork, House of Hope, Living Waters and many others to identify all homeless individuals and families including homeless youth. There was also a group who ventured out to homeless camps along the Merrimack River and under bridges and other areas where there is known to be homeless people including youth to get a count. The Lowell CoC annually participates in the PIT count to obtain an unduplicated count of homeless persons including individuals, families and youth.

In addition, the city of Lowell also participates in the state-wide youth count

which has, for the past five years, conducted a survey over a four week period to gain a clearer understanding of the number of unaccompanied young people in the Commonwealth of Massachusetts without a stable place to live, and their experiences in trying to access housing and services.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 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)

Lowell used a combination of HMIS, an excel tool for domestic violence programs, and mobile technology for the 2018 PIT Count. There was 100% HMIS coverage for all projects funded by the CoC and ESG, with the exception of programs at Alternative House, the domestic violence agency in the region which used the proprietary excel-based tool to generate a report. HMIS data quality was monitored and reviewed in the data warehouse to ensure that what has been reported in HMIS is accurate. Data from veterans' programs was entered into the mobile app for reporting. A team of volunteers including police officers and other first responders completed the count for the unsheltered population, using the Counting Us mobile app. Data from the mobile app is available in the Command Center. The CSV files from each of these sources was integrated, to create a single and comprehensive report for HUD.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.	1,297
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3A-1a. Applicants must:

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

SPM #5 - This represents an 8% drop in first time homeless as the numbers decreased from 1411 reported in 2016 to 1297 reported in 2017. Community Teamwork Inc. manages a community Resource Center and the Housing Consumer Education Center. These resources are the hub of the community.

1. Everyone that accesses services is screened for risk of homelessness using a proven tool. In Lowell, 48% are rent-burdened (paying at least 40% of income on rent). CTI's services are well advertised in the community.
2. There are several resources available through CTI and other local providers including State Rental Assistance (RAFT), ESG prevention resources, State HomeBASE resources, etc. Prevention resources through ESG are also available at the Lowell Housing Authority and at the International Inst of Lowell.
3. Community Teamwork, Inc.

3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:

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

SPM #1 -

1. The length of time homelessness increased by an average of about two weeks. The average length of time in ES (the community does not have SH projects) increased from 164 to 182 days and when including TH, 165- 183.
2. All individuals and families that are in shelter and transitional housing begin working on rehousing plans upon entry into the program. On the family side, providers are expected to move people out within a year and those families that have been in shelter for more than 240 days are targeted for more aggressive rehousing plans. The region is doing a good job with diverting families from shelter so those who enter tend to face more barriers including larger family sizes and more complex disability challenges. Families have access to a range of State and Federal housing resources. Individuals begin working on rehousing plans within two weeks, as some people are able to quickly rehouse themselves. There are several housing resources available to individuals including SROs, supported units at the housing authority, CSPECH (a state program that leverages Medicaid resources), Pay-for-Success, and more.
3. The region uses a By-Name list that integrates HMIS data from multiple sources in order to identify people with the longest length of homelessness in the region.
4. The City of Lowell, as the CA and the CES lead, is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless. The region is doing well with diverting families from shelter whenever possible. Those who do end up in shelter tend to have more barriers such as larger family sizes and more complex disability challenges.

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:

- (1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and**
- (2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.**

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	27%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	99%

3A-3a. Applicants must:

- (1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and**
 - (2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.**
- (limit 2,000 characters)**

1. SPM #7 - This represents a slight decline from 29% who exited to permanent housing in FY16 but a slight increase from 98% who retained their permanent housing or exit to permanent housing destinations. In addition to actively working on rehousing plans, all programs that provide services to individuals and families in programs, work with each person to maximize benefits and access to mainstream resources. They also work to reduce additional barriers to housing such as sealing CORIs and advocating with landlords.

The CoC continues to work with all people that are experiencing homelessness, or who are exiting with a rapid rehousing strategy, exit to permanent housing destination by working with landlords and housing developers to expand options and create an active pipeline of housing options. The By-Name list is filtered by various criteria in order to target any available housing resources to those who are eligible and who are prioritized by chronic status, length of homelessness, and disability.

2. All homeless prevention strategies are applied to help individuals and persons in families in permanent housing projects, retain housing. Move-on strategies are also deployed as residents apply for all public housing options as part of the strategy. Individuals and persons in families that are residing in permanent housing projects receive stabilization support and access to a wide range of community and mainstream resources in order to retain their permanent housing, or exit to a permanent housing destination.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

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

3A-4a. Applicants must:

- (1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;**
- (2) describe the CoC’s strategy to reduce the rate of additional returns to homelessness; and**
- (3) provide the name of the organization or position title that is responsible for overseeing the CoC’s strategy to reduce the rate individuals and persons in families returns to homelessness. (limit 2,000 characters)**

1. SPM #2 - Just 1% of people that exited homelessness to a permanent destination returned within the 6-12 month period. Individuals and families that leave shelter often leave with stabilization services in place. On the family side, this is supported through the State's HomeBASE program and on the individual side, many of the programs include supportive services. Stabilization services include ongoing assessment of key risk factors including change in income, health, community engagement and more. These issues are continually identified, assessed and addressed. A deeper analysis of the HMIS data will reveal some of the variables that contribute to a return to homelessness.

2. The resource center at CTI supports people in financial recovery, debt management, and other financial literacy needs. CTI and other programs in the region, support various workforce development programs to help people who are housed and who are at the highest risk of returning to homelessness, are able to remain housed.

3. Bridgewell, which manages the only CoC-funded PH programs in the region, is responsible for overseeing the CoC's strategy to reduce the rate of individuals and persons in families returns to homelessness.

3A-5. Job and Income Growth. Applicants must:

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

SPM #4 - The CoC showed a 7% increase in earned income for adult system stayers during the reporting period; a 21% increase in non-employment cash income for adult system stayers during the reporting period; also a 21% increase in total income for adult system stayers during the reporting period; a 13% increase in non-employment cash income for adult system leavers. Unfortunately, there was a 37% decrease in earned income for adult system leavers and a 23% decrease in total income for adult system leavers

- 1. The Resource Center at CTI has multiple workforce development programs and opportunities to increase access to employment as well as applications for cash and noncash benefits. The Resource Center is open to the entire community and serves individuals and families that are experiencing homelessness, as well as poverty, in the community. All of the agencies that receive funding through the CoC or ESG provide case management services to help people link to a variety of benefits and services including cash and non cash sources, and services to support employment and increased cash income. The CoC has been emphasizing employment at its meetings and contract discussions with providers regarding services and outcome performance.
- 2. Case managers on the ground develop relationships with local employers and there are regular job fairs and connections with the Merrimack Valley Small Business Center and other business affiliations in the community to help people obtain and maintain employment.
- 3. Community Teamwork, Inc. is the organization that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.

3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which 05/31/2018

**included the data quality section for FY 2017
(mm/dd/yyyy)**

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

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:**
- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and**
 - (2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.**

Total number of beds dedicated as DedicatedPLUS	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	36
Total	36

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required. Yes

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>
Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input type="checkbox"/>
Bad credit or rental history	<input type="checkbox"/>
Head of Household with Mental/Physical Disability	<input type="checkbox"/>

3B-2.2. Applicants must:

- (1) describe the CoC’s current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;**
 - (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and**
 - (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.**
- (limit 2,000 characters)**

The CoC works closely with DHCD contracted agencies, Community Teamwork and House of Hope, in order to rapidly rehouse all homeless families within the Emergency Shelter system in Lowell. The Emergency Assistance Shelter system for Families is a State-funded program that utilizes congregate and scattered site models to provide temporary shelter. While the family is in shelter, Community Teamwork and House of Hope provide intensive case management focused on housing barrier reduction and trauma informed practices to transition families into safe, affordable housing as quickly as possible. Part of the strategy also utilizes State-funded HomeBASE Flexible Funding which provides a family up to \$10,000 of funding for housing needs as well as ESG RRH funds.

Community Teamwork and House of Hope provide stabilization support services for all families that are placed out of homeless shelters into permanent housing in Lowell. For 12 months each family receives ongoing case management focused on improving economic stability, housing stability, and self-sufficiency. Each month a case manager and the family work together to identify goals for the family to work towards to mitigate future housing instability. As the regional designated organization for HomeBASE, Community Teamwork will be the organization responsible for overseeing the CoC’s strategy to rapidly re-house families with children within 30 days of becoming homeless.

3B-2.3. 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 supportive 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 age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	<input type="checkbox"/>
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	<input type="checkbox"/>

3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied homeless youth includes the following:

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

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC’s current strategy to prioritize unaccompanied youth based on their needs.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input checked="" type="checkbox"/>

**3B-2.6. Applicants must describe the CoC's strategy to increase:
(1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and
(2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.
(limit 3,000 characters)**

Our strategy to increase housing and supportive services for homeless youth will take a multi-pronged approach. 1.) We will create and fund the staffing capacity across the Continuum of Care that will identify and reach out to homeless youth to conduct youth centered assessments of housing instability and service needs; 2.) We will offer diversion services to homeless youth, especially those under 18 to find stable housing options with kinship care providers or other adults if returning to parental homes is not possible; 3.) We will offer temporary transitional housing and rapid re-housing services to homeless youth in scattered site apartments throughout our consortium region; 4.) We will provide housing stabilization services to homeless youth by drawing upon our extensive history of doing this work with our housing and social service partners within the Continuum of Care.

Supportive services will be offered in order to help youth maximize their incomes. Participation in programs such as Community Teamwork’s Youthbuild Program and their Secure Jobs initiative will be encouraged. The Secure Jobs initiative leverages the resources of Community Teamwork, the area vocational schools, the Career Center and local employers to help individuals gain the job skills needed to obtain employment. Youth will also have access to Financial Education and One-on-One Financial Coaching through Community

Teamwork's Financial Education Center. Other supportive services will include Fuel Assistance and WIC where appropriate and youth will receive assistance in obtaining mainstream services such as MassHealth and SNAP that will help to stretch their income.

Each winter, the Lowell Transitional Living Center reports that they serve many homeless 18-24 year old youth. Although seen as a "last resort" during the cold winter months, youth avoid using it during the warmer months of the year, leaving them unsheltered. In order to raise awareness of the issue, on June 18, 2018, several members of the Lowell Continuum of Care convened a day-long summit, organized by Community Teamwork, to begin an ambitious planning process to develop a coordinated community response to prevent and end youth homelessness in Lowell. Included in the summit were homeless youth themselves who shared their experiences and their perspectives on what is needed to help move them out of homelessness. By the close of the summit, working committees were established that will be used in our efforts to effectively utilize existing resources and to mobilize new ones.

The Lowell CoC has great strength in the organizations that make up the CoC. Each one brings insight, expertise and a strong commitment to ending youth homelessness. We will build upon current and past experiences to develop a continuum of services and strong partnerships with youth. The youth voice will be central to these efforts as we further develop the Lowell Partnership to End Youth Homelessness.

3B-2.6a. Applicants must:

- (1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. 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 the strategies; and**
 - (3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.**
- (limit 3,000 characters)**

Strategies to increase the availability of housing and services for homeless youth are measured in many ways. CoC members utilize Case Managers who conduct weekly meetings with youth to develop housing stability goals focused on each individual's unique needs. These Case Managers also work with youth to overcome barriers to housing and to access the services they need to ensure their housing stability. Through intake, assessment, and appropriate referrals utilizing data systems, Case Managers are able to track, not just the count of housing placements and services provided, but actually measure the outcome of those services in stabilizing youth.

The Lowell CoC also utilizes data collection and analysis as another measure to calculate the effectiveness of our strategies. Once performance measures are established, members of the CoC are able to get a complete picture of clients served, issues, services and outcomes over time. One member of the CoC, Community Teamwork, recently implemented a new case management system (CMS) that offers a comprehensive client view and a system to track needed services, assessments, referrals, and housing placements. All members of the CoC also utilize the Homeless Management Information System (HMIS) allowing them to collect client-level data and data on the provision of housing and services to homeless youth. The HMIS system allows the CoC to measure

program performance and service use and to track progress in meeting specific performance goals. The HMIS data is also used to meet reporting requirements including the Annual Performance Report (APR). The utilization of these tools and systems provide an effective way to measure our strategies to ensure that homeless youth have appropriate housing and supportive services necessary to maintain that housing.

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:

- (1) youth education providers;**
 - (2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);**
 - (3) school districts; and**
 - (4) the formal partnerships with (1) through (3) above.**
- (limit 2,000 characters)**

Several members of the Lowell CoC have enjoyed a long-standing relationship with the Lowell Public Schools (LPS) and regularly engage and collaborate with them on educational initiatives. For example, Community Teamwork is working in partnership with the Lowell Public Schools and Little Sprouts on a new preschool program called the Lowell Collaborative Preschool Academy. Their School Age Programs have worked in partnership with the Lowell Public Schools for decades. Children between the ages of 6 and 13 enjoy out of school time activities at six elementary schools across the city.

In addition, Community Teamwork’s YouthBuild Program offers opportunities for young adults between the ages of 16 and 24 who have dropped out of school and are ready to embrace a second chance to receive educational and vocational training to achieve success. The Career Academy is a collaboration between the LPS and YouthBuild to provide those enrolled with an opportunity to complete their high school diploma as opposed to earning a high school equivalency.

3B-2.7a. Applicants must describe the 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 Lowell Coc has adopted the policies of the Lowell Public School System which conforms with the McKinney Vento Act in terms of education services for homeless children, youth and families. The basic policy includes the following:

Information for Homeless Families--McKinney-Vento Act

The McKinney-Vento Act covers children and youth who don't have a fixed, adequate, and regular nighttime residence, including living:

- in a shelter
- in a motel, hotel, or campground
- in a car, bus, or train station, or some other inadequate accommodations OR
- with other people due to loss of housing, economic hardship or similar reason (also known as doubled up).

This includes migrant and unaccompanied youth living in any of the above situations.

Who are unaccompanied youth?

Youth who are out of physical custody of a parent or legal guardian and lack fixed, regular, and adequate housing have all the rights of other homeless students.

Students who lack housing have the right to:

- attend the school they attended when before they became homeless or the school they last attended (known as the school of origin)
- get transportation to the school of origin even if it is in another school district
- immediately enroll and attend the local school even if they do not have the required documentation
- to appeal district enrollment decisions
- access special education services if the student has a current IEP
- participate in any school activity that is available to other students
- free school meals

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select “Yes” or “No”. Applicants must select “Yes” or “No”, from the list below, if the CoC has written formal agreements, MOU/MOA’s or partnerships with providers of early childhood services and support.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	Yes
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	Yes
Birth to 3 years	No	No
Tribal Home Visiting Program	No	No
Other: (limit 50 characters)		
	No	No
	No	No

3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD). (limit 2,000 characters)

The CoC identified the following "points of entry" for veterans who are homeless: The U.S. VA Crescent House, a program for veterans in recovery but

which also serves as a walk-in center for veterans seeking services; Lowell Transitional Living Center, the primary emergency shelter program where veterans may not self-identify and where targeted outreach facilitates engagement; The Lowell VA- Veteran's Center which provides mental health services to veterans who have experience combat and veterans who are homeless walk-in for services; the City-run Lowell Veteran's Services Office provides a range of veteran's services and veterans who are homeless walk-in for services; street outreach -VNOC has an outreach specialist on staff and the LTLC recently received ESG funding for street outreach.

The Veterans Northeast Outreach Center (VNOC), an active participant in the Lowell CoC, was selected as the intermediary to:

- Provide a Rapid Response Team for 24/7 referrals
- Co-locate 1-2 days/ week at various sites
- Assess housing and service needs
- Act as liaison and coordinate services for: Streets and other areas not meant for human habitation; homeless shelter and transitional housing programs; and services programs (i.e., VA and non-VA medical, Mental health and criminal justice institutions, Police Department, and other first responders, and CoC Veterans Subcommittee network partners); Training & employment; Permanent /supportive Housing; and access to VASH and Massachusetts Rental Voucher Program (MRVP)
- Track efforts in HMIS or in a mobile app in support of system-wide HUD reporting and requirements

Housing options for veterans are limited, as the vacancy rate in Lowell is <1%. The Bedford campus has a range of housing options and direct access to various opportunities including Transitional Housing (Grant per Diem) beds in Haverhill; SROs at the Bedford Veteran's Quarters, and VASH vouchers which are prioritizing women and families.

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC? Yes

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness? Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach? No

3B-5. Racial Disparity. Applicants must: (1) indicate whether the CoC assessed whether there are racial disparities in the Yes

**provision or outcome of homeless assistance;
(2) if the CoC conducted an assessment, attach a copy of the summary.**

3B-5a. Applicants must select from the options below the results of the CoC's assessment.

People of different races or ethnicities are more or less likely to receive homeless assistance.	<input checked="" type="checkbox"/>
People of different races or ethnicities are more or less likely to receive a positive outcome from homeless assistance.	<input type="checkbox"/>
There are no racial disparities in the provision or outcome of homeless assistance.	<input type="checkbox"/>
The results are inconclusive for racial disparities in the provision or outcome of homeless assistance.	<input checked="" type="checkbox"/>

3B-5b. Applicants must select from the options below the strategies the CoC is using to address any racial disparities.

The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	<input type="checkbox"/>
The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	<input type="checkbox"/>
The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	<input type="checkbox"/>
The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups	<input type="checkbox"/>
The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	<input type="checkbox"/>
The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	<input type="checkbox"/>
The CoC has staff, committees or other resources charged with analyzing and addressing racial disparities related to homelessness.	<input type="checkbox"/>
The CoC is educating organizations, stakeholders, boards of directors for local and national non-profit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	<input type="checkbox"/>
The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	<input type="checkbox"/>
The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	<input type="checkbox"/>
The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	<input type="checkbox"/>
Other:	<input type="checkbox"/>

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:**
- (1) assists persons experiencing homelessness with enrolling in health insurance; and**
 - (2) assists persons experiencing homelessness with 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)		
	No	No

- 4A-1a. Mainstream Benefits. Applicants must:**
- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;**
 - (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and**
 - (3) 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)**

(1) Medicaid/MassHealth benefits have been available for households experiencing homelessness since 2006 as part of the healthcare reforms that were put in place in MA at that time. Currently, 97% of all homeless participants are receiving medical benefits and CoC members have staff on site that can assist participants to acquire MassHealth. Lowell General Hospital and Lowell Community Health Center can also provide this service. Currently these organizations have staff that can provide assistance in over 28 different languages.

All of the programs in the region that are funded by the CoC or ESG have case management and support services staff assists households to apply for SSI,

WIC, TANF, and SNAP benefits to meet basic needs for income and nutrition. In addition, case managers help clients link with services related to substance use, mental health, healthcare, jobs programs, Veterans, LGBT and other programs and services. The CoC/Hunger Homeless Commission and each agency is responsible for training and updating information on mainstream resources.

(2) The CoC and the Hunger and Homeless Commission serve as regular clearing houses for information related to mainstream resources. As resources become available, or if there are changes, key stakeholders are notified via listservs, flyers, and meeting announcements.

(3) The CCAB/DPD-CA and CTI/Community Action Agency are responsible for overseeing the CoC strategy for mainstream benefits which is approved by CoC members and is part of the CoC written policies.

4A-2.Housing First: Applicants must report:

- (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and**
- (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.**

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	8
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	8
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	100%

4A-3. Street Outreach. Applicants must:

- (1) describe the CoC’s outreach;**
- (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)**

1. Lowell has a significant population of people living outside and in places not meant for human habitation, including people that are not eligible for year-round shelter services. Individuals that are not in shelter often receive services through the meal program or housing programs that target chronic homeless. Individuals also receive services at the Resource Center at CTI where they receive a full assessment and access to housing and services. LTLC has also just received a small grant towards street outreach. Mobile technology and

specifically an app called Show the Way, is being used to support street outreach. Through this application, and the Command Center, various staff, and "navigators" can build a client record over time and build on work that is being done on the streets with people experiencing homelessness. Data in the Command Center can also be integrated into the By-Name list so that people living outside can be prioritized for housing appropriately.

2. At this time, there is no designated program that covers 100% coverage of street outreach

3. As we build a more systematic approach to street outreach, it does occur regularly as the Lowell Police Dept. is an active partner with the CoC and the Hunger and Homeless Commission and they seek to provide support and access to services.

4. Street outreach is professionally managed and peer engagement is a key tenet.

4A-4. Affirmative Outreach. Applicants must describe:

- (1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and**
- (2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above. (limit 2,000 characters)**

(1) Strategies for affirmative outreach and fair housing include a nondiscrimination policy that aligns with 24 CFR 578.93(c) to market housing and supportive services to people regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability. The region includes housing for specific subpopulations that include persons in families, individuals, Veterans, victims of DV, chronically homeless and youth. Housing with children under 18 excludes registered sex offenders and persons with criminal records of violent crime/arson.

(2) The AFH Marketing Plan requires housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, age, familial status, or handicap and those who are least likely to apply in the absence of special outreach. Once annually, the City conducts a public outreach effort. Marketing of the effort is jurisdiction-wide and widely circulated. Media sources include newspapers that serve protected classes. Ads, brochures and other written materials are published in multiple languages to reach non-English speaking audiences. Organizations whose membership consists primarily of protected class members are contacted

4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.

2017	2018	Difference
------	------	------------

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RRH beds available to serve all populations in the HIC	349	9	-340
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4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4A-7. Homeless under Other Federal Statutes. Is the CoC 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? No

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
1C-5. PHA Administration Plan–Homeless Preference	No		
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	Lowell CES Tool	08/28/2018
1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes		
1E-3. Public Posting CoC-Approved Consolidated Application	Yes		
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	Lowell RFP and No...	08/29/2018
1E-4. CoC's Reallocation Process	Yes		
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Lowell Notice of ...	09/12/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes		
1E-5. Public Posting–Local Competition Deadline	Yes	Lowell - Local Co...	09/12/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	Lowell - MA 508 G...	08/14/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	Lowell MA 508 HMI...	08/24/2018
3A-6. HDX–2018 Competition Report	Yes	Lowell 2018 - HUD...	08/14/2018
3B-2. Order of Priority–Written Standards	No		

3B-5. Racial Disparities Summary	No	Racial Disparitie...	08/28/2018
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: Lowell CES Tool

Attachment Details

Document Description: Lowell - Project Review

Attachment Details

Document Description:

Attachment Details

Document Description: Lowell RFP and Notice of Deadlines

Attachment Details

Document Description:

Attachment Details

Document Description: Lowell Notice of Project Accepted

Attachment Details

Document Description:

Attachment Details

Document Description: Lowell - Local Competition Deadline

Attachment Details

Document Description: Lowell - MA 508 Governance Charter -2018

Attachment Details

Document Description: Lowell MA 508 HMIS Policies and Procedures 2018

Attachment Details

Document Description: Lowell 2018 - HUD HDX Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: Racial Disparities Analysis for Lowell

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/12/2018
1B. Engagement	09/12/2018
1C. Coordination	Please Complete
1D. Discharge Planning	09/12/2018
1E. Project Review	09/12/2018
2A. HMIS Implementation	09/12/2018
2B. PIT Count	09/12/2018
2C. Sheltered Data - Methods	09/12/2018
3A. System Performance	09/12/2018
3B. Performance and Strategic Planning	09/12/2018
4A. Mainstream Benefits and Additional Policies	09/12/2018
4B. Attachments	Please Complete

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Submission Summary

No Input Required



How can I use the By Name List in HomelessData for housing prioritization?

[Home](#) / [Support](#) / [Coordinated Entry](#) / [How can I use the By Name list for housing prioritization?](#)

The By Name List functionality within HomelessData.com can be used to find actively homeless clients within the region that meet the eligibility requirements for a housing opportunity and prioritize the resulting housing candidates according to the community's prioritization model. To access the By Name List, simply click on "Clients" in the left hand navigation bar. 

Filtering the List for Eligible Clients

The image below demonstrates how filters can be applied to the By Name List within HomelessData.com to sort out just the clients that are eligible for a housing opportunity. In this case, the user is choosing to only display actively enrolled clients with a disabling condition, that are residing in temporary living situations.

Using the Sort Feature to Prioritize Clients

The column headers in the resulting list can be sorted simply by clicking on the column header. Which option to click will depend on the community's chosen prioritization model, which may vary based on the target population being served. Options that are available to sort by include:

Temporary Length of Stay - This includes all nights accounted for in HMIS where the client resided in either emergency shelter, safe haven, or was contacted by street outreach staff. With this approach, any nights that are unaccounted for in HMIS are not included.

Days Homeless with Self Report - This figure includes the total days of residence in emergency shelter, safe haven, or via contacts with street outreach that are accounted for in HMIS, plus the number of days according to the client's self-report of "Date Homelessness Started".

Days Since First Homelessness - This is the total period of time between a currently homeless client's first enrollment in any emergency, safe haven, or street outreach project until today. This approach includes every day between a person's first time presenting as homeless and today.

For a community that clicked on to sort them from high image below demonstrates how filters can be applied to the By Name List within HomelessData.com to sort out just the clients that are eligible for a housing opportunity. In this case,

Choosing a Prioritization Model

How the by name list is to be sorted and filtered depends on your community's prioritization model, and the eligibility requirements for the particular housing unit that is coming online. Simtech Solutions has authored a [Review of the Tools and Techniques Used to Prioritize Clients for Limited Housing Resources](#) to help your community choose an approach that works best for your specific needs and circumstances.

Finding the Individual or Family

The last two columns within the By Name List show the organization and project name where the individual or family was last seen. Each region should maintain a directory containing the designated contact information for each project as this will help staff from different agencies to work together in finding and housing the top ranked candidate on the prioritization list.

Clients									
Filter Clients									
Somerville CoC									
Last Updated On: Jan 11, 2018 7:57:08 AM									
First Homeless	Days Homeless w/ Self Report	Enrollme...	Disabled?	Chronic at Entry?	Current Chronic	Last Organization	Last Project	Last Entry	Last Exit
2901	2		Yes	Yes	Yes	Catholic Charities Arch ...	105 - St Patricks Wome...	04/26/2016	
2093	1		Yes	No	No	CASPAR Inc.	First Step Street Outreach	12/19/2012	
2080	1		Yes	Yes	Yes	CASPAR Inc.	First Step Street Outreach	05/02/2015	
1942	1		Yes	Yes	Yes	Catholic Charities Arch ...	105 - St Patricks Wome...	03/03/2015	
1910	2		Yes	Yes	Yes	Catholic Charities Arch ...	105 - St Patricks Wome...	03/17/2016	
1830	2		Yes	Yes	Yes	CASPAR Inc.	First Step Street Outreach	03/05/2016	
1136	1		Yes	Yes	Yes	Catholic Charities Arch ...	105 - St Patricks Wome...	04/25/2014	
1021	2		Yes	Yes	Yes	Catholic Charities Arch ...	105 - St Patricks Wome...	03/28/2016	
955	1		Yes	Yes	Yes	CASPAR Inc.	First Step Street Outreach	01/06/2016	
952	1		Yes	Yes	Yes	Catholic Charities Arch ...	105 - St Patricks Wome...	12/05/2012	
889	4		Yes	No	No	Catholic Charities Arch ...	105 - St Patricks Wome...	10/27/2017	
776	1		Yes	No	Yes	Catholic Charities Arch ...	105 - St Patricks Wome...	02/24/2014	

Removing a Client from the List

Clients are automatically removed from the list once they are no longer actively enrolled in an emergency shelter, transitional housing, safe haven, or street outreach project. To remove the client from the list, simply exit them in your HMIS and select the appropriate destination during the exit assessment.

*Tools and Resources to Help Communities
Effectively Respond to Homelessness*

SimtechSolutions,inc.



City of Lowell – Partnership for Change to End Homelessness Lowell Continuum of Care ~ MA-508

CoC Program: Governance Charter- 2018

SECTION 1: PURPOSE & GOALS

The purpose of the Lowell Continuum of Care (CoC) is to promote communitywide commitment to the goal of ending homelessness. In cooperation with Federal, State and local governments and private funders, the CoC works to attain and provide funding for efforts providers to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness. The CoC also promotes access to and effective utilization of mainstream programs by homeless individuals and families; and optimizes self-sufficiency among individuals and families experiencing homelessness.

In addition, the Lowell CoC is committed to operating a Coordinated Entry System (CES). The CES is an important process through which people experiencing, or at risk of homelessness, can access the crisis response system in a streamlined way, have their strengths and needs quickly assessed. Then people can be quickly connected to appropriate, tailored housing and mainstream services within the community or designated region. Standardized assessment tools and practices in the CES take into account the unique needs of children and their families, youth and individuals. When possible, the assessment must provide for the ability of households to gain access to the best options to address their needs and incorporate participants' choice, rather than being evaluated for a single program within the system. Those with the highest needs must be prioritized for housing first.

Lowell's Department of Planning and Development-Collaborative Applicant (CA) is responsible for the coordination of policies, strategies and activities toward ending homelessness. The DPD Collaborative applicant is supported by a CoC Advisory Board (CCAB), nominated by the Director of Community Development and approved by the Assistant City Manager/DPD Director. The CoC Advisory Board reviews the actions of the DPD Collaborative Applicant, the data on homelessness in Lowell and other factors and makes recommendations to the DPD Collaborate Applicant. The CoC Advisory Board also helps in the review of applications for funds, in particular responses to the HUD NOFA.

The DPD Collaborative Applicant, along with its data analysts, gathers and analyze information in order to determine the local needs of people experiencing homelessness, recommend City actions to the City Manager, and implements responses to homeless problems. In conjunction with the City's Hunger Homelessness Commission, educates and engages the community on issues of homelessness, and, in addition, provides advice and input on the operations of homeless housing and services programs, and measures CoC performance.

The Lowell CoC will focus on the following HUD & CoC goals: (1) Creating a systemic response to homelessness; (2) strategically allocating resources, (3) ending chronic homelessness, (4) ending family homelessness, (5) ending youth homelessness, (6) ending veteran homelessness, (7) using a Housing First and low barrier approach, (8) meeting the needs of homeless high school and college students, and (9) meeting the needs of unhoused homeless during the day.

SECTION 2: RESPONSIBILITIES

The Federal [CoC Program Interim rule](#) which amends the HEARTH Act, establishes three major duties for which the Continuum of Care is responsible: To operate the Continuum of Care, to designate an HMIS for the Continuum of Care, and to plan for the Continuum of Care.

A. COC PROGRAM OPERATING STANDARDS

1. **Housing First Approach:** The CoC has previously adopted a Housing First approach that centers on providing homeless people with housing as quickly as possible and then providing services as needed using a low barrier approach that emphasizes community integration, stable tenancy, recovery and individual choice.
2. **Low Barrier Approach to Entry:** The CoC will offer Lowell's most vulnerable individuals and families experiencing homelessness immediate access to all available permanent supportive housing, without unnecessary prerequisites to include:
 - a. Admission/tenant screening and selection practice that do not require abstinence from substances, completion of or compliance with treatment, or participation in services.
 - b. Not rejecting applicants based on poor or lack of credit or income, or rental history, minor criminal convictions, or other factors that might indicate a lack of "housing readiness."
 - c. The use of blanket exclusionary criteria based on more serious criminal convictions. However, programs may consider such convictions on a case by case basis as necessary to ensure the safety of other residents and staff.
 - d. Applying only those admission criteria that are required by funders. However, programs may consider additional criteria on a case by case basis to ensure the safety of tenants and staff. Application of such additional criteria should be rare, and may include, for example, denial of an applicant who is a high risk registered sex offender by a project serving children, or denial of an applicant who has a history of domestic violence involving a current participant.

B. COC ORDER OF PRIORITY POLICY: The CoC has adopted a prioritization model that adheres to the guidance outlined within the [HUD CPD-16-11: Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing \(HUD Notice\)](#). To operationalize this model, we have refined the approach to circumvent the known limitations of the historical data collected within our region's HMIS system. Those limitations are currently being addressed¹ so that the region will eventually be able to rely solely on transaction-level data to drive our prioritization process.

- **First Priority** - Individuals or families experiencing chronic homelessness with the longest duration of time residing in a place not meant for human habitation, a safe haven, or an emergency shelter shall be prioritized for housing. The severity of the individual's or family's service needs may be used as a consideration when ranking one individual or family above another. For permanent housing beds dedicated to the chronically homeless, the CoC will use the "Total Length of Homelessness"² as the primary criteria for ranking but shall only select those individuals or

¹ Night by night tracking is to be implemented for high-turnover emergency shelter beds, mobile tech is to be utilized to better track contacts and engagements with people living on the streets, and we will continue to strive for 100% participation in HMIS for all HUD and non-HUD funded providers.

² Total Length of Homelessness – This figure is derived by subtracting the client's first date of entry into any emergency shelter, safe haven, or street outreach project within the community from today's date. This purposely ignores episodes and shelter stays of night by night shelters given that previous issues with data quality impair our abilities to rely on this data as a primary determinant to be used within the prioritization process.

families that meet the HUD chronic definition and have the documentation available to support that determination.

- **Second Priority**—Homeless Individuals and Families with a Disability with Severe Service Needs. An individual or family that is eligible for CoC Program-funded PSH who:
 - a. Is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs.
 - b. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, ***but there is not a minimum length of time required.***
- **Third Priority**—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter ***Without Severe Service Needs.*** An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where:
 - a. The individual or family has not been identified as having severe service needs.
 - b. The length of time in which households have been homeless should be considered when prioritizing households that meet this order of priority, ***but there is not a minimum length of time required.***
- **Fourth Priority**—Homeless Individuals and Families with a Disability Coming from Transitional Housing. An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where:
 - a. Prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven.
 - b. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project ***even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.***

According to the HUD Notice, an individual who has the most severe service needs is one for whom at least one of the following is true: History of high utilization of crisis services, including but not limited to, ER's, jails, & psychiatric facilities; OR, Significant health or behavioral health challenges or functional impairments which require a significant level of support in order to maintain permanent housing.

Severe service needs as defined above should be identified and verified through data-driven methods such as an administrative data match or by a standardized assessment tool that can identify the severity of needs. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. When there is an alternate criterion used by state Medicaid departments to identify high-need, high cost beneficiaries, the Lowell CoCs may use similar criteria to determine if a household has severe service needs instead of the criteria defined above. However, such determination must not be based on a specific diagnosis or disability type.

C. COC OPERATIONS/GOVERNANCE

The responsibility for operating the Lowell CoC belongs to the DPD-CA, with individual organizations assuming specific responsibilities to the DPD-CA as described below.

1. **Lowell's Continuum of Care Advisory Board (CCAB):**

a. ***Responsibilities include, but may not be limited to:***

- i. CoC Governance Charter and By-Laws annual updates to include all procedures and policies needed to comply with HUD and with HMIS requirements, including a code of conduct and recusal process for the Lowell CCAB, its chairs, and any person acting on behalf of the CCAB.
- ii. Establish CoC Subcommittees and Workgroups
- iii. Coordinate with CoC members and others to:
 1. Engage the community on issues of homelessness, and hunger
 2. Provide forums on a variety of subjects designed to establish a pathway to ending all forms of homelessness
 3. Engage/encourage non-CoC funded projects to adopt CoC Program standards and goals; and HMIS data and reporting standards.
- iv. Design and implement a Coordinated Entry System: In consultation with recipients of ESG funds. The CoC works with: the Massachusetts Departments of Housing and Community Development, Transitional Assistance, Mental Health, Social Services, Youth Services, Elder Affairs, and Public Health; and the Merrimack Valley Coalition to End Homelessness, Massachusetts Housing and Shelter Alliance, U.S. Department of Veterans Affairs and many others to operate a CES that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services and provides the most appropriate and cost effective response. (In process)
- v. Coordinate with Collaborative Applicant (CA), subrecipients and stakeholders to establish performance benchmarks and targets appropriate for population and program type.
- vi. Monitor CA performance evaluations of CoC and ESG recipients and subrecipients
- vii. Evaluates the outcomes of projects funded under ESG and CoC programs.
- viii. Consults with State and local government, ESG and CoC subrecipients on the plans to allocate ESG funds
- ix. Report and evaluate the performance of ESG Subrecipients
- x. Partners to complete the jurisdictions' Consolidated Plan
- xi. Mainstream resource oversight. Coordinates with CA to review mainstream resources performance outcomes from CoC-funded projects.
- xii. Provide or arrange for technical assistance and training, including SOAR training, for agencies struggling to meet CoC standards
- xiii. Discharge Planning: Coordinate with the CA and representatives from federal and state agencies on discharge planning compliance.
- xiv. Take action to assist ESG and CoC projects that perform poorly, and if necessary reevaluate their capacity to meet CoC Program requirements for funding.
- xv. Coordinate with CA to analyze and assess the results of annual gaps and needs assessments and the reports the outcomes of ESG and CoC projects to HUD annually.

b. ***CCAB Membership and Leadership:*** Membership may be comprised of all individuals and agencies concerned with the development and coordination of homeless assistance programs. Membership may include but not be limited to:

- i. Homeless or formerly homeless individuals and families
- ii. Non-profit organizations representing veterans and individuals with disabilities
- iii. Victim service providers
- iv. Faith-based organizations
- v. Public housing agencies
- vi. Advocates

- vii. Mental health and developmental health agencies
 - viii. School districts
 - ix. Hospitals
 - x. Universities
 - xi. Affordable housing developers
 - xii. Law enforcement
 - xiii. Representatives of business and financial institutions
 - xiv. Representatives of private foundations and funding organizations
 - xv. Social service providers
 - xvi. State and local government agencies
 - xvii. Veterans housing and services organizations and agencies
 - xviii. Youth housing and services agencies and organizations
- c. ***CCAB Member Qualifications:*** All members of the Lowell CCAB shall demonstrate a professional interest in, or personal commitment to, addressing and alleviating the impacts of homelessness on the people of the community. Membership shall be comprised of individuals and agencies, from the community and the agencies listed above, that are concerned with the development and coordination of homeless assistance programs, through a nominating process initiated by the co-chairs at least annually by way of an open application process.
- d. ***Rights of CCAB Members:*** Members are entitled to:
- i. Have voting rights (One vote per member organization, or individual member).
 - ii. Receive letters of support for grants indicating length of membership and level of participation.
 - iii. Receive information and updates via e-mail.
- e. ***Expectation of CCAB Members***
- i. Members are expected to be present and active participants in CoC meetings.
 - ii. Members are expected to actively participate in Lowell CoC activities, correspondence, sub-committees, and/or ad-hoc committees.
 - iii. Members are expected to follow all Federal and State laws and local regulations and also follow all ethical guidelines.
- f. ***CCAB Voting***
- i. The Lowell CCAB operates by consensus whenever possible.
 - ii. When a vote is necessary, each member shall have one vote upon any motion.
 - iii. No member shall vote on any issue where there could be a conflict of interest. (See Conflict of Interest)
 - iv. As needed, Roberts Rules of Order will govern procedural questions during CCAB Meetings.
 - v. A simple majority vote of members present will be used to settle issues that reach an impasse.
- g. ***CCAB Meetings/Attendance***
- i. The CCAB shall meet a minimum of six (6) times per year.
 - ii. Upon a request, in writing, by at least five members of the Board, a special meeting can be called by the Co-Chairs at any time.
 - iii. Attendance will be recorded at all Steering and committee meetings. Members are expected to have at least an 80% attendance rate at all Continuum meetings.
 - iv. A member can be removed by a majority vote of the CCAB
- h. ***Quorum at CCAB Meetings***
- i. A simple majority (50% + 1) of Members, at a CCAB meeting, constitutes a quorum.
 - ii. A quorum is needed to (a) change Lowell CoC bylaws and (b) approve CCAB members.

i. ***CCAB Co-Chairs***

- i. The officers of the Lowell CCAB shall be two co-chairs, one representing DPD and one representing the non-profit provider community.
- ii. Selection of the Co-Chairs will take place annually.
- iii. The Co-Chairs will serve a two-year term and can serve unlimited consecutive terms.
- iv. Election of the Co-Chair will be by simple majority vote of Members present (Quorum required) at the May CoC meeting.
- v. The Co-Chairs are authorized to represent the Lowell CoC in all matters not requiring a quorum.
- vi. The Co-Chairs shall call, preside over all meetings, and set agendas for all CoC meetings. The Co-Chairs can call special meetings of the Continuum.
- vii. Immediate Past Co-Chairs may assist and advise the Co-Chairs, upon their request, in the performance of their duties.
- viii. Any vacancies occurring during the year shall be filled upon the recommendation of the Executive Committee (described below) and shall be ratified by the CCAB.

j. ***CCAB Member Terms***

- i. For those members who represent a government department or organization, that person may serve as long as they continue to hold the same job/position.
- ii. For those members who represent a segment of the population or a named organization, the term of office is two years. These members may serve up to three consecutive terms.
- iii. A member may be reelected to the DPD-CA after a period of twelve (12) months of non-service.
 - iv. A term year is a calendar year, January through December.
- iv. Members that fail to attend regularly scheduled meetings shall be subject to removal from the DPD-CA by vote of the Committee if they attend less than 75% of meetings.

k. ***Compensation of Members:*** DPD-CA members will receive no compensation for their duties.

2. **CoC Committee, Subcommittees and Workgroups:** The CoC is comprised of all organizations providing services within the City. The Advisory Board members will convene several volunteer subcommittees and working groups that have various roles and responsibilities.

Subcommittees/workgroups include, but may not be limited to:

- a. ***HMIS/Coordinated Entry System Subcommittee (H-CES)*** develops and plans for the implementation and management of the Coordinated Entry system; annual updates to the CoC's *HMIS Policies and Procedures Manual*; and oversees HMIS compliance and participation. The H-CES coordinates with the CCAB and CA on the preparation, training and participation in the annual Point-In-Time and Housing Inventory Counts; and for submission of the Annual Homeless Assessment and Performance Reports. The H-CES is responsible for coordinating HMIS training and support opportunities for providers to ensure accurate, timely and useful data analysis reports.
- b. ***Evaluation and Scoring Committee (ESC)*** will evaluate and score proposals submitted for new HUD funding according to funding priorities and other guidelines and/or plans of the CoC. The Evaluation (Scoring) Committee will be comprised of individuals who do not have a conflict of interest due to funding or requests for funding. The ESC will follow the Grievance and Appeals Policy outlined below for any appeals of its decisions.
- c. ***Veterans Subcommittee (VS)*** is responsible for the implementation of the CoC's *Partnership for Change to End Veterans' Homelessness Plan* and oversight of Lowell's SSVF Intermediary; certification of Lowell's claim to the Mayors Challenge of having ended Veterans' homelessness per initiative criteria; and ongoing oversight of the VS's Veterans Registry of project efforts and outcomes related to Veterans health, housing placements and long-term stability.

d. *Ad-Hoc committees as required*

3. **Collaborative Applicant/Lead Agency Responsibilities**

- a. Grants management and oversight
- b. Partners with the CoC Advisory Board and Subcommittees
- c. Manage HMIS/Coordinated Entry System Program Manager
- d. Coordinate annual needs/gaps assessment
- e. Secure approvals to accept and expend the CoC Program grant funds within the City
- f. Preparation, review and submission of CoC Program Competition application
- g. Subrecipient contract management
- h. Performance evaluation and financial compliance monitoring
- i. Processing reimbursement invoices and documenting match
- j. Coordinate resources, integrate activities and facilitate collaboration for all CoC efforts that include, but may not be limited to:
 - i. Outreach to Invite new members
 - ii. Housing placement and development initiatives,
 - iii. Homeless prevention,
 - iv. Ending Homelessness Initiatives,
 1. Veterans Homelessness
 2. Chronic Homelessness
 3. Family Homeless
 4. Youth Homelessness
 - v. Point-In-Time and Housing Inventory Counts,
 - vi. Public Forums and conferences,
 - vii. Provider and Stakeholder Surveys,
 - viii. Technical assistance and training,
 - ix. HMIS and Coordinated Entry System,
 - x. Veteran's Intermediary and HOT LINE

4. **Designating and Operating an HMIS:** The Lowell CCAB and Collaborative Applicant is responsible for the following activities:

- a. Designates a single HMIS for the CoC and currently that HMIS is the MA-HMIS. The City of Lowell's Department of Planning and Development (DPD) as the CoC's Collaborative Applicant has contracted with Simtech Solutions, Inc to serve in the role as the CoC's HMIS lead.
- b. The Lowell CoC HMIS Lead/DPD is responsible for the following activities:
 - i. Works with the HMIS subcommittee to review, revise and approve a CoC HMIS Policies and Procedures which include issues related to data privacy, data security, and data quality.
 - ii. Ensures that the HMIS is administered in compliance with HUD requirements.
- c. The Lowell CoC HMIS Lead/DPD and CCAB are responsible for the following activities:
 - i. Ensure consistent participation by CoC and ESG recipients and subrecipients in the MA-HMIS

5. **Collaborative Applicant: HMIS/Coordinated Entry System Project Manager (H-CEP):** For the FY2018 CoC Program competition, the CCAB and CA have reallocated funding to support a H-CEP and will work together to

- a. Develop and manage a Coordinated Entry System that provides an initial, comprehensive assessment of the needs of individuals and families for housing and services and helps direct those persons to the appropriate providers
- b. Work with Community Development Specialist (CDS) and Continuum of Care Advisory Board to develop new or revise existing strategic plan for using HMIS to reduce long-term homelessness and developing data driven solutions
- c. Work with Senior Program Manager (or appropriate ESG subrecipient) to improve integration of ESG and CoC funded programs in HMIS to inform strategic plan systems development policies, procedures

- and funding decisions
- d. Work with CoC and ESG project managers to outreach to all CoC and ESG HMIS and non-HMIS participants to further strategic goals, develop and implement a work plan for using HMIS data to improve the delivery of homeless assistance
 - e. Increase the use of HMIS of homeless programs not receiving federal funds
 - f. Work with CDS and the CCAB to develop data driven tactical plans serving the implementation of Lowell's proposed Centralized Access System (CAS) Initiative to and develop evaluation tools for the coordinated entry and assessment within the jurisdiction
 - g. Work with CDS and CCAB to develop and implement a work plan for to improve outcomes of HUD funded homeless assistance programs
 - h. Chair the CoC's HMIS Subcommittee
 - i. Manage CoC's participation in MA-HMIS
 - j. Monitor Subrecipient data quality and informing the CDS, ESG Senior Program Manager and Director of Community

Development of problems with data quality

- k. Produce HMIS data for CoC Program Application, Annual Performance Reports, Point-in-Time Count, Annual Homeless
- l. Assistant Report, and Community Development Block Grant (CDBG) / Emergency Solutions Grant (ESG) annual report
- m. Promote collaboration among providers
- n. Honor client choice re: geography and services needed
- o. Incorporate provider choice in enrollment decisions
- p. Establish standard, consistent eligibility criteria and priorities for the system
- q. Ensure that eligibility requirements are limited to only those required by funding sources (and no additional requirements that are not required by funders) in order to accommodate as many people as possible
- r. Ensure that quality housing and services are provided
- s. Ensure clear and easy access to the system for consumers
- t. Improve efficiency, communication, and knowledge of resources throughout the system
- u. To ensure that decisions are cost effective and focused on solutions to homelessness
- v. To employ a systemic "Rapid Exit to Housing" approach
- w. To streamlines processing of housing referrals, transfers and placements
- x. To ensure accountability in the system through transparency and consistency of effort
- y. Leverage MA-HMIS and the use of "real time" data whenever possible
- z. Prioritizes enrollment based on need and vulnerability

6. Grievances

- a. ***The purpose*** of the Lowell CoC Grievance Policy is to ensure that there is a fair and accessible process for providers and CCAB members to file a grievance with the CoC. For example, a provider might have a grievance with how their renewal evaluation results are scored or rejection of a project application for funding.
- b. ***Composition of Grievance Committee***: The Grievance Committee shall be made up of a minimum of three members of the CCAB. Members shall be appointed by the CCAB Co-Chairs.
- c. ***Filing a Grievance***: Grievances shall be submitted in writing to the Grievance Committee via the Director of Community Development at the City of Lowell
- d. ***Resolution of a Grievance***: Written grievances will be reviewed within 30 days of receipt. The committee will issue a written decision that specifies the resolution of the grievance and any actions that need to be taken. The decision may be appealed to the CCAB Co-Chairs within 10 days of the written decision. The decision of the Co-Chairs is final. In all instances when a conflict of interest is present, parties shall recuse themselves from voting on and otherwise influencing the outcome of

matters referred to the Grievance Committee.



City of Lowell: Partnership for Change to End Homelessness

Lowell Continuum of Care ~ MA-508

CoC Program: HMIS Policies and Procedures

Introduction

A Homeless Management Information System (HMIS) is a database used to record and track client-level information on the characteristics and service needs of homeless persons as well as information about the projects that provide housing and services to people experiencing, or at risk of, homelessness. An HMIS ties together homeless service providers within a community to help create a more coordinated and effective housing and service delivery system.

The U. S. Department of Housing and Urban Development (HUD) and other planners and policymakers at the federal, state and local levels use aggregate HMIS data to obtain better information about the extent and nature of homelessness over time. Specifically, an HMIS can be used to produce an unduplicated count of homeless persons, understand patterns of service use, and measure the effectiveness of homeless programs. Local communities and a wide range of stakeholders use HMIS data to identify gaps, inform policy and target resources effectively.

The Lowell CoC participates in the Massachusetts HMIS (MAHMIS), in cooperation with the Massachusetts Department of Housing and Community Development (DHCD) and also leverages HomelessData.com™ from Simtech Solutions, Inc. The Lowell CoC utilizes both technical solutions to meet the HMIS reporting requirements of HUD while also providing the region with the tools required in order to support a Coordinated Entry System that enables people experiencing homelessness to be prioritized for access to housing. Simtech Solutions, through a contract with the City of Lowell, is responsible for the administration of the HMIS locally and provides technical assistance to participating agencies and their staff.

Agencies that participate in Lowell's HMIS are referred to as "participating agencies." Each participating agency needs to follow certain guidelines to help maintain data privacy and accuracy. The guidelines listed in this document do not replace the more formal and legally binding agency agreement that each agency signs with DHCD and other data hosting entities, prior to program implementation. This policy also does not cover client consent to receive services within the organization. Agencies are expected to have specific release-of-information

History

In 2001, Congress instructed the U.S. Department of Housing and Urban Development (HUD) to take measures to improve available data concerning homelessness in the United States. In response, HUD mandated all Continuum of Care regions to implement region-wide databases that would allow an System (HMIS), a computerized data collection application that facilitates the collection of information on homeless individuals and families using residential or other homeless assistance service agencies, and stores that data in a centralized database for analysis.

Why is this important?

Access to HMIS offers many opportunities for service providers as it provides insight into client and project performance within a regional context. The HMIS software provides for the collection of multi-level client data and client case coordination and electronic referrals at the agency level. Our goal locally is to develop an information-sharing model, in connection with the implementation of a Coordinated Entry System that when fully functional can prevent service duplications and enable collaboration between various homeless service providers, while limiting access to sensitive data. Client privacy is very important to us.

In addition to the standard data collection and reporting functionalities, the HMIS software includes a comprehensive case management module, bed management, performance measurement tools, ad-hoc reporting, software customization options, etc.

Lastly, providers already in HMIS are better positioned to apply for future funding opportunities, as many national and local funders now require HMIS participation.

RELATED DOCUMENTS

- Participation Agreements between agencies and the HMIS vendor or intermediary. Organizations that use MAHMIS sign detailed legal agreements with the MA Department of Housing and Community Development.
- Agency documents for staff such as user agreements, confidentiality agreements, etc.
- Agency documents for client consent to participate

ROLES AND RESPONSIBILITIES

Lowell CoC HMIS Responsibilities

- Monitor compliance with applicable HMIS standards on a regular basis;
- Maintain and update as needed HMIS software to ensure that the data collection and reporting standards are current according to HUD and that reports are submitted on time to HUD;
- Maintain and updated as needed all software and data sharing agreements, HUD Technical Submissions, HUD executed agreements and Annual Progress Reports;
- Develop and maintain HMIS agency files to include original signed participation agreements, and all other original signed agreements pertaining to HMIS;
- Develop and update as needed a Data Quality Plan;
- Review and update this comprehensive HMIS Participation Agreement yearly;
- Review national, state and local laws that govern privacy or confidential protections and make determinations regarding relevancy to existing HMIS policy;
- Support all users in assuring that they have appropriate access and adequate training to meet all of the requirements identified in this Agreement
- Monthly review of HMIS data and bed lists to ensure that participating agency programs are using HMIS accurately;
- Provide assistance to agencies upon request for additional on-site training and support
- Conduct unduplicated accounting of homelessness annually.

Participating Agency Responsibilities

- Must comply with all applicable agreements;
- Must designate an Agency HMIS Administrator as a liaison with DHCD and who is responsible for maintaining HMIS within each organization;
- Execute and manage staff agreements to ensure legal and appropriate uses of client data;
- Execute and manage client Release of Information to include entering data in HMIS and Coordinated Entry;
- Comply with the HMIS Standards as appropriate;
- Accurately enter all required data into the HMIS system, including accurate and timely information into housing, where applicable.

IMPLEMENTATION POLICIES AND PROCEDURES

Data Collection Requirements

Participating Agencies will collect and verify the minimum set of data elements for all clients served by their programs within the timeframe outlined in the HMIS Data Quality section of this document.

- ❑ During client intake, end users must collect all the universal data elements set forth in the HMIS Data Standards Manual, April 2018. The universal data elements include:
 - Name
 - Social Security Number
 - Date of Birth
 - Race
 - Ethnicity
 - Gender
 - Veteran Status
 - Disabling Condition
 - Living Situation
 - Project Entry Date
 - Project Exit Date
 - Destination
 - Relationship to Head of Household
 - Client Location
 - Housing Move-In Date
 - Length of Time on Street, in an ES or Safe Haven

- ❑ End users must also collect all the program-specific data elements at program entry and exit set for in the HMIS Data Standards April, 2018. The program-specific data elements include:
 - Income and Sources
 - Non-Cash Benefits
 - Health Insurance
 - Physical Disability
 - Developmental Disability
 - Chronic Health Condition
 - HIV/AIDS
 - Mental Health Problem
 - Substance Abuse
 - Domestic Violence
 - Contact
 - Date of Engagement
 - Bed-night Date
 - Referrals Provided
 - Residential Move-In Date
 - Housing Assessment Disposition

- ❑ Program Managers, or other designated administrators must also add and maintain all project descriptor elements for projects in the CoC, according to the HMIS Data Standards April, 2018. The Project Descriptor elements include:
 - Organization Identifiers
 - Project Identifiers
 - Continuum of Care Code
 - Project Type
 - Method for Tracking Emergency Shelter Utilization
 - Federal Partner Funding Sources
 - Bed and Unit Inventory
 - Additional Project Information (including address)

HMIS Program Entry and Exit Date

End users of any Participating Agency must record the Program Entry Date of a client into HMIS no later than three (3) business days upon entering the program.

End Users of any Participating Agency must record the Program Exit Date of a client into HMIS no later than three (3) business days after exiting the program or receiving their last service.

- End user must enter the month, day, and year of program enrollment and program exit.
- For returning clients, end user must record a new Program Entry Date and corresponding Program Exit Date.
- The system will trigger a warning when end users enter a Program Exit Date that is earlier than the Program Entry Date for a client.

HMIS Technical Support Protocol

The CoC HMIS staff will provide a reasonable level of support to Participating Agencies via email, phone, and/or remote when possible.

1. HMIS Users should first seek technical support from their agency HMIS administrator;
2. If more expertise is required to further troubleshoot the issue, agency HMIS expert or HMIS User should submit request to the HMIS Admin staff to assist who will respond and escalate as needed

SECURITY POLICIES AND PROCEDURES

Training

Each user is expected to be appropriately trained in HMIS and all aspects of reporting. If the Agency HMIS admin can not address training requirements, the CoC HMIS Lead will facilitate additional training.

User Authentication

Only users with a valid username and password combination can access HMIS.

- The Participating Agency will determine which of their employees will have access to the HMIS. User access will be granted to those individuals whose job functions require legitimate access to the system.
- The HMIS Admin for the agency is responsible for managing user accounts and training for all users within the organization;
- Proposed end user must sign the HMIS User Agreement stating that he or she has received training, will abide by the Policies and Procedures, will appropriately maintain the confidentiality of client data, and will only collect, enter and retrieve data in the system that is relevant to the delivery of services;
- The CoC HMIS staff will be responsible for the distribution, collection, and storage of the signed HMIS User Agreements;
- Sharing of usernames and passwords is a breach of the HMIS User Agreement since it compromises the security to clients;
- The Participating Agency is responsible for updating and maintaining all user accounts and responding to staff turnover.
- Users not logging into HMIS for more than 45 days risk being locked out due to non-activity.

Passwords

Each end user will have access to HMIS via a username and password. Passwords will be reset every 180 days. End users will maintain passwords confidential.

- The Agency HMIS Admin will provide new end users a unique username and temporary password after required training is completed.
- End user will be required to create a permanent password that is between eight and sixteen characters in length. It must also contain characters from the following four categories: (1) uppercase characters (A through Z), (2) lower case characters (a through z), (3) numbers (0 through 9), and (4) non-alphabetic characters (for example, \$, #, %).
- End users may not use the same password consecutively, but may use the same password more than once.
- Access permission will be revoked after the end user unsuccessfully attempts to log on five times. The end user will be unable to gain access until the HMIS staff reset their password.

Hardware Security Measures

All computers and networks used to access HMIS must have virus protection software and firewall installed. Virus definitions and firewall must be regularly updated. Agencies are responsible for meeting these standards.

Security Violations and Sanctions

Any end user found to be in violation of security protocols of their agency's procedures or HMIS Policies and Procedures will be sanctioned accordingly. All end users must report potential violation of any security protocols.

- End users are obligated to report suspected instances of noncompliance and/or security violations to their agency and/or HMIS Admin as soon as possible.
- The Participating Agency or HMIS staff will investigate potential violations.
- Any end user found to be in violation of security protocols will be sanctioned accordingly. Sanction may include but are not limited to suspension of system privileges and revocation of system privileges.

CLIENT INFORMED CONSENT AND PRIVACY RIGHTS

Participating Agencies must obtain informed, signed consent prior to entering any client personal identifiable information into HMIS. Services will not be denied if a client chooses not to include personal information. Personal information collected about the client should be protected. Each Participating Agency and end user must abide by the terms in the HMIS Agency Participation Agreement (Appendix A) and HMIS User Agreement (Appendix B).

- Client must sign the Authorization to Disclose Client Information form (Appendix E) or consent of the individual for data collection may be inferred from the circumstances of the collection. Participating Agencies may use the Inferred Consent Notice (Appendix F) to meet this standard.
- If client refuses consent, the end user should not include any personal identifiers (First Name, Last Name, Social Security Number, and Date of Birth) in the client record.
- For clients with consent refused, end user should include a client identifier to recognize the record in the system.
- Participating Agencies shall uphold Federal and State Confidentiality regulations and laws that protect client records.

The HMIS standards and the HIPAA standards are mutually exclusive. An organization that is covered under the HIPAA standards is not required to comply with the HMIS privacy or security standards, so long as the organization determines that a substantial portion of its protected information about homeless clients or homeless individuals is indeed protected health information as defined in the HIPAA rules.

HIPAA standards take precedence over HMIS because HIPAA standards are finely attuned to the requirements of the health care system; they provide important privacy and security protections for protected health information; and it would be an unreasonable burden for providers to comply with and/or reconcile both the HIPAA and HMIS rules. This spares organizations from having to deal with the conflicts between the two sets of rules.

DATA POLICIES AND PROCEDURES

Data Quality

All data entered into HMIS must meet data quality standards. Participating Agencies will be responsible for their users' quality of data entry.

Definition:

Data quality refers to the timeliness, completeness, and accuracy of information collected and reported in the HMIS.

Data Timeliness:

End users must enter all universal data elements and program-specific data elements within three (3) days of intake.

Data Completeness:

All data entered into the system is complete.

Data Accuracy:

All data entered shall be collected and entered in a common and consistent manner across all programs.

Data Use and Disclosure

All end users will follow the data use Policies and Procedures in this agreement to guide the data use of client and project information stored in HMIS.

Client data may be used or disclosed for system administration, technical support, program compliance, analytical use, and other purposes as required by law. Uses involve sharing parts of client information with persons within an agency. Disclosures involve sharing parts of client information with persons or organizations outside an agency.

- Participating Agencies may use data contained in the system to support the delivery of services to homeless clients in the continuum. Agencies may use or disclose client information internally for administrative functions, technical support, and management purposes. Participating Agencies may also use client information for internal analysis, such as analyzing client outcomes to evaluate program.
- The vendor and any authorized subcontractor shall not use or disclose data stored in HMIS without expressed written permission in order to enforce information security protocols. If granted permission, the data will only be used in the context of interpreting data for research and system troubleshooting purposes. The Service and License Agreement signed individually by the HMIS Lead Agency and vendor contain language that prohibits access to the data stored in the software except under the conditions noted above.

Data Release

All HMIS stakeholders will follow the data release Policies and Procedures to guide the data release of client information stored in HMIS.

Data release refers to the dissemination of aggregate or anonymous client-level data for the purposes of system administration, technical support, program compliance, and analytical use.

- No identifiable client data will be released to any person, agency, or organization for any purpose without written permission from the client.
- Aggregate data may be released without agency permission at the discretion of the Continuum. It may not release any personal identifiable client data to any group or individual.

Signature Page:

By signing below, I am agreeing to comply with the applicable policies and standards set forth in this document. In addition, I agree to comply with all Federal, State, and local laws that require additional privacy or confidentiality protections.

Authorized Signature

Print Name

Organization

Date

2018 HDX Competition Report

PIT Count Data for MA-508 - Lowell CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	594	658	783
Emergency Shelter Total	481	582	689
Safe Haven Total	0	0	0
Transitional Housing Total	94	64	68
Total Sheltered Count	575	646	757
Total Unsheltered Count	19	12	26

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	63	6	75
Sheltered Count of Chronically Homeless Persons	63	6	75
Unsheltered Count of Chronically Homeless Persons	0	0	0

2018 HDX Competition Report

PIT Count Data for MA-508 - Lowell CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	134	143	166
Sheltered Count of Homeless Households with Children	134	143	166
Unsheltered Count of Homeless Households with Children	0	0	0

Homeless Veteran PIT Counts

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	74	36	32	30
Sheltered Count of Homeless Veterans	72	36	32	28
Unsheltered Count of Homeless Veterans	2	0	0	2

2018 HDX Competition Report
HIC Data for MA-508 - Lowell CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	703	63	640	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	78	21	14	24.56%
Rapid Re-Housing (RRH) Beds	9	0	9	100.00%
Permanent Supportive Housing (PSH) Beds	549	18	468	88.14%
Other Permanent Housing (OPH) Beds	0	0	0	NA
Total Beds	1,339	102	1131	91.43%

2018 HDX Competition Report
HIC Data for MA-508 - Lowell CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	36	36	36

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

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC		149	0

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC		349	9

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Summary Report for MA-508 - Lowell CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more “metrics” used to measure the system performance. Click through each tab above to enter FY2017 data for each measure and associated metrics.

RESUBMITTING FY2017 DATA: If you provided revised FY2017 data, the original FY2017 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and “save” before closing.

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.

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FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	1716		1627	164		182	18	102		118	16
1.2 Persons in ES, SH, and TH	1755		1670	165		183	18	104		120	16

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.

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2016	Revised FY 2016	FY 2017	Submitted FY 2016	Revised FY 2016	FY 2017	Difference	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1720		1637	190		221	31	111		130	19
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1722		1647	190		221	31	111		130	19

2018 HDX Competition Report

FY2017 - 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	
	Revised FY 2016	FY 2017	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	Revised FY 2016	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO		0		0			0			0		0	
Exit was from ES		268		15	6%		3	1%		11	4%	29	11%
Exit was from TH		2		0	0%		0	0%		0	0%	0	0%
Exit was from SH		0		0			0			0		0	
Exit was from PH		0		0			0			0		0	
TOTAL Returns to Homelessness		270		15	6%		3	1%		11	4%	29	11%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2018 HDX Competition Report

FY2017 - 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 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	594	658	64
Emergency Shelter Total	481	582	101
Safe Haven Total	0	0	0
Transitional Housing Total	94	64	-30
Total Sheltered Count	575	646	71
Unsheltered Count	19	12	-7

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	1769		1685	-84
Emergency Shelter Total	1730		1643	-87
Safe Haven Total	0		0	0
Transitional Housing Total	39		47	8

2018 HDX Competition Report

FY2017 - 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 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	9		14	5
Number of adults with increased earned income	0		1	1
Percentage of adults who increased earned income	0%		7%	7%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	9		14	5
Number of adults with increased non-employment cash income	0		3	3
Percentage of adults who increased non-employment cash income	0%		21%	21%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	9		14	5
Number of adults with increased total income	0		3	3
Percentage of adults who increased total income	0%		21%	21%

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	4		15	11
Number of adults who exited with increased earned income	2		2	0
Percentage of adults who increased earned income	50%		13%	-37%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	4		15	11
Number of adults who exited with increased non-employment cash income	0		2	2
Percentage of adults who increased non-employment cash income	0%		13%	13%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	4		15	11
Number of adults who exited with increased total income	2		4	2
Percentage of adults who increased total income	50%		27%	-23%

2018 HDX Competition Report

FY2017 - 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 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1411		1297	-114
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.	511		474	-37
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)	900		823	-77

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1417		1308	-109
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.	514		481	-33
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.)	903		827	-76

2018 HDX Competition Report
FY2017 - 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 FY2017 (Oct 1, 2016 - Sept 30, 2017) 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 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	0			
Of persons above, those who exited to temporary & some institutional destinations	0			
Of the persons above, those who exited to permanent housing destinations	0			
% Successful exits				

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

2018 HDX Competition Report

FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1304		1165	-139
Of the persons above, those who exited to permanent housing destinations	378		319	-59
% Successful exits	29%		27%	-2%

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

	Submitted FY 2016	Revised FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	86		94	8
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	84		93	9
% Successful exits/retention	98%		99%	1%

2018 HDX Competition Report

FY2017 - SysPM Data Quality

MA-508 - Lowell 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.

2018 HDX Competition Report FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	387	409	410	481	56	63	56	288	36	88	109	176	52			349				
2. Number of HMIS Beds	379	408	409	480	14	19	14	240	24	88	109	176	10			349				
3. HMIS Participation Rate from HIC (%)	97.93	99.76	99.76	99.79	25.00	30.16	25.00	83.33	66.67	100.00	100.00	100.00	19.23			100.00				
4. Unduplicated Persons Served (HMIS)	1551	1584	1731	1633	53	65	39	47	33	34	89	99	122	75	0	2	0	0	0	0
5. Total Leavers (HMIS)	1189	1202	1290	1111	15	14	15	27	11	7	7	6	121	69	0	0	0	0	0	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	517	597	693	582	15	12	15	23	9	4	4	6	2	51	0	0	0	0	0	0
7. Destination Error Rate (%)	43.48	49.67	53.72	52.39	100.00	85.71	100.00	85.19	81.82	57.14	57.14	100.00	1.65	73.91						

2018 HDX Competition Report

Submission and Count Dates for MA-508 - Lowell CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2018 PIT Count	1/31/2018	

Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/30/2018	Yes
2018 HIC Count Submittal Date	4/30/2018	Yes
2017 System PM Submittal Date	5/31/2018	Yes

Racial Disparities Analysis for the HUD NOFA Application

INSTRUCTIONS:

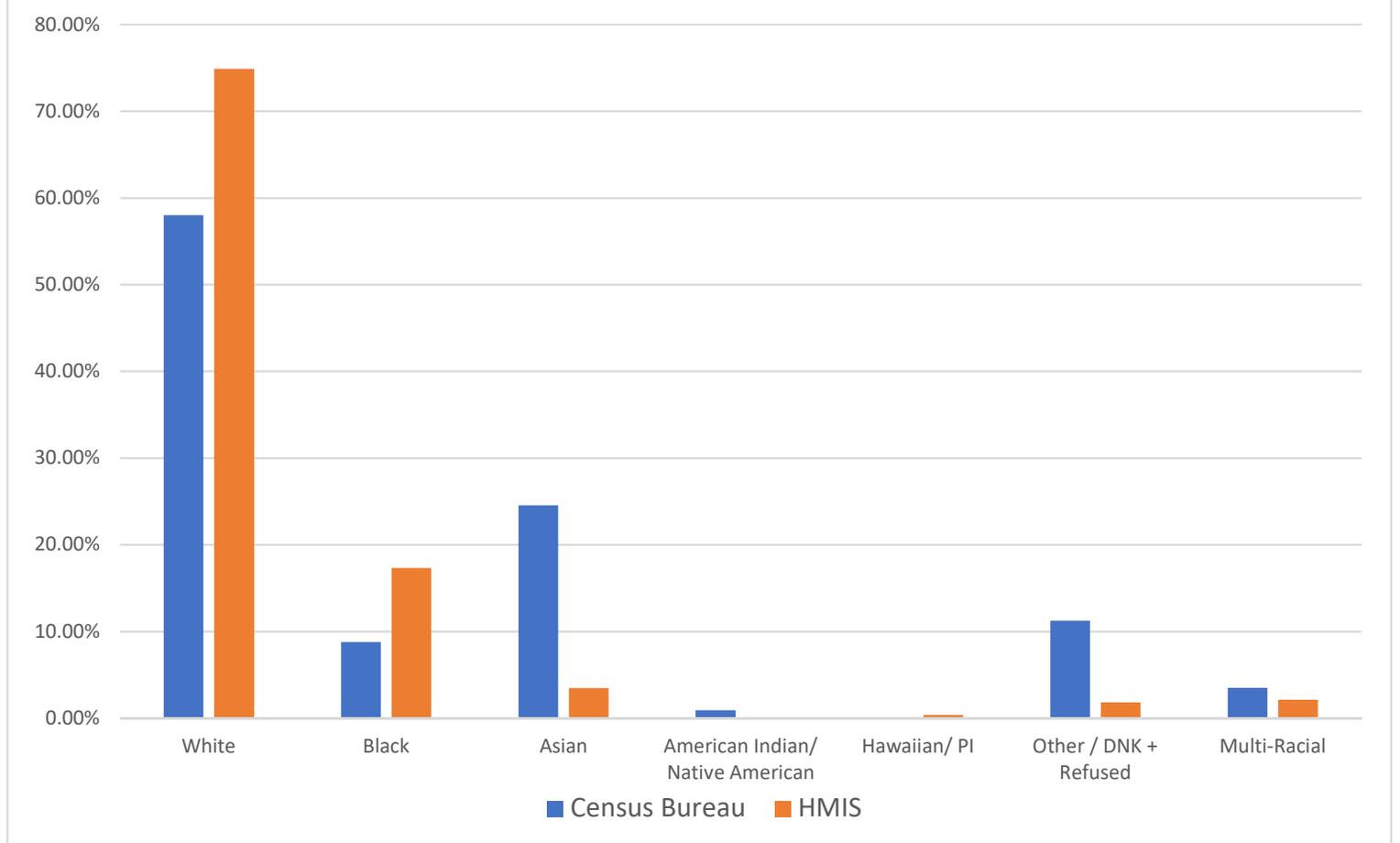
1) Select your HUD CoC Code. This will import the data from the US Census Bureau=>

MA-508

2) Run an APR for your entire region from HomelessData.com for July 1, 2017 to June 30, 2018. Enter the results from Q12A in the cells shaded in green in row 6. Selecting the region will include all projects with data in HomelessData.com that operate at locations that exist within the confines of the HUD CoC boundaries.

COUNTS	American Indian/ Native American							Total
	White	Black	Asian	American Indian/ Native American	Hawaiian/ PI	Other / DNK + Refused	Multi-Racial	
HMIS*	1411	326	65	1	7	34	40	1884
Census Bureau**	44469	6732	18827	686	46	8606	2694	76672

PERCENTAGES	American Indian/ Native American							Total
	White	Black	Asian	American Indian/ Native American	Hawaiian/ PI	Other / DNK + Refused	Multi-Racial	
HMIS	74.89%	17.30%	3.45%	0.05%	0.37%	1.80%	2.12%	100.00%
Census Bureau	58.00%	8.78%	24.56%	0.89%	0.06%	11.22%	3.51%	107.03%



* Calculated by running a HUD Annual Performance Report (APR) for the region for July 1, 2017 to June 30, 2018.

** Calculated within HomelessData.com by including the 2016 American Community Survey (ACS) data for all census tracts that exist within the confines of the HUD Continuum of Care boundaries.