

---

# 2006 Exhibit 1: Continuum of Care (CoC) Application

**U.S. Department of Housing  
and Urban Development**  
Office of Community Planning and Development

## Part I: CoC Organizational Structure

<b>HUD-defined CoC Name:*</b>	<b>CoC Number*</b>
<b>Reno/Sparks/Washoe County</b>	<b>NV 501</b>
*HUD-defined CoC names and numbers are available at: <a href="http://www.hud.gov/offices/adm/grants/fundsavail.cfm">www.hud.gov/offices/adm/grants/fundsavail.cfm</a> . If you do not have a HUD-defined CoC name and number, enter the name of your CoC and HUD will assign you a number.	

### A: CoC Lead Organization Chart

<b>CoC Lead Organization: Reno Area Alliance for the Homeless</b>		
<b>CoC Contact Person: Kelly Marschall</b>		
<b>Contact Person's Organization Name: Social Entrepreneurs, Inc.</b>		
<b>Street Address: 6121 Lakeside Drive, Suite 160</b>		
<b>City: Reno</b>	<b>State: NV</b>	<b>Zip: 89511</b>
<b>Phone Number: 775-324-4567 x 11</b>	<b>Fax Number: 775-324-4941</b>	
<b>Email Address: kmarschall@socialent.com</b>		

CoC-A

### B: CoC Geography Chart

Geographic Area Name	6-digit Code	Geographic Area Name	6-digit Code
<b>Reno</b>	<b>320150</b>		
<b>Sparks</b>	<b>320156</b>		
<b>Washoe County</b>	<b>329031</b>		

CoC-B

## CoC Structure and Decision-Making Processes

### C: CoC Groups and Meetings Chart

CoC-Related Planning Groups		Meeting Frequency (check only one column)				Enter the number of organizations/entities that are members of each CoC planning group listed on this chart.
		Monthly or More	Quarterly	Biannually	Annually	
<b>COC Primary Decision-Making Group</b> (list only one group)						
<b>Name:</b>	<b>Coordinating Committee</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>8</b>
<b>Role:</b>	This group meets monthly to address policy and implementation issues that impact the CoC, setting goals and priorities for the CoC.					
<b>Other CoC Committees, Sub-Committees, Workgroups, etc.</b>						
<b>Name:</b>	<b>HMIS Steering Committee</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>8</b>
<b>Role:</b>	This committee provides oversight of the HMIS implementation and ensures compliance with all safety, security, confidentiality, technical and data requirements.					
<b>Name:</b>	<b>Affordable Housing Committee</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>5</b>
<b>Role:</b>	This group explores and recommends actions to improve housing choices including identifying existing and potential funding sources for rental assistance and housing development.					
<b>Name:</b>	<b>Rating and Ranking Committee</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>7</b>
<b>Role:</b>	This committee reviews applicants' APR's, conducts site visits to review client records and verify performance, reviews Exhibit 2 and rates and ranks applications for funding.					
<b>Name:</b>	<b>Data Committee</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>4</b>
<b>Role:</b>	This Committee conducts the annual point in time count, designs data collection tools, recruits and trains volunteers, and validates all data from volunteers.					
<b>Name:</b>	<b>Mainstream Resources</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>12</b>
<b>Role:</b>	This Committee, with assistance from a HUD TA vendor, has met with Mainstream Resources representatives to remove barriers and promote access of homeless individual to mainstream resources for which they are eligible.					
<b>Name:</b>	<b>Reno Area Alliance for the Homeless</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>50</b>
<b>Role:</b>	This monthly meeting of all CoC participants reviews the actions of subcommittees, discusses current and future activities of participants, makes announcements and provides guidance on the CoC strategy for the homeless.					
<b>Name:</b>	<b>Shelter Overflow Committee</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>8</b>
<b>Role:</b>	This Committee is responsible for designing a strategy to address the seasonal overflow of the homeless shelter during times of great demand.					
<b>Name:</b>	<b>Chronic Homelessness Committee</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>33</b>
<b>Role:</b>	This Committee is charged with developing a 10 year plan for ending chronic homelessness.					

CoC-C

## D: CoC Planning Process Organizations Chart

The geographic areas noted in the following table include R=Reno, S=Sparks, W=Washoe County and ST = Statewide

	Specific Names of All CoC Organizations	Geographic Area Represented	Subpopulations Represented, if any* (no more than 2)	
<b>PUBLIC SECTOR</b>	<b>STATE GOVERNMENT AGENCIES</b>			
	Bureau of Alcohol and Drug Abuse	ST	SA	
	Division of Mental Health and Developmental Services	ST		
	Division of Aging Services	ST		
	Governor's Council on Developmental Disabilities	ST		
	Governor's Statewide Policy Academy Team on Homelessness	ST		
	Northern Nevada Adult Mental Health Services	RSW	SMI	
	Nevada Housing Division	ST		
	Department of Employment Training and Rehabilitation (DVOP)	ST	VETS	
	State of Nevada Job Connect	ST		
	<b>LOCAL GOVERNMENT AGENCIES</b>			
	Washoe County District Health Department	RSW	SA	HIV
	Washoe County Manager's Office	W		
	Washoe County Social Services	RSW		
	Washoe County Specialty Courts	RSW		
	2d Judicial District Court	RSW		
	City of Reno Community Development Department	R		
	City of Reno, City Manager's Office	R		
	City of Sparks Community Development	S		
	<b>PUBLIC HOUSING AGENCIES</b>			
	Department of Housing and Urban Development	RSW		
	<b>SCHOOL SYSTEMS / UNIVERSITIES</b>			
	UNR Sanford Center for Aging	ST		
	Washoe County School District Board	RSW		
	Washoe County School District (WSCD)	W	Y	
	Children in Transition Program		Y	
	Orvis School of Nursing Instructor and Students	RSW		
	UNR School of Social Work			
<b>LAW ENFORCEMENT / CORRECTIONS</b>				
Washoe County Sheriff's Office	W			
Reno Police Department	R			
Sparks Police Department	S			
Washoe County District Attorney	W			
<b>LOCAL WORKFORCE INVESTMENT ACT (WIA) BOARDS</b>				

	Sierra Nevada Job Corps	ST		
	<b>OTHER</b>			
<b>PRIVATE SECTOR</b>	<b>NON-PROFIT ORGANIZATIONS</b>			
	A Rainbow Place	RSW	HIV	
	Affordable Housing Resource Council	RSW		
	Children's Cabinet	RSW	Y	
	Committee to Aid Abused Women	RSW		
	Community Services Agency	RSW		
	Crisis Call Center	RSW		
	Family Resource Center Coalition	RSW	Y	
	Food Bank of Northern Nevada	RSW		
	Health Care for Homeless Veterans	RSW	VET	
	Kid's/Senior Korner	RSW	Y	
	Family Promise		Y	
	Nevada Legal Services	RSW		
	Northern Nevada Center for Independent Living	RSW		
	Northern Nevada HOPES	RSW	HIV	
	Northern Nevada Community Housing Resource Board	RSW		
	Northern Nevada Literacy Council	RSW		
	Planned Parenthood MarMonte	RSW		
	ReStart	RSW		
	Ridge House	R	SMI	
	YMCA	RSW	SA	
	24/7 TLC	S	Y	
	<b>FAITH-BASED ORGANIZATIONS</b>			
	Catholic Community Resources	RSW		
	First Methodist Church	R		
	Good Shepherd Clothes Closet	S		
	Grace House	RSW		
	Life Quest Christian Center	RSW		
	Reno Sparks Gospel Mission	RSW		
	The Salvation Army	RSW	SA	VET
	Saint Thomas Aquinas Catholic Church	R		
	Sparks United Methodist	R		
Trinity Episcopal Church	S			
	R			
<b>FUNDERS / ADVOCACY GROUPS</b>				
Assemblywoman Sheila Leslie	R			
Congressman Jim Gibbon's Office	RSW			
Senator John Ensign's Office	RSW			
Senator Harry Reid's Office	RSW			
United Way	RSW			
<b>BUSINESSES (BANKS, DEVELOPERS, BUSINESS ASSOCIATIONS, ETC.)</b>				

Downtown Improvement Assoc.	R		
KRNV Television	RSW		
KOLO Television	RSW		
Microsoft Licensing	RSW		
Nevada Housing Coalition	ST		
Q&D Construction	RSW		
Rivers Edge Apartments	R		
Social Entrepreneurs	ST		
Charles Schwab Bank	ST		
Reno Gazette Journal	R		
<b>HOSPITALS / MEDICAL REPRESENTATIVES</b>			
Veterans Administration Medical Center	ST	VET	
HAWC Community Health Center	RSW		
<b>HOMELESS PERSONS</b>			
Former client from Interfaith Hospitality Network	RSW	SA	
Mickey Lufkin, advocate	RSW		
17 Homeless Individuals interviewed during point in time count	RSW		

**\*Subpopulations Key:** Seriously Mentally Ill (SMI), Substance Abuse (SA), Veterans (VET), CoC-D HIV/AIDS (HIV), Domestic Violence (DV), and Youth (Y).

**E: CoC Governing Process Chart**

	Yes	No
1. Does the CoC have a separate planning and decision-making body/entity that is broadly representative of the public and private homeless service sectors, including homeless client/consumer interests? If no, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Is the primary decision-making entity composed of at least 65 percent representation by the private sector (including consumer interests)? If no, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Is the primary decision-making entity membership selected in an open and democratic process by the CoC membership? If no, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Is there a Chair and Co-Chair representing both the private and public sector at the same time, with staggered 2-year terms and the Chair position rotating between the private and public sectors? If no, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<p>5. Has the CoC developed a Code of Conduct for the CoC decision-making entity and its Chair and Co-chair? If no, please explain.</p> <p>This is under development and will be accomplished in 2006.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>6. The Chair and Co-Chair and all members of the CoC decision-making entity may not participate in decisions concerning awards of grants or provision of financial benefits to such member or the organization that such member represents. Have they recused themselves from considering projects in which they have an interest? If no, please explain.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>7. Does the CoC have a fiscal agent designated to receive funds from HUD?</p> <p>The CoC does not currently have a fiscal agent <b>formally</b> designated to receive funds from HUD. However, the three jurisdictions all participate in the CoC and also currently receive funds from HUD.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>8. If your Continuum has not yet complied with <i>any</i> of the above broad standards for the CoC planning and decision-making process, please describe the extent to which your CoC will meet each guideline by the 2007 competition. Not applicable</p>		

CoC-E

## F: CoC Project Review and Selection Chart

The CoC solicitation of projects and project selection should be conducted in a fair and impartial manner. Please mark all appropriate boxes to indicate all of the methods and processes the CoC used in 2006 to assess project(s) performance, effectiveness, and quality, particularly with respect to the Project Priorities Chart (CoC-Q). This applies to new and renewal projects. Check all that apply:

<b>1. Open Solicitation</b>	
a. Newspapers <input type="checkbox"/>	e. Outreach to Faith-Based Groups <input type="checkbox"/>
b. Letters to CoC Membership <input checked="" type="checkbox"/>	f. Announcements at CoC Meetings <input checked="" type="checkbox"/>
c. Responsive to Public Inquiries <input checked="" type="checkbox"/>	g. Announcements at Other Meetings <input checked="" type="checkbox"/>
d. Email CoC Membership/Listserv <input checked="" type="checkbox"/>	
<b>2. Objective Rating Measures and Performance Assessment</b>	
a. CoC Rating & Review Committee Exists <input checked="" type="checkbox"/>	j. Assess Spending (fast or slow) <input checked="" type="checkbox"/>
b. Review CoC Monitoring Findings <input checked="" type="checkbox"/>	k. Assess Cost Effectiveness <input checked="" type="checkbox"/>
c. Review HUD Monitoring Findings <input checked="" type="checkbox"/>	l. Assess Provider Organization Experience <input checked="" type="checkbox"/>
d. Review Independent Audit <input checked="" type="checkbox"/>	m. Assess Provider Organization Capacity <input checked="" type="checkbox"/>
e. Review HUD APR <input checked="" type="checkbox"/>	n. Evaluate Project Presentation <input checked="" type="checkbox"/>
f. Review Unexecuted Grants <input checked="" type="checkbox"/>	o. Review CoC Membership Involvement <input type="checkbox"/>
g. Site Visit(s) <input checked="" type="checkbox"/>	p. Review Match <input checked="" type="checkbox"/>
h. Survey Clients <input type="checkbox"/>	q. Review Leveraging <input checked="" type="checkbox"/>
i. Evaluate Project Readiness <input checked="" type="checkbox"/>	
<b>3. Voting/Decision System</b>	
a. Unbiased Panel / Review Committee <input checked="" type="checkbox"/>	e. All CoC Present Can Vote <input type="checkbox"/>
b. Consumer Representative Has a Vote <input type="checkbox"/>	f. Consensus <input type="checkbox"/>
c. CoC Membership Required to Vote <input checked="" type="checkbox"/>	g. Abstain if conflict of interest <input checked="" type="checkbox"/>
d. One Vote per Organization <input type="checkbox"/>	

CoC-F

## G: CoC Written Complaints Chart

<b>Were there any written complaints received by the CoC regarding any CoC matter in the last 12 months?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>If Yes, briefly describe the complaints and how they were resolved.</b>	
Not applicable	

CoC-G



---

**Part II: CoC Housing and Service Needs**  
**H: CoC Services Inventory Chart**

(1)  <b>Provider Organizations</b>	(2) <b>Prevention</b>					(3) <b>Outreach</b>			(4) <b>Supportive Services</b>									
	Mortgage Assistance	Rental Assistance	Utilities Assistance	Counseling/Advocacy	Legal Assistance	Street Outreach	Mobile Clinic	Law Enforcement	Case Management	Life Skills	Alcohol & Drug Abuse	Mental Health Counseling	Healthcare	HIV/AIDS	Education	Employment	Child Care	Transportation
Adolescent Treatment Center												X						
Adult Protective Services				X				X										
American Therapeutic Association										X								
Bristlecone						X			X	X								X
Care Chest												X						
Casual Labor Department, State of Nevada																X		
Center for Employment Training														X	X			
Center for Family Enrichment				X					X	X								
Chemical Dependency Treatment										X								
Children's Cabinet						X			X		X				X	X		
Citifare																		X
City of Reno Parks and Recreation						X					X							
Community Services Agency	X		X	X					X								X	
Community to Aid Abused Women (CAAW)				X		X					X						X	X
Consumer Credit Affiliates		X		X														
Consumer Credit Counselors Management Services		X		X														
Crisis Call Center						X				X	X							
DIA 10-year plan chair														X				
Disabled Veterans Outreach Program, State of Nevada																X		
Early Head Start																	X	
Faith House						X					X							
Family Counseling						X				X								
Family Promise									X									
Family Resource Centers								X	X					X		X	X	
The Food Bank of Northern Nevada						X								X				
Good Shepherd's Clothes Closet, Inc.																		
Head Start																	X	
Health Access Washoe County (HAWC)						X					X	X						

CoC-H

Health Care for Homeless Veterans				X		X			X		X	X	X	X		X	X
Homeless Evaluation Liaison Program (HELP)						X	X									X	X
Kids to Seniors Korner		X	X			X	X	X	X			X					
Mental Health Inmate Assistance Program						X					X	X					
Nevada AIDS Foundation		X												X			
Nevada JobConnect															X	X	
Nevada Legal Services					X												
Northern Nevada Adult Mental Health Services (NNAMHS)	X	X	X	X		X			X	X	X	X				X	X
Northern Nevada Center for Independent Living (NNIL)																	
Northern Nevada Community Housing Resource Board																	
Northern Nevada HOPES						X	X					x	x	X			
Northern Nevada Literacy Council				X					X						X	X	
Reno Cancer Foundation		X															X
Reno Evaluation Center											X						
Reno Police Department						X											X
Reno Sparks Gospel Mission (RSGM)						X				X	X						X
ReStart	X	X	X	X		X			X	X	X	X					
Ridge House						X					X						
Salvation Army						X				X	X						X
Schwab Bank	X																
Washoe County Senior Centers					X												X
Sparks Community Development Block Grant Housing Rehabilitation Program																	
STEP 2						X				X	X					X	X
Catholic Community Services		X	X														
Veterans Opportunity Center																	
Washoe County Adult Services				X					X				X				
Washoe County Community Development Block Grant Program																	
Washoe County Department of Social Services																	
Washoe County Detention Facilities						X					X	X					
Washoe County Sheriff's Department						X											X
West Hills Hospital											X						
24/7						X						X					

---

## CoC Housing Inventory and Unmet Needs

## I: CoC Housing Inventory Charts

<b>Emergency Shelter: Fundamental Components in CoC System – Housing Inventory Chart</b>													
Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds	Other Beds	
						A	B	Fam. Units	Fam. Beds	Indiv. Beds		Seas- onal	Overflow & Voucher
<b>Current Inventory</b>			Ind.	Fam.									
Casa De Vida	Casa De Vida	N			320150	SF				8	8		
The Children's Cabinet	Emergency Shelter at the McGee Center	N			320150	YMF				6	6		
Reno Sparks Gospel Mission	Reno Assistance Center	1	190		320150	SM				190	190		
ReStart	STARS	1	5	92	320156	FC		20	92	5	97		
United Way	Emergency Shelter	N			320150	FC							1
Family Promise	Hosting Program	2		14	320150	FC		5	14		14		
Safe Embrace	Emergency Shelter	P			320150	FC	DV	1	10		10		
Ridge House	Emergency Shelter	2	6		320150	SMF				6	6		
<b>SUBTOTALS:</b>			201	106	<b>SUBTOT. CURRENT INVENTORY:</b>			26	116	215	331		1
<b>New Inventory in Place in 2005</b> (Feb. 1, 2005 – Jan. 31, 2006)			Ind.	Fam.									
Reno Sparks Gospel Mission	Reno Assistance Center		63		320150	SM				63	63		
<b>SUBTOTALS:</b>			63		<b>SUBTOTAL NEW INVENTORY:</b>					63	63		
<b>Inventory Under Development</b>		Anticipated Occupancy Date											
Women Shelter	Emergency Shelter	December 2006					320150	SF				55	55

<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>										
<b>UNMET NEED TOTALS:</b>								15	72	144
1. Total Year-Round Individual ES Beds:	215	4. Total Year-Round Family Beds:				116				
2. Year-Round Individual ES Beds in HMIS:	201	5. Year-Round Family ES Beds in HMIS:				106				
3. HMIS Coverage Individual ES Beds: Divide line 2 by line 1 and multiply by 100. Round to a whole number.	93%	6. HMIS Coverage Family ES Beds: Divide line 5 by line 4 and multiply by 100. Round to a whole number.				91%				

### I: CoC Housing Inventory Charts

CoC-I

#### Transitional Housing: Fundamental Components in CoC System – Housing Inventory Chart

Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds
						A	B	Family Units	Family Beds	Individ. Beds	
<b>Current Inventory</b>			Ind.	Fam.							
Bristlecone Family Resources	North Star program	P			320156	SMF				20	20
Casa De Vida	Transitional Housing	P			320150	FC		2	4		4
Committee to Aid Abused Women	Transitional Housing	N			320156	FC	DV	7	21		21
Grace House	Transitional Housing	N			320156	SM				15	15
Reno Sparks Gospel Mission	Transitional Housing	4	91		320150	SMF				91	91
Step 1	Transitional Housing	P			320150	SM				16	16
Step 2	Lighthouse of the Sierra	P			329031	FC		25	71		71
Step 2	Congregate Housing	P			320150	FC				20	20
<b>SUBTOTALS:</b>			91		<b>SUBTOT. CURRENT INVENTORY:</b>			34	96	162	258

<b>New Inventory in Place in 2005</b> (Feb. 1, 2005 – Jan. 31, 2006)				Ind.	Fam.							
Not applicable												
<b>SUBTOTALS:</b>				0	0	<b>SUBTOTAL NEW INVENTORY:</b>		0	0	0	0	
<b>Inventory Under Development</b>			Anticipated Occupancy Date									
Not applicable												
<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>								0	0	0	0	
<b>UNMET NEED TOTALS:</b>								62	96	24	0	
1. Total Year-Round Individual TH Beds:				162	4. Total Year-Round Family Beds:				96			
2. Year-Round Individual TH Beds in HMIS:				91	5. Year-Round Family TH Beds in HMIS:				0			
3. HMIS Coverage Individual TH Beds: Divide line 2 by line 1 and multiply by 100. Round to a whole number.				56%	6. HMIS Coverage Family TH Beds: Divide line 5 by line 4 and multiply by 100. Round to a whole number.				0%			

**I: CoC Housing Inventory Charts**

CoC-I

**Permanent Supportive Housing\*: Fundamental Components in CoC System – Housing Inventory Chart**

Provider Name	Facility Name	HMIS Part. Code	Number of Year-Round Beds in HMIS	Geo Code <input type="checkbox"/>	Target Population		Year-Round			Total Year-Round Beds	
					A	B	Family Units	Family Beds	Individual /CH Beds		
<b>Current Inventory</b>			Ind.	Fam.							
Northern Nevada Adult Mental Health Services	Board and Care, Shelter Plus Care and SLA	8	218		S M F					218/65	218
Veteran's Administration	Health Care for Homeless Vets	N			S M F					20	20
Northern Nevada Community Housing Resource Board	Cottonwood Village	5		28	FC			9	28		28

ReStart	Anchor and Anchor Expansion	5	48	37	329031	FC		12	37	48/46	85
Washoe County Social Services	General Assistance Boarding Homes	N			320150	S M F				55/12	55
<b>SUBTOTALS:</b>			266	65	<b>SUBTOT. CURRENT INVENTORY:</b>			21	65	341/123 CH	406
<b>New Inventory in Place in 2005 (Feb. 1, 2005 – Jan. 31, 2006)</b>			Ind.	Fam.							
ReStart	Anchor Expansion II		35		320150	SMF				35/35 CH	35
<b>SUBTOTALS:</b>			35	0	<b>SUBTOTAL NEW INVENTORY:</b>					35/35	35
<b>Inventory Under Development</b>		Anticipated Occupancy Date									
Washoe County	Shelter Plus Care	August 2006		320150	SMF					8/8CH	8/8 CH
<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>										8/8 CH	8/8 CH
<b>UNMET NEED TOTALS:</b>			127	474					347		
1. Total Year-Round Individual PH Beds:			341	4. Total Year-Round Family Beds:			65				
2. Year-Round Individual PH Beds in HMIS:			266	5. Year-Round Family PH Beds in HMIS:			65				
3. HMIS Coverage Individual PH Beds: (Divide line 2 by line 1 and multiply by 100. Round to a whole number.)			77%	6. HMIS Coverage Family PH Beds: (Divide line 5 by line 4 and multiply by 100. Round to a whole number.)			100%				

CoC-I

## J: CoC Housing Inventory Data Sources and Methods Chart

Complete the following charts based on data collection methods and reporting for the Housing Inventory Chart, including Unmet Need determination. The survey must be for a 24-hour point-in-time count during the last week of January 2006.

<b>(1) Indicate date on which Housing Inventory count was completed: 01/26/2006</b>	
<b>(2) Identify the <i>primary</i> method used to complete the Housing Inventory Chart (check one):</b>	
<input checked="" type="checkbox"/>	<b>Housing inventory survey to providers</b> – CoC distributed a housing inventory survey (via mail, fax, or e-mail) to homeless programs/providers to update current bed inventories, target populations for programs, beds under development, etc.
<input type="checkbox"/>	<b>On-site or telephone housing inventory survey</b> – CoC conducted a housing inventory survey (via phone or in-person) of homeless programs/providers to update current bed inventories, target populations for programs, beds under development, etc.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS data to complete the Housing Inventory Chart
<b>(3) Indicate the percentage of providers completing the housing inventory survey:</b>	
<u>  </u> 100%	Emergency shelter providers
<u>  </u> 75%	Transitional housing providers
<u>  </u> 100%	Permanent Supportive Housing providers
<b>(4) Indicate steps to ensure data accuracy for 2006 Housing Inventory Chart (check all that apply):</b>	
<input type="checkbox"/>	<b>Instructions</b> – Provided written instructions for completing the housing inventory survey.
<input type="checkbox"/>	<b>Training</b> – Trained providers on completing the housing inventory survey.
<input checked="" type="checkbox"/>	<b>Updated prior housing inventory information</b> – Providers submitted updated 2005 housing inventory to reflect 2006 inventory.
<input type="checkbox"/>	<b>Follow-up</b> – CoC followed-up with providers to ensure the maximum possible response rate and accuracy of the housing inventory survey.
<input type="checkbox"/>	<b>Confirmation</b> – Providers or other independent entity reviewed and confirmed information in 2006 Housing Inventory Chart after it was completed.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS to verify data collected from providers for Housing Inventory Chart.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>Unmet Need:</b>	
<b>(5) Indicate type of data that was used to determine unmet need (check all that apply):</b>	
<input checked="" type="checkbox"/>	Sheltered count (point-in-time)
<input checked="" type="checkbox"/>	Unsheltered count (point-in-time)
<input checked="" type="checkbox"/>	Housing inventory (number of beds available)
<input checked="" type="checkbox"/>	Local studies or data sources – specify:
<input type="checkbox"/>	National studies or data sources – specify:
<input checked="" type="checkbox"/>	Provider opinion through discussions or survey forms
<input type="checkbox"/>	Other – specify:
<b>(6) Indicate the <i>primary</i> method used to calculate or determine unmet need (check one):</b>	
<input type="checkbox"/>	<b>Stakeholder Discussion</b> – CoC stakeholders met and reviewed data to determine CoC's unmet need
<input checked="" type="checkbox"/>	<b>Calculation</b> – Used local point-in-time (PIT) count data and housing inv. to calculate unmet need
<input type="checkbox"/>	<b>Applied statistics</b> – Used local PIT enumeration data and applied national or other local statistics
<input type="checkbox"/>	<b>HUD unmet need formula</b> – Used HUD's unmet need formula*
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(7) If your CoC made adjustments to calculated unmet need, please explain how and why.</b>	
Not applicable	

\*For further instructions, see Questions and Answers Supplement on the CoC portion of <http://www.hud.gov/offices/adm/grants/fundsavail.cfm>

CoC-J



## CoC Homeless Population and Subpopulations

### K: CoC Point-in-Time Homeless Population and Subpopulations Chart

Indicate date of last point-in-time count: 01/26/2006

Part 1: Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Number of Families with Children (Family Households):	10	8	0	18
1. Number of Persons in Families with Children:	16	18	0	34
2. Number of Single Individuals and Persons in Households without Children:	216	127	83	426
<b>(Add Lines Numbered 1 &amp; 2) Total Persons:</b>	232	145	83	460
<b>Part 2: Homeless Subpopulations</b>				
	<b>Sheltered</b>		<b>Unsheltered</b>	<b>Total</b>
a. Chronically Homeless (For sheltered, list persons in emergency shelter <i>only</i> )	39		20	59
b. Severely Mentally Ill	86			86
c. Chronic Substance Abuse	43			43
d. Veterans	63			63
e. Persons with HIV/AIDS	0			0
f. Victims of Domestic Violence	23			23
g. Unaccompanied Youth (Under 18)	5		*	5

If applicable, complete the following section to the extent that the information is available. Be sure to indicate the source of the information by checking the appropriate box: **Not applicable**

Data Source:  Point-in-time count OR  Estimate

Part 3: Hurricane Katrina Evacuees	Sheltered	Unsheltered	Total
Total number of Katrina evacuees	0	0	0
Of this total, enter the number of evacuees homeless <b>prior to</b> Katrina	0	0	0

\*Optional for Unsheltered

CoC-K

### L: CoC Homeless Population and Subpopulations Data Sources & Methods Chart

#### L-1: Sheltered Homeless Population and Subpopulations

(1) Check the primary method used to enumerate sheltered homeless persons in the CoC (check one):

- Point-in-Time (PIT) no interview** – Providers did not interview sheltered clients during the point-in-time count
- PIT with interviews** – Providers interviewed each sheltered individual or household during the point-in-time count
- PIT plus sample of interviews** – Providers conducted a point-in-time count **and** interviewed a

random sample of sheltered persons or households (for example, every 5th or 10th person)	
<input type="checkbox"/>	<b>PIT plus extrapolation</b> – Information gathered from a sample of interviews with sheltered persons or households is extrapolated to the total sheltered population
<input type="checkbox"/>	<b>Administrative Data</b> – Providers used administrative data (case files, staff expertise) to complete client population and subpopulation data for sheltered homeless persons
<input type="checkbox"/>	<b>HMIS</b> – CoC used HMIS to complete the point-in-time sheltered count and subpopulation information
<input type="checkbox"/>	<b>Other</b> – please specify:
<b>(2) Indicate steps taken to ensure data quality of the sheltered homeless enumeration (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Instructions</b> – Provided written instructions to providers for completing the sheltered point-in-time count
<input checked="" type="checkbox"/>	<b>Training</b> – Trained providers on completing the sheltered point-in-time count
<input checked="" type="checkbox"/>	<b>Remind and Follow-up</b> – Reminded providers about the count and followed up with providers to ensure the maximum possible response rate and accuracy
<input checked="" type="checkbox"/>	<b>HMIS</b> – Used HMIS to verify data collected from providers for the sheltered point-in-time count
<input checked="" type="checkbox"/>	<b>Other</b> – please specify: Data Subcommittee reviews and validates all street count data
<b>(3) How often will sheltered counts of sheltered homeless people take place in the future?</b>	
<input type="checkbox"/>	Biennial (every two years)
<input checked="" type="checkbox"/>	Annual
<input type="checkbox"/>	Semi-annual
<input type="checkbox"/>	Other – please specify:
<b>(4) Month and Year when next count of sheltered homeless persons will occur: 01/2007</b>	
<b>(5) Indicate the percentage of providers completing the populations and subpopulations survey:</b>	
100 %	Emergency shelter providers
65 %	Transitional housing providers
N/A %	Permanent Supportive Housing providers

CoC-L-1

**L-2: Unsheltered Homeless Population and Subpopulations\***

<b>(1) Check the primary method used to enumerate unsheltered homeless persons in the CoC:</b>	
<input type="checkbox"/>	<b>Public places count</b> – CoC conducted a point-in-time count <u>without</u> client interviews
<input type="checkbox"/>	<b>Public places count with interviews</b> – CoC conducted a point-in-time count and interviewed every unsheltered homeless person encountered during the public places count
<input checked="" type="checkbox"/>	<b>Sample of interviews</b> – CoC conducted a point-in-time count and interviewed a random sample of unsheltered persons
<input type="checkbox"/>	<b>Extrapolation</b> – CoC conducted a point-in-time count and the information gathered from a sample of interviews was extrapolated to total population of unsheltered homeless people counted
<input type="checkbox"/>	<b>Public places count using probability sampling</b> – High and low probabilities assigned to designated geographic areas based on the number of homeless people expected to be found in each area. The CoC selected a statistically valid sample of each type of area to enumerate on the night of the count and extrapolated results to estimate the entire homeless population.
<input type="checkbox"/>	<b>Service-based count</b> – Interviewed people using non-shelter services, such as soup kitchens and drop-in centers, and counted those that self-identified as unsheltered homeless persons
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS to complete the enumeration of unsheltered homeless people

<input type="checkbox"/> <b>Other</b> – please specify:
<b>(2) Indicate the level of coverage of the point-in-time count of unsheltered homeless people:</b>
<input type="checkbox"/> <b>Complete coverage</b> – The CoC counted every block of the jurisdiction
<input type="checkbox"/> <b>Known locations</b> – The CoC counted areas where unsheltered homeless people are known to congregate or live
<input checked="" type="checkbox"/> <b>Combination</b> – CoC counted central areas using complete coverage and also visited known locations
<input type="checkbox"/> <b>Used service-based or probability sampling</b> (coverage is not applicable)
<b>(3) Indicate community partners involved in point-in-time unsheltered count (check all that apply):</b>
<input checked="" type="checkbox"/> <b>Outreach teams</b>
<input checked="" type="checkbox"/> <b>Law Enforcement</b>
<input checked="" type="checkbox"/> <b>Service Providers</b>
<input checked="" type="checkbox"/> <b>Community volunteers</b>
<input checked="" type="checkbox"/> <b>Other</b> – please specify: <b>social work students at local university, members of the faith based community, representatives from Parks and Recreation Department and the Bureau of Land Management</b>
<b>(4) Indicate steps taken to ensure the data quality of the unsheltered homeless count (check all that apply):</b>
<input checked="" type="checkbox"/> <b>Training</b> – Conducted a training for point-in-time enumerators
<input type="checkbox"/> <b>HMIS</b> – Used HMIS to check for duplicate information
<input checked="" type="checkbox"/> <b>Other:</b> We conduct the sheltered and unsheltered counts on the same day to ensure no duplication. We conduct the count at 4 am prior to all emergency shelters opening their doors to release their clients so the only people counted are those on the street. We have used the same team of volunteers for the past four years. We pair new volunteers with veteran volunteers and conduct a validation review for each quadrant walked by the team when the volunteers return to turn in their street count sheet.
<b>(5) How often will counts of unsheltered homeless people take place in the future?</b>
<input type="checkbox"/> Biennial (every two years)
<input checked="" type="checkbox"/> Annual
<input type="checkbox"/> Semi-annual
<input type="checkbox"/> Quarterly
<input type="checkbox"/> Other – please specify:
<b>(6) Month and Year when next count of unsheltered homeless persons will occur: 01/2007</b>
<small>*Please refer to ‘A Guide to Counting Unsheltered Homeless People’ for more information on unsheltered enumeration techniques. CoC-L-2</small>

## CoC Homeless Management Information System (HMIS)

### M: CoC HMIS Charts

CoCs should complete this section in conjunction with the lead agency responsible for the HMIS. All information is to be as of the date of application submission.

#### M-1: HMIS Lead Organization Information

Organization Name: ReStart	Contact Person: Genny Wilson
Phone: (775) 324-2622	Email: gwilson@restartreno.org
Organization Type: State/local government <input type="checkbox"/>	Non-profit/homeless provider <input checked="" type="checkbox"/> Other <input type="checkbox"/>

CoC-M-1

#### M-2: List HUD-defined CoC Name(s) and Number(s) for every CoC included in HMIS

**Implementation:**

HUD-Defined CoC Name*	CoC #	HUD-Defined CoC Name*	CoC #
Reno/Sparks/Washoe County CoC	NV- 501	Nevada Balance of State	NV-502

\*Find HUD-defined CoC names & numbers at: <http://www.hud.gov/offices/adm/grants/fundsavail.cfm>

CoC-M-2

**M-3: HMIS Implementation Status**

HMIS Data Entry Start Date for your CoC (mm/yyyy)	<b>or</b>	Anticipated Data Entry Start Date for your CoC (mm/yyyy)	If no current or anticipated data entry date, indicate reason: <input type="checkbox"/> New CoC in 2006 <input type="checkbox"/> Still in planning/software selection process <input type="checkbox"/> Still in initial implementation process
<b>January 2005</b>		Not applicable	

CoC-M-3

**M-4: Client Records\*\***

Calendar Year	Total Client Records Entered in HMIS / Analytical Database (Duplicated)	Total Unduplicated Client Records Entered in HMIS / Analytical Database
2004	Not applicable	Not applicable
2005	1556 (25 duplicates)	1531

CoC-M-4

**M-5: HMIS Participation\*\***

<b>a) HMIS participation by program type and funding source (please review instructions)</b>			
Program Type	Total number of agencies	Number of agencies participating in HMIS <u>receiving</u> HUD McKinney-Vento funds	Number of agencies participating in HMIS <u>not</u> receiving HUD McKinney-Vento funds
Street Outreach	0	0	0
Emergency Shelter	4/8	2	2
Transitional Housing	1/7	1	0
Permanent Supportive Housing	3/5	3	0
	<b>TOTALS:</b>	8/20	6
<b>b) Definition of bed coverage in HMIS (please review instructions)</b>			
Program Type	Date achieved or anticipate achieving 75% bed coverage (mm/yyyy)		
Emergency Shelter (all beds)	05/2005		
Transitional Housing (all beds)	05/2007		
Permanent Supportive Housing (McKinney-Vento funded beds only)	08/2005		

**Challenges and Barriers:** Briefly describe any significant challenges/barriers the CoC has experienced in:

1. HMIS implementation
2. HMIS Data and Technical Standards Final Notice requirements

The following barriers have been identified by the lead agency in implementing HMIS and in complying with the Data and Technical standards:

- Acceptance
  - Some agencies are resistant to the whole idea of having to use the HMIS and as such are resistant to taking necessary steps to successfully implement. Domestic violence providers especially.
- Awareness
  - When being contacted to begin the HMIS connectivity process, some agencies don't know what the system is and/or why they have to participate. This is often a result of changes in staffing/loss of the agency contact with the HMIS knowledge.
- Leadership Changes
  - Changes in executive management within participating agencies impact the implementation schedule.
- Inter and Intra agency communication
  - IT departments are often not oriented to HMIS by their managements and therefore unaware of what the lead agency's install team role is or how HMIS impacts their agency.
- Advocacy
  - Advocates for HMIS usage are needed on both community and agency levels. Optimal participation and usage requires a role at each agency responsible for ensuring effective HMIS implementation. Without at least one person in each agency who can advocate for system usage and who is able to provide the implementation support needed, successful HMIS connection and usage is difficult.
- Agency information related to hardware, software and connectivity needed for proper set up into HMIS is often incomplete or inadequate for the system to be set up optimally.
- Dual data entry/ Multiple systems
  - Some agencies are being required to use additional databases and this poses a number of difficulties. NNHIPS BADA Program has been the most recently mentioned.

\*\*For further instructions on charts M-4 and M-5, see Instructions section at the beginning of application.

CoC-M-5

## **M-6: Training, Data Quality and Implementation of HMIS Data & Technical Standards**

<b>1. Training Provided (check all that apply)</b>	<b>YES</b>	<b>NO</b>
Basic computer training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HMIS software training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Privacy / Ethics training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Security Training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
System Administrator training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2. CoC Process/Role</b>		
Is there a plan for aggregating all data to a central location, at least annually?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there a plan to monitor compliance with HMIS Data & Technical Standards Final Notice?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3. Data Collection Entered into the HMIS</b>		
Do all participating agencies submit universal data elements for <b>all</b> homeless persons served?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Do all agencies required to complete a HUD APR, except agencies meeting the definition of domestic violence provider, submit program level data elements to HMIS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>4. Security: Participating agencies have:</b>		
Unique username and password access?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secure location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Locking screen savers?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Virus protection with auto update?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Individual or network firewalls?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Restricted access for HMIS accessed via public forums (e.g. PKI digital certificates or IP filtering)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>5. Security: Agency responsible for centralized HMIS data collection and storage has:</b>		
Procedures for off-site storage of HMIS data?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disaster recovery plan that has been <u>tested</u> ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>6. Privacy Requirements</b>		
Have additional State confidentiality provisions been implemented?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there a "Purpose for data collection" sign at each intake desk for all participating agencies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does each participating agency have a written privacy policy, including the uses and disclosures of information	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Does each participating agency have a privacy policy posted on its website (if applicable)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>7. Data Quality: CoC has protocols for:</b>		
Client level data quality (i.e. missing birth dates etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Program level data quality (i.e. data not entered by agency in over 14 days)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Assessing CoC bed coverage (i.e. % of beds)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>8. Unduplication of Client Records: CoC process:</b>		
Uses data in the HMIS exclusively to generate unduplicated count?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Uses data integration or data warehouse to generate unduplicated count?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

CoC-M-6

CoC-M-6

## Part III: CoC Strategic Planning

### N: CoC 10-Year Plan, Objectives, and Action Steps Chart

Objectives to End Chronic Homelessness and Move Families and Individuals to Permanent Housing	Local Action Steps  (How are you going to do it? List action steps to be completed within the next 12 months.)	Measurable Achievement in 12 months	Measurable Achievement in 5 years	Measurable Achievement in 10 years	Lead Person  (Who is responsible for accomplishing CoC Objectives?)
<i>EXAMPLE: 1. Create new PH beds for chronically homeless persons.</i>	1. Expand New Hope Housing project with 5 new TRA S+C beds for chronically homeless persons	5 beds	20 beds	50 beds	Carol Smith: Chair, CoC Housing Committee
1. Create new PH beds for chronically homeless persons.	1.1 Implement new Shelter Plus Care program for the chronically homeless with 8 beds by September 2006 1.2 Promote new Shelter Plus Care applicants for 2006 CoC Competition	8 beds	24 beds	32 beds	Gabrielle Enfield, Co-chair CoC Coordinating Committee
2. Increase percentage of homeless persons staying in PH over 6 months to 71%.	2.1 Identify and address barriers to maintaining housing for PH clients 2.2 Provide resources and supportive services to maintain housing	259 clients	296 clients	360 clients	Case Managers for: ReStart, NNAMHS, Cottonwood Village Washoe County Social Services
3. Increase percentage of homeless persons moving from TH to PH to 61%.	3.1 Create 10 additional PH beds to serve persons moving from TH to PH 3.2 Conduct outreach with TH providers to assist them in linking clients to new beds.	10 beds	50 beds	100 beds	Jodi Royal-Goodwin Community Resources Program Manager City of Reno
4. Increase percentage of homeless persons becoming employed by 11%.	4.1 Link employment assistance services to 30 homeless persons through PSH projects 4.2 Assist homeless individuals in identifying and applying for employment suitable to their needs and skills 4.3 Identify and provide support to homeless clients to maintain employment	30 individuals	150 individuals	300 individuals	Case Managers for: ReStart, NNAMHS, Cottonwood Village Washoe County Social Services

5. Ensure that the CoC has a functional HMIS system.	5.1 Increase provider participation by 10 % each year through outreach and training.	10 % increase	50% increase	100% Increase	Genny Wilson, representative of HMIS Lead Agency
	5.2 Conduct training with new providers 2 x per year	2 trainings	10 training	20 training	
	5.3 Review data to determine service delivery needs and performance within the CoC	annually	5 x	10 x	
<b>Other CoC Objectives in 2006</b>					
6. Implement Shelter for Women by December 2006	6.1 Assist planning team in designing and implementing shelter for 55 women	55 beds	55 beds	55 beds	Shelter Planning Committee

CoC-N



## O: CoC Discharge Planning Policy Chart

Publicly Funded Institution(s) or System(s) of Care in CoC Geographic Area	Initial Discussion	Protocol in Development	Formal Protocol Finalized*	Formal Protocol Implemented*
Foster Care	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Health Care	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Mental Health	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Corrections	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

### Foster Care:

The Division of Child and Family Services is responsible for the oversight of all independent living programs in Nevada. The goal of Nevada's Independent Living Program is to provide children making the transition from placement to independence with the skills and resources necessary to make them independent and productive members of society. Nevada's Independent Living Program is a set of services available to all foster youth between the ages of 15.5 until the age of 21. The Division considers all eligible foster youth to include those youth who are in the care and custody of the Division, Washoe County Department of Social Services, or Clark County Department of Family Services. The Division considers foster care to be the legal status of the child. The physical placement of the child does not determine the eligibility for independent living services. Independent living services may continue with the child after permanency has been achieved, depending on the needs of the child.

In 2000, the Nevada State Legislature passed legislation creating the Assistance for Former Foster Youth fund by taxing the copying of real estate filing transactions throughout the state. This fund, provided by AB94, was specifically created to provide the necessary goods and services to Nevada youth who have aged out of the foster care system until the youth reached the age of 21. Goods and services allowable to youth include, but are not limited to job training, housing assistance, case management, and medical insurance. The legislation directs the State to limit the administrative costs of the fund to 10% or less. The Legislative Council Bureau, with the concurrence of the Office of the Attorney General, determined that the fund could also be used to assist youth who are currently in the care and custody of the state with their transition to independence. During the Child and Family Services Review in February 2004, Nevada was commended for the creation of this fund, and the fund was noted as a promising practice in Nevada.

### Health Care:

In development by Governor's Interagency Council on Homelessness.

### Mental Health:

NNAMHS has policies and procedures in place to ensure that persons leaving publicly funded institutions or systems of care do not end up homeless when discharged from the facility. The policy states:

*Social Services will have the overall responsibility for the discharge planning process. The process is begun at admission and includes the generation of an initial discharge plan which may be revised, updated, and finalized over time. The plan may include assessing discharge needs, referring the patient to Outpatient Services, identifying and mobilizing community resources, assisting patients in setting up appointments for current and aftercare needs, formulation of an*

*aftercare program based on available resources, and assisting with obtaining resources for housing, food, financial assistance, etc. The final discharge plan is reviewed with the patient, family, and significant others as applicable prior to discharge.*

**Corrections:**

The Department of Corrections (DOC) has policies and procedures in place to ensure that persons leaving publicly funded institutions or systems of care do not end up homeless when discharged from the facility. Nevada Revised Statutes, states that the Director of the Department of Corrections (DOC) may enter into contracts with one or more public or private entities to provide the following services, as necessary and appropriate, to offenders or parolees participating in a program:

- (a) Transitional housing;
- (b) Treatment pertaining to substance abuse or mental health;
- (c) Training in life skills;
- (d) Vocational rehabilitation and job skills training; and
- (e) Any other services required by offenders or parolees who are participating in a program.

The DOC provides referrals and information regarding **Permanent housing**. DOC also provides training in life skills that includes training in the areas of:

- (a) Parenting;
- (b) Improving human relationships;
- (c) Preventing domestic violence;
- (d) Maintaining emotional and physical health;
- (e) Preventing abuse of alcohol and drugs;
- (f) Preparing for and obtaining employment; and
- (g) Budgeting, consumerism and personal finances.

The DOC has established the goal to develop a continuum of services and programs that will prepare the offender at specific stages of his/her sentence for re-entry and release into society.

CoC-O

## P: CoC Coordination Chart

<b>Consolidated Plan Coordination</b>		<b>YES</b>	<b>NO</b>
a. Do Con Plan planners, authors and other Con Plan stakeholders participate in CoC general planning meetings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Do CoC members participate in Con Plan planning meetings, focus groups, or public forums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Were CoC strategic plan goals addressing homelessness and chronic homelessness used in the development of the Con Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>Jurisdictional 10-year Plan Coordination</b>			
a. Are there separate formal jurisdictional 10-year Plan(s) being developed and/or being implemented within your CoC geography? (If No, you may skip to the next section of this chart.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Do 10-year Plan conveners, authors and other stakeholders participate in CoC general planning meetings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Have 10-year Plan participants taken steps to align their planning process with the local CoC plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d. Were CoC strategic plan goals used in the development of the 10-year Plan(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
e. Provide the number of jurisdictions within your CoC geography that have formally implemented a 10-year plan(s).	3		
<b>Policy Academy* Coordination</b>		<b>YES</b>	<b>NO</b>
a. Do CoC members participate in State Policy Academy meetings, focus groups, public forums, or listservs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Were CoC strategic plan goals adopted by the CoC as a result of communication/coordination with the State Policy Academy Team?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Has the CoC or any of its projects received state funding as a result of its coordination with the State Policy Academy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>Public Housing Agency Coordination</b>			
a. Do CoC members meet with CoC area PHAs to improve coordination with and access to mainstream housing resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>Coordination with State Education Agencies</b>			
a. Did the CoC provide the state education agency with a list of emergency and transitional housing facilities located within the CoC boundaries that serve families with school-age children or school-age unaccompanied youth under the age of 18?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

\*A State Policy Academy is a state-level process designed to help state and local policymakers improve access to mainstream services for people who are homeless. For more information about getting involved in a State Policy Academy, see <http://www.hrsa.gov/homeless>.

CoC-P

## CoC 2006 Funding Priorities

### Q: CoC Project Priorities Chart

For further instructions for filling out this section, see the Instructions section.

HUD-defined CoC Name:*Reno, Sparks and Washoe County						CoC #: NV 501			
(1) SF-424 Applicant Name  (Please Remove Examples)	(2) Project Sponsor Name	(3) Project Name	(4) Priority	(5) Requested Project Amount ***	(6) Term	(7) Program and Component Type**			
						SHP New	SHP Renewal	S+C New	SRO New
Washoe County	ReStart	Shelter Plus Care II	1	286,080	5			SRA	
ReStart	ReStart	ANCHOR	2	501,744	1		TRA		
ReStart	ReStart	HMIS	3	110,292	1		HMIS		
Community Housing Resource Board	Community Housing Resource Board	Cottonwood Village	4	51,955	1		SSO		
<b>(8) Subtotal: Requested Amount for CoC Competitive Projects:***</b>				<b>\$950,071</b>					
<b>(9) Shelter Plus Care Renewals:****</b>						<b>S+C Component Type**</b>			
NNAMHS	NNAMHS	Shelter Plus Care	5	421,272	1	TRA			
<b>(10) Subtotal: Requested Amount for S+C Renewal Projects:</b>				<b>\$421,272</b>					
<b>(11) Total CoC Requested Amount:</b>				<b>\$1,371,343</b>					

CoC-Q

### R: CoC Pro Rata Need (PRN) Reallocation Chart

(Only for Eligible Hold Harmless CoCs)

**Advisory Warning:** According to the CoC competitive process, a CoC that scores below the initial funding line will not have the new projects on this chart funded. As such, the reallocated funds that had been used for renewals would no longer be available to the CoC.

<b>1. Will your CoC be using the PRN reallocation process?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, explain the open decision making process the CoC used to reduce and/or eliminate projects (use no more than one-half page). <b>Not Applicable</b>	
<b>2. Enter the total 1-year amount of all SHP projects that are eligible for renewal in 2006, which amount you have verified with your field office:</b>	<b>Example:</b> \$530,000 <b>\$0</b>

<b>3. Starting with the total entered above for question 2, subtract the amount your CoC proposes to use for new permanent housing projects, and enter the remaining amount:</b> <i>(In this example, the amount proposed for new PH projects is \$140,000)</i>	<i>Example:</i> \$390,000	<b>\$0</b>
--	------------------------------	------------

**4. Enter the Reduced or Eliminated Grant(s) in the 2006 Competition -Not applicable**

(1) Expiring Grants	(2) Program Code	(3) Component	(4) Annual Renewal Amount	(5) Reduced Amount	(6) Retained Amount from Existing Grant
<i>Ex:</i> MA01B300002	SHP	TH	\$100,000	\$60,000	\$40,000
<i>Ex:</i> MA01B400003	SHP	SSO	\$80,000	\$80,000	\$0
					0
<b>(7) TOTAL:</b>			0	0	0

**5. Newly Proposed Permanent Housing Projects in the 2006 Competition**

(8) 2006 Project Priority Number	(9) Program Code	(10) Component	(11) Transferred Amounts
<i>Example:</i> #5	SHP	PH	\$90,000
<i>Example:</i> #12	S+C	TRA	\$50,000
<b>(12) TOTAL:</b>			0

CoC-R

---

**S: CoC Project Leveraging Summary Chart**

Name of Continuum	Total Value of Written Commitment
Reno/Sparks/Washoe County CoC	\$4,093,097

CoC-S

---

**T: CoC Current Funding and Renewal Projections Chart**

**T: CoC Current Funding and Renewal Projections**

<b>Supportive Housing Program (SHP) Projects:</b>						
<b>Type of Housing</b>	<b>All SHP Funds Requested (Current Year)</b>	<b>Renewal Projections</b>				
	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>
Transitional Housing (TH)	\$0	\$0	\$0	\$0	\$0	\$0
Safe Havens-TH	\$0	\$0	\$0	\$0	\$0	\$0
Permanent Housing (PH) Restart	\$501,744	\$812,490	\$812,490	\$812,490	\$812,490	\$812,490
Safe Havens-PH	\$0	\$0	\$0	\$0	\$0	\$0
SSO Cottonwood	\$ 51,955	\$ 51,955	\$ 51,955	\$ 51,955	\$ 51,955	\$ 51,955
HMIS ReStart	\$110,292	\$110,292	\$110,292	\$110,292	\$110,292	\$110,292
<b>Totals</b>	<b>\$663,991</b>	<b>\$974,737</b>	<b>\$974,737</b>	<b>\$974,737</b>	<b>\$974,737</b>	<b>\$974,737</b>

**Shelter Plus Care (S+C) Projects: NNAMHS and Washoe County**

<b>Number of Bedrooms</b>	<b>All S+C Funds Requested (Current Year)</b>		<b>Renewal Projections</b>									
	<b>2006</b>		<b>2007</b>		<b>2008</b>		<b>2009</b>		<b>2010</b>		<b>2011</b>	
	<b>Units</b>	<b>\$</b>	<b>Units</b>	<b>\$</b>	<b>Units</b>	<b>\$</b>	<b>Units</b>	<b>\$</b>	<b>Units</b>	<b>\$</b>	<b>Units</b>	<b>\$</b>
0	17	\$348,429	9	\$64,368	9	\$64,368	9	\$64,368	17	\$121,584	25	\$178,800
1	32	\$273,408	32	\$273,408	32	\$273,408	32	\$273,408	32	\$273,408	32	\$273,408
2	5	\$52,800	5	\$52,800	5	\$52,800	5	\$52,800	5	\$52,800	5	\$52,800
3	2	\$30,696	2	\$30,696	2	\$30,696	2	\$30,696	2	\$30,696	2	\$30,696
<b>Totals</b>	<b>56</b>	<b>\$705,333</b>	<b>48</b>	<b>\$421,272</b>	<b>48</b>	<b>\$421,272</b>	<b>48</b>	<b>\$421,272</b>	<b>56</b>	<b>\$478,488</b>	<b>64</b>	<b>\$535,704</b>

## Part IV: CoC Performance

### U: CoC Achievements Chart

Enter the goals and action steps that you that you listed on your 2005 CoC application and briefly describe measurable achievements in the past 12 months. The information provided in the first two columns should be the same as provided in the 2005 CoC application. Add rows as needed.

Goals	Action Steps	Measurable Achievements
<b>Chronic Homelessness Goals</b>		
<p>1: End Chronic Homelessness through development of permanent supportive housing to serve the chronically homeless</p>	<p>1.1 Develop new permanent supportive housing resources to serve the chronically homeless in Northern Nevada via the 2004-05 CoC application process</p> <p>1.2 Advocate for shelter plus care match of state funds for rural Nevada (AB 520) to increase housing resources in Northern Nevada for chronically homeless</p> <p>1.3 Conduct education and outreach with homeless service providers, faith based members, mental health and substance abuse providers to increase awareness of chronic homelessness and housing first strategies</p>	<p>1.1 Continuum of Care was awarded 8 additional Shelter plus Care beds as a result of the 2005 competition. All beds serve the chronically homeless.</p> <p>1.2 AB 520 was introduced in Spring 2005. RAAH members advocated at two hearings of the legislature. The measure did not reach a floor vote and failed in Committee.</p> <p>1.3 RAAH meetings, public forums, strategic planning activities all focused on increasing awareness of chronic homelessness and housing first strategies to service providers. As a result, chronic homelessness is now referenced in the Washoe County Human Services Strategic Plan, the Senior Citizens Strategic Plan and in the Fund for a Healthy Nevada prioritization reports.</p>
<p>2. Develop and adopt a Northern Nevada plan to end chronic homelessness</p>	<p>2.1 Create template for plan to end chronic homelessness</p> <p>2.2 Identify stakeholders (commissioners, agency heads, law enforcement, consumers, medical professions, social workers) to participate on planning subcommittee for Northern Nevada</p> <p>2.3 State policy academy to</p>	<p>2.1 Completed in September 2005</p> <p>2.2 Currently 33 members and staff from the three jurisdictions are participating in the planning process, representing all stakeholders listed in 2.2</p> <p>2.3 Completed October 2005</p>



	<p>present statewide strategies to end chronic homelessness</p> <p>2.4 Identify goals, strategies, timing and persons responsible to end chronic homelessness</p> <p>2.5 Draft plan and present to RAAH, Mayor, City Councils and County Commission</p> <p>2.6 Adopt plan</p>	<p>2.4 Goals, strategies, timing and persons responsible have been identified and documented into the draft plan.</p> <p>2.5 Plan has been drafted and was finalized on May 18 and will be presented to the parties listed in 2.5 by July 1</p> <p>2.6 Plan will be adopted by July 30, 2006</p>
<p>3. Increase length of stay in housing and income of chronically homeless</p>	<p>3.1 Evaluate admission and discharge policies of existing programs to determine barriers to stay for chronically homeless participants</p> <p>3.2 Identify strategies to increase length of stay by revising admission and discharge criteria and policies at programs serving chronically homeless</p> <p>3.3 Implement extended stay strategies for chronic homelessness by program</p> <p>3.4 Promote use of single application form to apply for mainstream resources</p> <p>3.5 Conduct orientation for service providers of how to access mainstream resources for chronically homeless clients based on TA received from Home base</p>	<p>3.1 Formed SOAR team to recruit current providers to participate in team. Attended training on admission and discharge policies that act as barriers.</p> <p>3.2 Attended SOAR training to identify strategies to increase length of stay.</p> <p>3.3 Included extended stay information in planning process to end chronic homelessness.</p> <p>3.4 Deferred while waiting for Governor to appoint Task Force to end Chronic Homelessness.</p> <p>3.5 Conducted SOAR training in March 2006</p>
<p>4: Link chronically homeless to housing via homeless resource center to be part of Phase 2 of</p>	<p>4.1 Develop and secure funding for homeless resource center.</p>	<p>4.1 Homeless resource center received funding in 2006.</p>

<p>the construction of the emergency shelter built in 2005</p>	<p>4.2 Coordinate services between homeless resource center and service providers in the community</p> <p>4.3 Recruit additional substance abuse, mental health and dual diagnosis service providers and basic service providers to participate in providing services at homeless resource center</p> <p>4.4 Obtain training for key participants to conduct outreach to chronic homeless with substance abuse and mental health disorders that includes existing efforts and new homeless resource center</p> <p>4.5 Begin providing homeless resource center services to chronically homeless</p>	<p>4.2 Subcommittee to coordinate services has been established.</p> <p>4.3 Negotiations are underway between service providers and the City of Reno.</p> <p>4.4 CIT Training provided in 2005.</p> <p>4.5 Deferred</p>
--	---	---

**Other Homelessness Goals**

<p>1. Improve coordination and delivery of services to RAAH's homeless by collecting data about them and the services they apply for and/or receive.</p>	<p>5.1 Identify additional service providers to participate in HMIS</p> <p>5.2 Evaluate hardware and software needs of new participants</p> <p>5.3 Train HMIS program administrators to use HMIS system</p> <p>5.4 Develop minimum data release thresholds for information sharing between agencies</p> <p>5.5 Use homeless discharge data from Northern Nevada HMIS to determine program performance and barriers confronted by clients released with nowhere to</p>	<p>5.1 Achieved by lead agency 2005</p> <p>5.2 Achieved by lead agency 2005 and 2006</p> <p>5.3 Achieved by lead agency 2005 and 2006</p> <p>5.4 Achieved by lead agency and HMIS Steering Committee 2006</p> <p>5.5 Not sufficient data yet to complete this action.</p>
--	---	---

	<p>go</p> <p>5.6 Use Northern Nevada HMIS client outcome data to recommend policy changes to improve homeless services and discharge outcomes in Northern Nevada</p>	<p>5.6 Not sufficient data yet to complete this action.</p>
<p>6. Open homeless resource center located within new emergency shelter</p>	<p>6.1 Identify funding to support the homeless resource center and family centered emergency shelter with case management and supportive services</p> <p>6.2 Submit applications to three private foundations for capital grant to fund construction of Phase 2 of the Campus</p> <p>6.3 Develop MOU's for all providers offering services at the homeless resource center</p>	<p>6.1 The three jurisdictions are pooling HUD Emergency Shelter Grant monies to support operations; the City of Reno will provide the facilities and maintenance. ReStart is growing an endowment fund, with a target of \$2,000,000. In addition, the jurisdictions in concert with community groups and service providers are planning to ask the 2007 Nevada Legislature for an appropriation to support expanded operations.</p> <p>6.2 The City of Reno has submitted two grant applications for Phase II, with a third application in development. The City submitted an application to the AHP program of Federal Home Loan Bank for \$657,000 to construct and furnish the Single Women's Shelter (we learn the outcome of this on or around May 25, 2006); the City has submitted a HUD EDI application in the amount of \$750,000 to complete the Triage Center (City's #1 federal priority, currently supported by Sen. Reid); the City, in concert with ReStart, is finalizing an application to the Kresge Foundation for \$1,250,000 to construct the Family Shelter and Community Resource Center Building.</p> <p>6.3 The City of Reno currently operates the Men's Drop-In Center through a contract with the Reno-</p>

		Sparks Gospel Mission. The City has been meeting with other future service providers to discuss and finalize common operating guidelines for the campus and expects to formalize operating guidelines and an overarching MOU when the Family Shelter Building is under construction and a target date for opening is identified.
--	--	--

CoC-U

### V: CoC Chronic Homeless (CH) Progress Chart

This chart should be based on January 2006 point-in-time counts. For further instructions in filling out this chart, please see the Instructions section.

Year	(1) Number of CH Persons	(2) Number of PH beds for the CH	(3) New PH beds for the CH between Feb. 1, 2005 – Jan. 31, 2006	(4) Identify the cost of the <u>new</u> CH beds from each funding source			
				Public			Private
				Federal	State	Local	
2004	216	83					
2005	302	90					
2006	59	120	30	\$310,745	\$0	\$25,000	\$1,000

(5) Briefly describe the reason(s) for any changes in the total number of the chronically homeless between 2005 and 2006 (use less than one-half page).

The number of chronically homeless went down between 2005 and 2006 for several reasons. First, the number of beds for the chronically homeless increased, providing more resources for the population. As they remain in permanent housing, the number on the street goes down. Second, education has raised awareness among service providers. They have all been trained in a housing first approach and now understand the cost of leaving the chronically homeless unserved. In the past 24 months the Crisis Intervention Team (CIT) has focused on identifying and linking chronically homeless to services. It is believed that these efforts, linked with greater awareness and more resources has led to the decline in the number of chronically homeless.

CoC-V

### W: CoC Housing Performance Chart

1. Participants in Permanent Housing		
<input type="checkbox"/>	No applicable PH renewals are on the CoC Project Priorities Chart	APR Data
<input checked="" type="checkbox"/>	All PH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who <b>exited</b> PH project(s)—APR Question 12(a)	26
b.	Number of participants who did <b>not leave</b> the project(s)—APR Question 12(b)	91

c. Number who <b>exited</b> after staying 7 months or longer in PH—APR Question 12(a)	12
d. Number who did <b>not leave</b> after staying 7 months or longer in PH—APR question 12(b)	62
e. Percentage of all participants in PH projects staying 7 months or longer (c. + d. divided by a. + b. multiplied by 100 = e.)	63%

## 2. Participants in Transitional Housing (TH)

HUD will be assessing the percentage of all TH clients who moved to a permanent housing situation. TH projects include SHP-TH and SHP-Safe Haven/TH *not* identified as permanent housing. Complete the following chart utilizing data based on the preceding operating year from APR Question 14 for TH renewal projects included on your CoC Priorities Chart.

<input checked="" type="checkbox"/>	No applicable TH renewals are on the CoC Project Priorities Chart	APR Data
<input type="checkbox"/>	<u>All</u> TH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who exited TH project(s)—including unknown destination	
b.	Number of participants who moved to PH	
c.	Percent of participants in TH projects who moved to PH (b. divided by a. multiplied by 100 = c.)	%

CoC-W

## X: Mainstream Programs and Employment Project Performance Chart

<input type="checkbox"/>	No applicable renewal projects for the Mainstream Programs and Employment Chart included in the CoC Priorities Chart.
<input checked="" type="checkbox"/>	<u>All</u> non-HMIS renewal projects on the CoC Priorities Chart that submitted an APR are included in calculating the responses below.

(1) Number of Adults Who Left (Use same number in each cell)	(2) Income Source	(3) Number of Exiting Adults with Each Source of Income	(4) Percent with Income at Exit (Col 3 ÷ Col 1 x 100)
<i>Example:</i> 105	a. SSI	40	38.1%
<i>Example:</i> 105	b. SSDI	35	33.3%
<b>31</b>	a. SSI	<b>8</b>	<b>25.8%</b>
<b>31</b>	b. SSDI	<b>13</b>	<b>41.9%</b>
<b>31</b>	c. Social Security	<b>2</b>	<b>6.4%</b>
<b>31</b>	d. General Public Assistance	<b>0</b>	<b>0%</b>
<b>31</b>	e. TANF	<b>2</b>	<b>6.4%</b>
<b>31</b>	f. SCHIP	<b>00</b>	<b>0%</b>
<b>31</b>	g. Veterans Benefits	<b>0</b>	<b>0%</b>
<b>31</b>	<b>h. Employment Income</b>	<b>8</b>	<b>25.8%</b>
<b>31</b>	i. Unemployment Benefits	<b>0</b>	<b>0%</b>
<b>31</b>	j. Veterans Health Care	<b>0</b>	<b>0%</b>
<b>31</b>	k. Medicaid	<b>5</b>	<b>16.1%</b>
<b>31</b>	l. Food Stamps	<b>7</b>	<b>22.6%</b>
<b>31</b>	m. Other (please specify)	<b>4</b>	<b>12.9%</b>
<b>31</b>	n. No Financial Resources	<b>7</b>	<b>22.6%</b>

CoC-X

## Y: Enrollment and Participation in Mainstream Programs Chart

Check those activities implemented by a <b>majority</b> of your CoC's homeless assistance providers (check all that apply):	
<input checked="" type="checkbox"/>	A majority of homeless assistance providers have case managers systematically assist clients in completing applications for mainstream benefit programs.
<input checked="" type="checkbox"/>	The CoC systematically analyzes its projects' APRs to assess and improve access to mainstream programs.
<input checked="" type="checkbox"/>	The CoC contains a specific planning committee to improve CoC-wide participation in mainstream programs.
<input type="checkbox"/>	A majority of homeless assistance providers use a single application form for four or more of the above mainstream programs.
<input checked="" type="checkbox"/>	The CoC systematically provides outreach and intake staff specific, ongoing training on how to identify eligibility and program changes for mainstream programs.
<input type="checkbox"/>	The CoC has specialized staff whose only responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs.
<input checked="" type="checkbox"/>	A majority of homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments.
<input checked="" type="checkbox"/>	A majority of homeless assistance providers have staff systematically follow-up to ensure that mainstream benefits are received.
<input checked="" type="checkbox"/>	The CoC coordinates with the State Interagency Council(s) on Homelessness to reduce or remove barriers to accessing mainstream services.

CoC-Y

## Z: Unexecuted Grants Awarded Prior to the 2005 CoC Competition Chart

Provide a list of <u>all</u> HUD McKinney-Vento Act awards made prior to the 2005 competition that are not yet under contract (i.e., signed grant agreement or executed ACC).			
Project Number	Applicant Name	Project Name	Grant Amount
Example: MI23B901002	Michiana Homes, Inc.	TH for Homeless	\$514,000
Not applicable			
<b>Total:</b>			\$0

CoC-Z

## AA: CoC Participation in Energy Star Chart

HUD promotes energy-efficient housing. All McKinney-Vento funded projects are encouraged to promote energy efficiency, and are specifically encouraged to purchase and use Energy Star labeled products. For information on the Energy Star initiative go to: <a href="http://www.energystar.gov">http://www.energystar.gov</a> .
---

Have you notified CoC members of the Energy Star initiative?  Yes  No

Percentage of CoC projects on CoC Priority Chart using Energy Star appliances: **100 %**

CoC-AA

**AB: Section 3 Employment Policy Chart**

	YES	NO
1. Is any project in your CoC requesting HUD funds for housing rehabilitation or new construction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. <b>If you answered yes to Question 1:</b> Is the project requesting \$200,000 or more?	<input type="checkbox"/>	<input type="checkbox"/>
<p>3. <b>If you answered yes to Question 2:</b> What activities will the project undertake to ensure that employment and other economic opportunities are directed to low- and very low-income persons, per the Housing and Urban Development Act of 1968 (known as “Section 3”)?</p> <p><b>Check all that apply:</b></p> <p><input type="checkbox"/> The project will have a preference policy for hiring low- and very low-income persons residing in the service area or neighborhood where the project is located, and for hiring Youthbuild participants/graduates.</p> <p><input type="checkbox"/> The project will advertise at social service agencies, employment and training centers, community centers, or other organizations that have frequent contact with low- and very low-income individuals, as well as local newspapers, shopping centers, radio, etc.</p> <p><input type="checkbox"/> The project will notify any area Youthbuild programs of job opportunities.</p> <p><input type="checkbox"/> If the project will be awarding competitive contracts of more than \$100,000, it will establish a preference policy for “Section 3 business concerns”* that provide economic opportunities and will include the “Section 3 clause”** in all solicitations and contracts.</p>		
<p>*A “Section 3 business concern” is one in which: 51% or more of the owners are section 3 residents of the area of service; <u>or</u> at least 30% of its permanent full-time employees are currently section 3 residents of the area of service, or within three years of their date of hire with the business concern were section 3 residents; <u>or</u> evidence of a commitment to subcontract greater than 25% of the dollar award of all subcontracts to businesses that meet the qualifications in the above categories is provided.</p> <p>**The “Section 3 clause” can be found at 24 CFR Part 135.</p>		

CoC-AB