



2022 Supplemental NOFO Project Application

**New Project Application
FORM 400-B**

A. Project Applicant Information

Agency Name:			
Agency Address:			
City, State, Zip:			
Contact Person:			
Contact Phone and Email		e-mail:	
Agency Executive Director:			
Director Phone and Email:		e-mail:	

B. Project Information

Name of Project:			
Project Address, if applicable: (Mark N/A for scattered sites.)	<input type="checkbox"/> N/A		
Is this address confidential?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Application Type	<input type="checkbox"/> Unsheltered Set Aside <input type="checkbox"/> Rural Set Aside		
Project Type	<input type="checkbox"/> PH- RRH <input type="checkbox"/> HMIS <input type="checkbox"/> PH-PSH <input type="checkbox"/> Emergency Shelter <input type="checkbox"/> SSO-CE <input type="checkbox"/> SSO (Non-CE) <input type="checkbox"/> Joint TH&PH-RRH <input type="checkbox"/> Homeless Prevention		
Amount Requested			

C. Threshold Criteria

1) SAM Registration
Attach documentation of organizations active SAM registration. Attachment SAM.
2) DUNS Number
Attach documentation of organization’s valid DUNS number. Attachment DUNS.
3) Code of Conduct
Attach copy of organizations Code of Conduct demonstrating requirements to conduct business in accordance with ethical standards. Attachment CODE OF CONDUCT
4) Audit Management Letter
Attach a copy of the most recent Audit Management Letter which contains a statement as to whether the audit disclosed any audit findings for which a response is overdue or unsatisfactory. Attachment AUDIT
5) Nondiscrimination Policy
Attach the organizations established nondiscrimination Policy. Attachment NONDISC

D. Scored Criteria

1) Administration – eSnaps
Attach documentation of at least two staff with active eSnaps profiles as Attachment A.
2) Demonstrated Need
Include narrative and attach documentation of the community need for this project from approved data sources, such as, BBCoC Homelessness Assistance Plan, HMIS, PIT County Reports, or other HUD Approved Databases. Attachment D.
3) Goals of the Homelessness Assistance Plan (HAP)
Include narrative and reference the BBCoC updated HAP indicating how your project will advanced the goals identified in the HAP, citing specific elements to be addressed from the HAP. Attachment E.
4) Coordinated Entry (CE)
Include narrative describing how this project will participate in the BBCoC Coordinated Entry Assessment and Referral process. Attachment CE.
5) Racial Equity
Include narrative and data demonstrating organizations executive and direct service staff racial and ethnic makeup is reflective of the clients served within the past year. Attachment F.
6) Commitment to Housing First
Include narrative and reference the organizations policies and procedures that demonstrate the program will not mandate client participation in services either before obtaining housing or in order to retain housing. In addition, reference established policies and procedures within the organization that prioritize rapid placement and stabilization in permanent housing and improvement of economic self-sufficiency. Attachment G.

7) Coordination with Healthcare Organization
Include narrative on how project participants will be connected to obtain health insurance and address healthcare needs. Attach MoUs with healthcare organizations and letters of financial or in-kind commitment to this project by healthcare organizations. Attachment HEALTH
8) Program – Staffing Plan with Job Descriptions
Describe how the project will be implemented, including staff qualifications, a staffing plan with target dates of hire, location of service delivery, and all available supportive services. For maximum points, provide a detailed plan and attach job descriptions as Attachment H.
9) Program – Organizational Chart
Attach organizational chart as Attachment I. For maximum points, show both existing staff and proposed staffing to be hired under this project.
10) Program – Operational Plan
Describe the following aspects of the project operational plan: <ul style="list-style-type: none"> a. Staffing – Hiring: Provide target dates of hire for each project position, indicate what methods of recruitment will be used to advertise positions. b. Training Provided: <ul style="list-style-type: none"> a. New Staff/Orientation b. New Grantee/HUD JAX c. Trauma Informed Care d. Confidentiality and Security e. Conflict Resolution and Grievance P&P c. Adoption of Policies and Procedures <ul style="list-style-type: none"> a. Homeless status and eligibility determination b. Programmatic requirements d. Forms and Documentation <ul style="list-style-type: none"> a. Client screening and eligibility forms b. Data collection forms <p>For maximum points, attach completed policies and procedures as Attachment J.</p>
11) Client Eligibility
The applicant has clear written procedures to verify client eligibility for program services as defined in the NOFO based on the project type and has defined policies for referring and receipt of referrals through Coordinated Entry. This includes detail on how clients will be connected to mainstream benefits promoting economic self-sufficiency. Reference Attachment K.
12) Improvement of System Performance
Provide a narrative demonstrating how the project will improve two or more of the HUD System Performances for our Continuum in the future. This includes clear goals and outcomes for each measure it will address. Attachment L.

13) Project Outcomes
Provide a narrative demonstrating the proposed outcomes for the project, how the outcomes will be measured, tracked and documented over the project period. Attachment M.
14) Project Budget
Provide a detailed project budget describing how requested funding will be allocated including the cost per person/ per household served and the breakdown of the amount and percent of costs to be spent on housing assistance, supportive services, HMIS and administration. The eSnaps Budget page for the project can be referenced but there should also be narrative including cost per person and household. Attachment N.
15) Match Documentation
Attach a letter from the source of match funds indicating the match funding is dedicated to carrying out activities related to this project. Attachment O.
16) PROOF OF PROJECT SUBMISSION IN ESNAPS
Attach a full export of the project submission in eSnaps as a PDF. Attachment P.

ATTACHMENT:

SAM



CENTER FOR INDEPENDENT LIVING OF NORTH FLORIDA INC

Unique Entity ID MLRZG13VEJ51	CAGE / NCAGE 5KT73	Purpose of Registration Federal Assistance Awards Only
Registration Status Active Registration	Expiration Date Apr 9, 2023	
Physical Address 1823 Buford CT Tallahassee, Florida 32308-4465 United States	Mailing Address 1823 Buford Court Tallahassee, Florida 32308-4465 United States	

Business Information

Doing Business as (blank)	Division Name Centr For Independent Living Of North Florida, Inc.	Division Number (blank)
Congressional District Florida 05	State / Country of Incorporation Florida / United States	URL (blank)

Registration Dates

Activation Date Mar 14, 2022	Submission Date Mar 10, 2022	Initial Registration Date Jul 8, 2009
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Entity Dates

Entity Start Date Jun 18, 1980	Fiscal Year End Close Date Sep 30
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Immediate Owner

CAGE (blank)	Legal Business Name (blank)
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Highest Level Owner

CAGE (blank)	Legal Business Name (blank)
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Executive Compensation

In your business or organization's preceding completed fiscal year, did your business or organization (the legal entity to which this specific SAM record, represented by a Unique Entity ID, belongs) receive both of the following: 1. 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements and 2. \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

No

Does the public have access to information about the compensation of the senior executives in your business or organization (the legal entity to which this specific SAM record, represented by a Unique Entity ID, belongs) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

Not Selected

Proceedings Questions

Is your business or organization, as represented by the Unique Entity ID on this entity registration, responding to a Federal procurement opportunity that contains the provision at FAR 52.209-7, subject to the clause in FAR 52.209-9 in a current Federal contract, or applying for a Federal grant opportunity which contains the award term and condition described in 2 C.F.R. 200 Appendix XII?

No

Does your business or organization, as represented by the Unique Entity ID on this specific SAM record, have current active Federal contracts and/or grants with total value (including any exercised/unexercised options) greater than \$10,000,000?

Not Selected

Within the last five years, had the business or organization (represented by the Unique Entity ID on this specific SAM record) and/or any of its principals, in connection with the award to or performance by the business or organization of a Federal contract or grant, been the subject of a Federal or State (1) criminal proceeding resulting in a conviction or other acknowledgment of fault; (2) civil proceeding resulting in a finding of fault with a monetary fine, penalty, reimbursement, restitution, and/or damages greater than \$5,000, or other acknowledgment of fault; and/or (3) administrative proceeding resulting in a finding of fault with either a monetary fine or penalty greater than \$5,000 or reimbursement, restitution, or damages greater than \$100,000, or other acknowledgment of fault?

Not Selected**Exclusion Summary**

Active Exclusions Records?

No**SAM Search Authorization**

I authorize my entity's non-sensitive information to be displayed in SAM public search results:

Yes**Entity Types****Business Types**

Entity Structure

Corporate Entity (Tax Exempt)

Profit Structure

Non-Profit Organization

Entity Type

Business or Organization

Organization Factors

(blank)**Socio-Economic Types**

Check the registrant's Reqs & Certs, if present, under FAR 52.212-3 or FAR 52.219-1 to determine if the entity is an SBA-certified HUBZone small business concern. Additional small business information may be found in the SBA's Dynamic Small Business Search if the entity completed the SBA supplemental pages during registration.

Financial Information

Accepts Credit Card Payments

Yes

Debt Subject To Offset

No

EFT Indicator

0000

CAGE Code

5KT73**Electronic Funds Transfer**

Account Type

Checking

Routing Number

******9922**

Lock Box Number

(blank)

Financial Institution

SYNOVUS BANK

Account Number

******01501****Automated Clearing House**

Phone (U.S.)

8505759621

Email

accounting@ability1st.info

Phone (non-U.S.)

(blank)

Fax

8505755740**Remittance Address****CENTER FOR INDEPENDENT LIVING OF****NORTH FLORIDA D/B/A ABILITY****1823 Buford Court****Tallahassee, Florida 32308****United States****Taxpayer Information**

EIN

******1522**

Type of Tax

Applicable Federal Tax

Taxpayer Name

Center for Independent Living of North

Tax Year (Most Recent Tax Year)

2020

Name/Title of Individual Executing Consent

Executive Director

TIN Consent Date

Mar 10, 2022

Address

1823 Buford CT**Tallahassee, Florida 32308**

Signature

Mandy Bianchi**Points of Contact****Accounts Receivable POC**

♀

Aleighta Brown, Finance Specialist
accounting@ability1st.info
8505759621

Electronic Business

<p>♀ Aleighta Brown, Finance Specialist accounting@ability1st.info 8505759621</p>	<p>1823 Buford Court Tallahassee, Florida 32308 United States</p>
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Government Business

<p>♀ Mandy Bianchi, Executive Director mandybianchi@ability1st.info 8505759621</p>	<p>1823 Buford Court Tallahassee, Florida 32308 United States</p>
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Shelley Shaul, Operations and HR Manager
shelleyshaul@ability1st.info
8505759621

1823 Buford Court
Tallahassee, Florida 32308
United States

Past Performance

<p>♀ Jackie Fortmann, Deputy Director jackiefortmann@ability1st.info 8505759621</p>	<p>1823 Buford Court Tallahassee, Florida 32308 United States</p>
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Jackie Fortmann, Deputy Director
jackiefortmann@ability1st.info
8505759621

1823 Buford Court
Tallahassee, Florida 32308
United States

Security Information

Company Security Level (blank)	Highest Level Employee Security Level (blank)
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Service Classifications

NAICS Codes

Primary	NAICS Codes	NAICS Title
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Size Metrics

IGT Size Metrics

Annual Revenue (from all IGTs)
(blank)

Worldwide

Annual Receipts (in accordance with 13 CFR 121) (blank)	Number of Employees (in accordance with 13 CFR 121) (blank)
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Location

Annual Receipts (in accordance with 13 CFR 121) (blank)	Number of Employees (in accordance with 13 CFR 121) (blank)
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Industry-Specific

Barrels Capacity (blank)	Megawatt Hours (blank)	Total Assets (blank)
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Electronic Data Interchange (EDI) Information

This entity did not enter the EDI information

Disaster Response

This entity does not appear in the disaster response registry.

**ATTACHMENT:
DUNS**

Mandy Bianchi

From: Dun & Bradstreet <DandB@click.dandb.com>
Sent: Thursday, August 25, 2022 11:44 AM
To: Mandy Bianchi
Subject: Your DUNS Lookup Request for Center For Independent Living of North Florida Inc.



\$todayformat(0,MM/dd/yyyy)

\$FIRST_NAME\$ Bianchi,

The following is the Dun & Bradstreet D-U-N-S® Number for **Center For Independent Living of North Florida Inc.**

D-U-N-S number: **107552796**

If this is YOUR COMPANY, learn how to monitor and potentially impact your Dun & Bradstreet?business credit file with [CreditBuilder?](#).

Call **1-800-700-2733**, Monday through Friday, 8:00 AM to 6:00 PM local time or contact us at [Dun & Bradstreet support](#).

Please add dandb@click.dandb.com to your email address book to ensure delivery of our emails to your inbox.

If you have any questions, please contact [Dun & Bradstreet support](#).

Privacy and Terms of Service Notice: Your privacy is important to us; please see our [Privacy Policy](#) and [Terms of Service](#).

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101 JFK Parkway, Short Hills, NJ 07078

**ATTACHMENT:
CODE OF CONDUCT**



1823 Buford Court ♦ Tallahassee, Florida 32308
850-575-9621 (voice) ♦ 850-575-5740 (fax) ♦ 850-576-5245 (TDD) ♦ www.ability1st.info

CODE OF CONDUCT

Ability1st prohibits the solicitation and acceptance of gifts or gratuities by officers, employees, volunteers and agents for their personal benefit in excess of minimal value. The administrative and disciplinary actions for violations of this policy will be determined by the severity of the violation according to the Progressive Disciplinary Action Policy as follows:

Disciplinary action, short of termination, may take several forms depending on the severity of the problem and number of occurrences. At the discretion of the Executive Director, disciplinary action may be initiated at any step. Generally disciplinary action shall be progressive in nature (except for misconduct) and includes the following:

1. **Verbal Counseling** – must be documented. From time to time, significant problems or deficiencies related to job performance occur. Supervisors should provide counseling regarding any such problems or deficiencies. In any case where a supervisor provides counseling, the supervisor should document the occurrence of the counseling in memo form to the employee, including the date and substance of the counseling session. The employee should be asked in the memo to initial the memo indicating that the memo accurately summarizes the counseling session. The employee should be given a copy of the memo and the original initialed copy should be placed in the employee’s personnel file. Verbal counseling is not necessary prior to taking other disciplinary action, including termination, against an employee.
2. **Written Reprimand** – A written reprimand is a form of corrective supervisory feedback in response to a serious incident, violation of policy or procedure, or inability to respond to supervision provided through verbal counseling. A reprimand is documented in memo form, with the words “WRITTEN REPRIMAND” printed in large, bold letters across the top of the page. A written reprimand must contain a description of the

inappropriate behavior, the date of its occurrence, and a list of steps or actions the employee must take to correct the behavior. A written reprimand must be provided in a face-to-face conference between the employee and the supervisor and initialed by the employee acknowledging receipt. A written reprimand must be pre-approved by the Executive Director. The written reprimand must be copied for the employee's personnel file.

- 3. Suspension** – not to exceed 10 days, requires approval of the Executive Director. No compensation is paid but benefits continue. Documentation is kept in the personnel file.


Written notice of suspension will be provided, which includes the employee's name, the effective date of the suspension, the reason for the suspension, and instructions for contact with Ability1st. The Executive Director will sign the written notice of suspension.

If an internal investigation regarding employee conduct is necessary, the Executive Director will determine the type of investigation and who conducts the investigation.

The outcome of the investigation is to be documented by the Executive Director. If necessary, the Executive Director will consult the Board of Directors regarding appropriate action.

- 4. Termination** – this decision may only be made by the Executive Director. Documentation is kept in the personnel file (refer to policy A-21 for the grounds for termination).

All officers, employees, volunteers or agents of Ability1st must sign below indicating their awareness of this Code of Conduct:

_____ Printed Name	_____ Signature	_____ Date
<u>Mandy Bianchi, Executive Director</u>	<u></u> Signature	<u>10/5/2021</u> Date

**ATTACHMENT:
AUDIT**



July 18, 2022

Center for Independent Living of North Florida, Inc.
D/B/A Ability1st and Affiliate
1823 Buford Court
Tallahassee, FL 32308-4465

We have audited the consolidated financial statements of Center for Independent Living of North Florida, Inc. D/B/A Ability1st and Affiliate for the year ended September 30, 2021, and have issued our report thereon dated July 18, 2022. Professional standards require that we advise you of the following matters relating to our audit.

Our Responsibility in Relation to the Financial Statement Audit

As communicated in our engagement letter dated October 16, 2019, our responsibility, as described by professional standards, is to form and express an opinion about whether the consolidated financial statements that have been prepared by management with your oversight are presented fairly, in all material respects, in conformity with accounting principles generally accepted in the United States of America. Our audit of the consolidated financial statements does not relieve you or management of its respective responsibilities.

Our responsibility, as prescribed by professional standards, is to plan and perform our audit to obtain reasonable, rather than absolute, assurance about whether the consolidated financial statements are free of material misstatement. An audit of consolidated financial statements includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control over financial reporting. Accordingly, as part of our audit, we considered the internal control of Center for Independent Living of North Florida, Inc. D/B/A Ability1st and Affiliate solely for the purpose of determining our audit procedures and not to provide any assurance concerning such internal control.

We are also responsible for communicating significant matters related to the audit that are, in our professional judgment, relevant to your responsibilities in overseeing the financial reporting process. However, we are not required to design procedures for the purpose of identifying other matters to communicate to you.

We have provided our findings regarding significant control deficiencies over financial reporting and material weaknesses, and material noncompliance, and other matters noted during our audit in a separate letter to you dated .

Planned Scope and Timing of the Audit

We conducted our audit consistent with the planned scope and timing we previously communicated to you.

Compliance with All Ethics Requirements Regarding Independence

The engagement team, others in our firm, as appropriate, and our firm, have complied with all relevant ethical requirements regarding independence.

In order to eliminate threats to independence related to nonattest services that we provide you, we have instituted a quality control review over all nonattest work. Also, in the engagement letter, we identified a person within your organization with the skills knowledge and expertise to review our nonattest work on your behalf.

Qualitative Aspects of the Entity's Significant Accounting Practices

Significant Accounting Policies

Management has the responsibility to select and use appropriate accounting policies. A summary of the significant accounting policies adopted by Center for Independent Living of North Florida, Inc. D/B/A Ability1st and Affiliate is included in Note 1 to the consolidated financial statements. There has been no initial selection of accounting policies and no changes in significant accounting policies or their application during the fiscal year ended September 30, 2021. No matters have come to our attention that would require us, under professional standards, to inform you about (1) the methods used to account for significant unusual transactions and (2) the effect of significant accounting policies in controversial or emerging areas for which there is a lack of authoritative guidance or consensus.

Significant Accounting Estimates

Accounting estimates are an integral part of the consolidated financial statements prepared by management and are based on management's current judgments. Those judgments are normally based on knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the consolidated financial statements and because of the possibility that future events affecting them may differ markedly from management's current judgments.

The most sensitive accounting estimate affecting the consolidated financial statements are:

Management's estimate of depreciation expense is based on the underlying assets depreciation calculated using the straight-line method over the assets' useful lives. We evaluated the key factors and assumptions used to develop the estimate of depreciation expense in determining that it is reasonable in relation to the consolidated financial statements taken as a whole.

Management's estimate of the functional expenses is based on the underlying cost allocation plan developed by the Organization calculated which is based on employee's time. We evaluated the key factors and assumptions used to develop the estimate of functional expenses in determining that it is reasonable in relation to the consolidated financial statements taken as a whole.

Financial Statement Disclosures

Certain financial statement disclosures involve significant judgment and are particularly sensitive because of their significance to financial statement users. The most sensitive disclosure affecting the consolidated financial statements are the disclosures on contingent liabilities.

Significant Difficulties Encountered during the Audit

We encountered no difficulties in dealing with management relating to the performance of our audit.

Uncorrected and Corrected Misstatements

For purposes of this communication, professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that we believe are trivial, and communicate them to the appropriate level of management. Further, professional standards require us to also communicate the effect of uncorrected misstatements related to prior periods on the relevant classes of transactions, account balances or disclosures, and the financial statements as a whole. Management has corrected all identified misstatements.

In addition, professional standards require us to communicate to you all material, corrected misstatements that were brought to the attention of management as a result of our audit procedures. See attached list of material misstatements that we identified as a result of our audit procedures were brought to the attention of, and corrected by, management.

Disagreements with Management

For purposes of this letter, professional standards define a disagreement with management as a matter, whether or not resolved to our satisfaction, concerning a financial accounting, reporting, or auditing matter, which could be significant to Center for Independent Living of North Florida, Inc. D/B/A Ability 1st and Affiliate's consolidated financial statements or the auditor's report. No such disagreements arose during the course of our audit.

Representations Requested from Management

We have requested certain representations from management which are included in the attached letter dated July 18, 2022.

Management Consultations with Other Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters. Management informed us that, and to our knowledge, there were no consultations with other accountants regarding auditing and accounting matters.

Other Significant Matters, Findings or Issues

In our normal course of our professional association with Center for Independent Living of North Florida, Inc. D/B/A Ability1st and Affiliate we generally discuss a variety of matters, including the application of accounting principles and auditing standards, operating conditions affecting the entity, and operating plans and strategies that may affect the risks of material misstatement. None of the matters discussed resulted in a condition to our retention as Center for Independent Living of North Florida, Inc. D/B/A Ability1st and Affiliate's auditors.

Bank Reconciliations – During our audit, we noted the Organization did not reconcile two bank statements to financial records within the accounting system. As a best practice, we recommend the Organization review their bank reconciliation process, and ensure bank statement balances are reconciled to the general ledger.

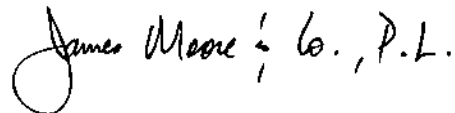
Other Information in Documents Containing Audited Consolidated Financial Statements

Pursuant to professional standards, our responsibility as auditors for other information in documents containing the Organization's audited consolidated financial statements does not extend beyond the consolidated financial information identified in the audit report, and we are not required to perform any procedures to corroborate such other information. However, in accordance with such standards, we have read the information and agreed information to the underlying accounting records from which it was derived.

Our responsibility also includes communicating to you any information which we believe is a material misstatement of fact. Nothing came to our attention that caused us to believe that such information, or its manner of presentation, is materially inconsistent with the information, or manner of its presentation, appearing in the consolidated financial statements.

This report is intended solely for the information and use of Partners and management of Center for Independent Living of North Florida, Inc. D/B/A Ability1st and Affiliate and is not intended to be and should not be used by anyone other than these specified parties.

Very truly yours,

A handwritten signature in black ink that reads "James Moore & Co., P.L." The signature is written in a cursive style with a large loop at the beginning.

JAMES MOORE & CO., P.L.

Client: **500364 - Center for Independent Living of North Florida, Inc.**
 Engagement: **500364 - CENTER FOR INDEPENDENT LIVING OF NORTH FL, INC.**
 Period Ending: **9/30/2021**
 Trial Balance: **TB-01.1 - APCH Trial Balance**
 Workpaper: **TB-02.1 - Adjusting Journal Entries - APCH (HUD Corp) Report**

Account	Description	W/P Ref	Debit	Credit
Adjusting Journal Entries JE # 1		B-05		
To adjust BBHC accounts receivable per confirmation received from BBHC				
5044L	APCH Leasing		25,232.00	
11000	Accounts Receivable			25,232.00
Total			<u><u>25,232.00</u></u>	<u><u>25,232.00</u></u>
Adjusting Journal Entries JE # 2		BB-01.1		
To adjust APCH payable to CIL receivable - to net during elim entries				
11010	Loan From A1st (journal entries		95.00	
6900	Staff & Board Expenses			95.00
Total			<u><u>95.00</u></u>	<u><u>95.00</u></u>
Adjusting Journal Entries JE # 3		TB, B-01		
To adjust expenses in APCH to actual based on revenues received				
11005	Amount Loaned from Ability 1st		14,001.00	
6002	APCH RENT Personnel Reimburseme			14,001.00
Total			<u><u>14,001.00</u></u>	<u><u>14,001.00</u></u>
Adjusting Journal Entries JE # 4		TB		
Reclass for presentation purposes				
6500	Occupancy		215.00	
6900	Staff & Board Expenses		44.00	
6802	Staff travel			259.00
Total			<u><u>259.00</u></u>	<u><u>259.00</u></u>

Client: **500364 - Center for Independent Living of North Florida, Inc.**
Engagement: **500364 - CENTER FOR INDEPENDENT LIVING OF NORTH FL, INC.**
Period Ending: **9/30/2021**
Trial Balance: **TB-01 - CIL Trial Balance**
Workpaper: **TB-02 - Adjusting Journal Entries Report**

Account	Description	W/P Ref	Debit	Credit
Adjusting Journal Entries JE # 1		BB-01		
To reclass HSHT deferred revenue to receivable at year end				
1095-JMCO	Able Trust		16,508.00	
338.21c	Unearned Revenue HSHT Gadsden			5,510.00
338.21L	Unearned Revenue HSHT Leon Co			5,499.00
338.21W	Unearned Revenue Wakulla County			5,499.00
Total			16,508.00	16,508.00
Adjusting Journal Entries JE # 2		AA-01, 10-01		
To record forgiveness of PPP to proceeds of debt				
355	Note Payable		162,100.00	
JMCO - 7000	Proceeds of Debt			162,100.00
Total			162,100.00	162,100.00
Adjusting Journal Entries JE # 3		N-01		
To adjust Endowment activity to actual for the CY				
267	Community Foundation Endowment		2,064.00	
268	Gain/Loss on Investment			2,064.00
Total			2,064.00	2,064.00
Adjusting Journal Entries JE # 4		A-01, B-02		
To reverse the effects of AR recorded as Cash at year end				
1004	VR		17,209.00	
703	Tallahassee State Bank Operating			17,209.00
Total			17,209.00	17,209.00
Adjusting Journal Entries JE # 5		UV-03		
To record CY depreciation expense				
6400	DEPRECIATION		9,626.00	
260	Accumulated Depreciation			9,626.00
Total			9,626.00	9,626.00
Adjusting Journal Entries JE # 6		UV-04		
To record CY additions				
258	Computer Equip. & Upgrades		6,995.00	
266	Equipment - Administration		1,299.00	
6507	Internet/Website			6,995.00
6700	EQUIPMENT			1,299.00
Total			8,294.00	8,294.00
Adjusting Journal Entries JE # 7		B-06/10-01		
To record UW revenue earned				
1410	United Way Promise to Pay		5,032.00	
5010Gad	UW - Gadsden Co.			5,032.00
Total			5,032.00	5,032.00
Adjusting Journal Entries JE # 8		10-01, 50-01		
To record vehicle donation and pass-through to consumer				
7360	Misc.		3,615.00	
5019MIS	Miscellaneous Donations			3,615.00
Total			3,615.00	3,615.00
Adjusting Journal Entries JE # 9		TB, B-01		
To adjust expenses to APCH to actual based on revenues received				
6044REN	Personnel - APCH Rent Admin		14,001.00	
364	Loan to APCH, Inc.			14,001.00
Total			14,001.00	14,001.00
Adjusting Journal Entries JE # 10		BB-01, 10-01		

Client: **500364 - Center for Independent Living of North Florida, Inc.**
Engagement: **500364 - CENTER FOR INDEPENDENT LIVING OF NORTH FL, INC.**
Period Ending: **9/30/2021**
Trial Balance: **TB-01 - CIL Trial Balance**
Workpaper: **TB-02 - Adjusting Journal Entries Report**

Account	Description	W/P Ref	Debit	Credit
To adjust Bridge to Independence activity to actual				
5058	Bridge to Independence		6,462.00	
370	Unearned Rev Bridge to Independ			6,462.00
Total			6,462.00	6,462.00
Adjusting Journal Entries JE # 11				
To adjust Reeve Foundation activity to actual				
JMCO - 339	Deferred Revenue	BB-01, 10-01	3,234.00	
5073	Christopher Reeve Foundation			3,234.00
Total			3,234.00	3,234.00
Adjusting Journal Entries JE # 12				
To adjust VR AR to actual -recognize revenues up to VR expenses for the period and reverse effect of PY unbilled AR				
1004	VR	B-01, 10-01	3,896.00	
5004	VR		12,484.00	
1004	VR			12,484.00
5004	VR			3,896.00
Total			16,380.00	16,380.00
Adjusting Journal Entries JE # 13				
To reclass ESG Outreach grant funds for FS presentation				
5000	CONTRACT REVENUES	10-01	48,812.00	
JMCO 5001	ESG Revenues			48,812.00
Total			48,812.00	48,812.00
Adjusting Journal Entries JE # 14				
To adjust unearned for ESG to actual				
336	Unearned Revenue - ESG-CV 2	BB-01, B-02	1,989.00	
1095	ESG-CV Outreach, Rapid ReHouse			1,989.00
Total			1,989.00	1,989.00



1823 Buford Court ♦ Tallahassee, Florida 32308
850-575-9621 (voice) ♦ 850-575-5740 (fax) ♦ www.ability1st.info

July 18, 2022

James Moore & Co., P.L.
2477 Tim Gamble Place, Suite 200
Tallahassee, Florida 32308-4386

This representation letter is provided in connection with your audit of the consolidated financial statements of Center for Independent Living of North Florida, Inc. D/B/A/ Ability 1st, which comprise the consolidated statement of financial position as of September 30, 2021, and the related consolidated statements of activities, and cash flows for the year then ended, and the related notes to the consolidated financial statements, for the purpose of expressing opinions as to whether the consolidated financial statements are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP)

Certain representations in this letter are described as being limited to matters that are material. Items are considered material, regardless of size, if they involve an omission or misstatement of accounting information that, in the light of surrounding circumstances, makes it probable that the judgment of a reasonable person relying on the information would be changed or influenced by the omission or misstatement.

We confirm, to the best of our knowledge and belief, as of the date of this letter, the following representations made to you during your audit.

Consolidated Financial Statements

- We have fulfilled our responsibilities, as set out in the terms of the audit engagement dated October 16, 2019, for the preparation and fair presentation of the consolidated financial statements in accordance with U.S. GAAP.
- The consolidated financial statements referred to above are fairly presented in conformity with U.S. generally accepted accounting principles.
- We acknowledge our responsibility for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.
- We acknowledge our responsibility for the design, implementation, and maintenance of internal control to prevent and detect fraud.
- Significant assumptions used by us in making accounting estimates, including those measured at fair value, are reasonable.

- Related party relationships and transactions have been appropriately accounted for and disclosed in accordance with the requirements of U.S. GAAP.
- All events subsequent to the date of the consolidated financial statements and for which U.S. GAAP requires adjustment or disclosure have been adjusted or disclosed.
- We have complied with all contractual agreements, grants, and donor restrictions.
- We have maintained an appropriate composition of assets in amounts needed to comply with all donor restrictions.
- We have accurately presented the entity's position regarding taxation and tax-exempt status.
- The bases used for allocation of functional expenses are reasonable and appropriate.
- We have included in the financial statements all assets and liabilities under the entity's control.
- We have designed, implemented, and maintained adequate internal controls over the receipt and recording of contributions.
- Reclassifications between net asset classes are proper.
- Methods and significant assumptions used by management to determine fair values, their consistency in application, and the completeness and adequacy of fair value information for financial statement measurement and disclosure purposes are appropriate.
- Receivables recorded in the consolidated financial statements represent valid claims against debtors for sales or other charges arising on or before the balance sheet date and have been reduced to their estimated net realizable value.
- We have identified all accounting estimates that could be material to the consolidated financial statements, including the key factors and significant assumptions underlying those estimates, and we believe the estimates are reasonable in the circumstances. There are no estimates that may be subject to a material change in the near term that have not been properly disclosed in the consolidated financial statements. We understand that near term means the period within one year of the date of the consolidated financial statements. In addition, we have no knowledge of concentrations existing at the date of the consolidated financial statements that make the Organization vulnerable to the risk of severe impact that have not been properly disclosed in the financial statements. We understand that concentrations include individual or group concentrations of contributors, grantors, clients, customers, suppliers, lenders, products, services, fund-raising events, sources of labor or materials, licenses or other rights, or operating areas or markets. We further understand that severe impact means a significant financially disruptive effect on the normal functioning of the Organization.
- The Organization has filed required Federal and state income tax returns. However, the Organization's income tax returns are subject to examination by the IRS generally for three years after they were filed. The Organization recognizes tax benefits only to the extent that it is "more likely than not" that its tax positions will be sustained upon IRS examination. Accordingly, any provision for unpaid income taxes (liability for unrecognized tax benefits) in the balance sheet would reflect all tax positions that the Organization believes do not have greater than a 50%

chance of realization after examination. The Organization has reviewed and evaluated the relevant technical merits of each of its tax positions in accordance with accounting principles generally accepted in the United States of America for accounting for uncertainty in income taxes, and determined that there are no uncertain tax positions that would have a material impact on the consolidated financial statements of the Organization.

- We understand that you prepared the trial balance for use during the audit and that your preparation of the trial balance was limited to formatting information into a working trial balance based on management's chart of accounts.
- We understand that as part of your audit, you prepared the adjusting journal entries necessary to convert our cash basis records to the accrual basis of accounting and acknowledge that we have reviewed and approved those entries and accepted responsibility for them.
- The effects of all known actual or possible litigation and claims have been accounted for and disclosed in accordance with U.S. GAAP.
- The bases used for allocation of functional expenses are reasonable and appropriate.
- We have included in the consolidated financial statements all assets and liabilities under the entity's control.
- Material concentrations have been appropriately disclosed in accordance with U.S. GAAP.
- We have provided to you our views on reported audit findings, conclusions, and recommendations, as well as planned corrective actions.
- Guarantees, whether written or oral, under which the Organization is contingently liable, have been properly recorded or disclosed in accordance with U.S. GAAP.
- With respect to the preparation of the draft consolidated financial statements and related notes and schedule of expenditures of federal awards, preparation of depreciation schedule, tax preparation services, and data collection form, we have performed the following:
 - Made all management decisions and performed all management functions;
 - Assigned a competent individual to oversee the services (Mandy Bianchi);
 - Evaluated the adequacy of the services performed;
 - Evaluated and accepted responsibility for the result of the service performed; and
 - Established and maintained internal controls, including monitoring ongoing activities.
- During the year ended September 30, 2021, local, U.S., and world governments have encouraged self-isolation to curtail the spread of the global pandemic, coronavirus disease (COVID-19), by mandating temporary work stoppage in many sectors and imposing limitations on travel and size and duration of group meetings. Most industries are experiencing disruption to business operations and the impact of reduced consumer spending. There is unprecedented uncertainty surrounding the duration of the pandemic, its potential economic ramifications, and any government actions to mitigate them. Accordingly, while management cannot quantify the

financial and other impact to the entity as of July 18, 2022, management believes that a material impact on the entity's financial position and results of future operations is reasonably possible.

Information Provided

- We have provided you with:
 - Access to all information, of which we are aware that is relevant to the preparation and fair presentation of the consolidated financial statements, such as records, documentation, and other matters;
 - Additional information that you have requested from us for the purpose of the audit; and
 - Unrestricted access to persons within the entity from whom you determined it necessary to obtain audit evidence.
- All transactions have been recorded in the accounting records and are reflected in the consolidated financial statements.
- We have disclosed to you the results of our assessment of the risk that the consolidated financial statements may be materially misstated as a result of fraud.
- We have provided to you our analysis of the entity's ability to continue as a going concern, including significant conditions and events present, and if necessary, our analysis of management's plans, and our ability to achieve those plans.
- We have no knowledge of any fraud or suspected fraud that affects the entity and involves:
 - Management;
 - Employees who have significant roles in internal control; or
 - Others when the fraud could have a material effect on the financial statements.
- We have no knowledge of any allegations of fraud, or suspected fraud, affecting the entity's consolidated financial statements communicated by employees, former employees, analysts, regulators, or others.
- We have no knowledge of any instances of noncompliance or suspected noncompliance with laws and regulations whose effects should be considered when preparing consolidated financial statements.
- We have disclosed to you all known actual or possible litigation and claims whose effects should be considered when preparing the consolidated financial statements.
- We have disclosed to you the identity of the entity's related parties and all the related party relationships and transactions of which we are aware.
- Except as made known to you and disclosed in the notes to the consolidated financial statements, the Organization has satisfactory title to all owned assets, and there are no liens or encumbrances on such assets nor has any asset been pledged as collateral except as made known to you.

- We are responsible for compliance with the laws, regulations, and provisions of contracts and grant agreements applicable to us; and we have identified and disclosed to you all laws, regulations and provisions of contracts and grant agreements that we believe have a direct and material effect on the determination of consolidated financial statement amounts or other financial data significant to the audit objectives.
- Center for Independent Living of North Florida, Inc. D/B/A Ability1st and Affiliate are exempt under Sections of the Internal Revenue Code. Any activities of which we are aware that would jeopardize the Organization's tax-exempt status, and all activities subject to tax on unrelated business income or excise or other tax, have been disclosed to you. All required filings with tax authorities are up-to-date.

Single Audit

With respect to federal awards, we represent the following to you:

- We are responsible for understanding and complying with and have complied with the requirements of and the requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) as applicable.
- We are responsible for the preparation and presentation of the schedule of expenditures of federal awards in accordance with the Uniform Guidance.
- We believe the schedule of expenditures of federal awards, including its form and content, is fairly presented in accordance with the Uniform Guidance.
- The methods of measurement or presentation have not changed from those used in the prior period.
- We are responsible for including the auditor's report on the schedule of expenditures of federal awards in any document that contains the schedule and that indicates that the auditor has reported on such information.
- We have identified and disclosed all of our government programs and related activities subject to the Uniform Guidance compliance audit
- We have notified you of federal awards and funding increments that were received before December 26, 2014, and differentiated those awards from awards received on or after December 26, 2014, and subject to the audit requirements of the Uniform Guidance.
- We have notified you if we have elected to delay implementation the procurement sections (317 to 326) of the Uniform Guidance as allowed for two fiscal years after the effective date of the uniform guidance. We understand that sections 317 to 326 are allowed to be delayed until fiscal years beginning on or after December 26, 2017 (if electing to delay).
- When the schedule of expenditures of federal awards is not presented with the audited financial statements, management will make the audited financial statements readily available to the intended users of the schedule of expenditures of federal awards no later than the date of issuance by the entity of the schedule of expenditures of federal awards and the auditor's report thereon.

- We have, in accordance with the Uniform Guidance, identified in the schedule of expenditures of federal awards, expenditures made during the audit period for all awards provided by federal agencies in the form of grants, federal cost-reimbursement contracts, loans, loan guarantees, property (including donated surplus property), cooperative agreements, interest subsidies, food commodities, direct appropriations, and other assistance.
- We are responsible for understanding and complying with the requirements of federal statutes, regulations, and the terms and conditions of federal awards related to each of our federal programs and have identified and disclosed to you federal statutes, regulations, and the terms and conditions of federal awards that are considered to have a direct and material effect on each major federal program; and we have complied with these direct and material compliance requirements.
- We have provided to you our interpretations of any compliance requirements that have varying interpretations.
- We are responsible for establishing and maintaining, and have established and maintained, effective internal control over compliance for federal programs that provide reasonable assurance that we are managing our federal awards in compliance with federal statutes, regulations, and the terms and conditions of the federal award that could have a material effect on our federal programs. Also, no changes [or disclose the changes made] have been made in the internal over compliance or other factors that might significantly affect internal control, including any corrective action taken by management with regard to significant deficiencies and material weaknesses in internal control over compliance have occurred subsequent of the period covered by the auditor's report.
- We have made available to you all contracts and grant agreements (including amendments, if any) and any other correspondence with federal agencies or pass-through entities relating to federal programs.
- We have received no requests from a federal agency to audit one or more specific programs as a major program.
- We have identified and disclosed to you all amounts questioned and any known noncompliance with the direct and material compliance requirements of federal awards, including the results of other audits or program reviews or stated that there was no such noncompliance. We also know of no instances of noncompliance with direct and material compliance requirements occurring subsequent to the period covered by the auditor's report.
- We have disclosed to you any communications from federal awarding agencies and pass-through entities concerning possible noncompliance with the direct and material compliance requirements, including communications received from the end of the period covered by the compliance audit to the date of the auditor's report.
- We have charged costs to federal awards in accordance with applicable cost principles, including amounts claimed or used for matching determined in accordance with relevant guidelines in the Uniform Guidance.

- We have made available to you all documentation related to the compliance requirements, including information related to federal program financial reports and claims for advances and reimbursements.
- Federal program financial reports and claims for advances and reimbursements are supported by the books and records from which the basic financial statements have been prepared (and are prepared on a basis consistent with the schedule of expenditures of federal awards).
- The copies of federal program financial reports provided to you are true copies of the reports submitted, or electronically transmitted, to the respective federal agency or pass-through entity, as applicable.
- We have properly classified amounts claimed or used for matching in accordance with related guidelines in the Uniform Guidance.
- We have charged costs to federal awards in accordance with the provisions of the Uniform Guidance.
- We are responsible for and have accurately prepared the summary schedule of prior audit findings to include all findings required to be included by the Uniform Guidance, and we have provided you with all information on the status of the follow-up on prior audit findings by federal awarding agencies and pass-through entities, including all management decisions.
- We have disclosed to you the findings received and related corrective actions taken for previous audits, attestation engagements, and internal or external monitoring that directly relate to the objectives of the compliance audit, including findings received and corrective actions taken from the end of the period covered by the compliance audit to the date of the auditor's report.
- The reporting package does not contain personally identifiable information.
- We are responsible for and have accurately completed the appropriate sections of the Data Collection Form and we are responsible for taking corrective action on audit findings of the compliance audit and have developed a corrective action plan that meets the requirements of the Uniform Guidance.
- We have disclosed all contracts or other agreements with service organizations and disclosed to you all communications from these service organizations relating to noncompliance at the organizations.
- We have reviewed, approved, and taken responsibility for the financial statements and related notes and an acknowledgment of the auditor's role in the preparation of this information.
- We have reviewed, approved, and taken responsibility for accrual adjustments and an acknowledgment of the auditor's role in the preparation of the adjustments.
- We have disclosed to you the nature of any subsequent events that provide additional evidence with respect to conditions that existed at the end of the reporting period that affect noncompliance during the reporting period.

Signed: Mandy Bianchi
Title: Executive Director

**ATTACHMENT:
NONDISC**

acknowledgment provision verifying agreement to this handbook, that the Organization may conduct occasional criminal, employment, driving and educational backgrounds on employees as it deems necessary to conduct its operation in a profitable and legal manner. The Organization reserves the right to take any and all action it deems necessary to act upon the results of such ongoing screening.

Ability1st Policy A-5

EQUAL EMPLOYMENT OPPORTUNITY, AFFIRMATIVE ACTION AND CIVIL RIGHTS

POLICY:

We are committed to providing equal opportunity in all of our employment practices, including selection, hiring, promotion, transfer, and compensation, to all qualified applicants and employees without regard to age, race, color, sex, religion, national origin, marital status, gender identity or expression, or sexual orientation, disability or any other protected status in accordance with the requirements of all federal, state and local laws.

In accordance with the Standards and Assurances for Centers for Independent Living, Section 725, Section (6) of the 1992 amendments to the Rehabilitation Act, the Ability1st shall ensure that the majority of staff are individuals with disabilities.

PROCEDURES:

1. This policy shall apply to all terms, conditions, and privileges of employment, including, but not limited to, hiring, probation, training, promotion, demotion, and compensation and employee facilities.
2. Any advertisement for a job opening shall contain a statement that qualified persons with disabilities are encouraged to apply.
3. The work area will be free of any behavior, conduct, action, or inference that could result in discriminatory insults, intimidation, or harassment.
4. Employees with questions or concerns about any type of discrimination in the workplace must bring these issues to the attention of their immediate supervisor or the Executive Director. Employees can raise concerns or make reports without fear of reprisal. Anyone found to be engaging in any type of unlawful discrimination will be subject to disciplinary action, up to and including termination of employment.

HARASSMENT

PROHIBITION OF DISCRIMINATION AND HARASSMENT AND COMPLAINT PROCEDURE

Harassment is a form of intimidating, threatening, and/or predatory behavior in which a person targets another employee(s) for harmful or unfair actions relating to an individual's age, race, color, sex (including same-sex sexual harassment), religion, national origin, gender identity or expression, or sexual orientation, or disability. This treatment is discrimination and is illegal under federal, state, and local laws. For the purposes of this policy, "sexual harassment" specifically is defined, as in the Equal Employment Opportunity Commission Guidelines, as unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature when, for example: a) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment, b) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual, or c) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Title VII of the Civil Rights Act of 1964 recognizes two types of sexual harassment: a) quid pro quo and b) hostile work environment. Sexual harassment may include a range of subtle and not-so-subtle behaviors and may involve individuals of the same or different gender. Depending on the circumstances, these behaviors may include unwanted sexual advances or requests for sexual favors; sexual jokes and innuendo; verbal abuse of a sexual nature; commentary about an individual's body, sexual prowess or sexual deficiencies; leering, whistling or touching; insulting or obscene comments or gestures; display in the workplace of sexually suggestive objects or pictures; and other physical, verbal or visual conduct of a sexual nature.

This policy applies to all employees of our Organization working at all locations. All employees have an obligation to report harassment or discrimination in the workplace—even if he or she is not the victim.

All workers, including supervisors and managers, will be subject to discipline, up to and including discharge, for any act of harassment or discrimination they commit.

Examples of Prohibited Conduct

Though harassment, including sexual harassment, encompasses a wide range of conduct, some examples of specifically prohibited conduct include the following:

- Physical assaults of a sexual nature, such as rape, sexual battery, molestation or attempts to commit these assaults, and intentional physical conduct that is sexual in nature, such as touching, pinching, patting, grabbing, brushing against another employee's body or poking another employee's body.

- Unwelcome sexual advances, propositions, or other sexual comments, such as sexually oriented gestures, noises, remarks, jokes or comments about a person's sexuality or sexual experience.
- Inappropriate statements, written or verbal, comments, jokes, or threats directed toward a person based on his or her age, race, color, sex (including same-sex sexual harassment), religion, national origin, gender identity or expression, or sexual orientation, or disability.
- Preferential treatment or promises of preferential treatment to an employee for submitting to sexual conduct, including soliciting or attempting to solicit any employee to engage in sexual activity for compensation or reward.
- Preferential treatment or promises of preferential treatment to an employee based on his or her age, race, color, sex (including same-sex sexual harassment), religion, national origin, gender identity or expression, or sexual orientation, or disability.
- Negative treatment or threats of negative treatment to an employee based on his or her age, race, color, sex (including same-sex sexual harassment), religion, national origin, gender identity or expression, or sexual orientation, or disability.
- Subjecting, or threats of subjecting, an employee to unwelcome sexual attention or conduct or intentionally making performance of the employee's job more difficult because of that employee's sex.
- Sexual or discriminatory displays or publications anywhere in our workplace by our employees.
- Retaliation for sexual harassment complaints.

Responding to Violations of this Policy

If an employee believes that he or she has been subject to discrimination, harassment, or any unwelcome sexual attention, he or she may address the situation directly and immediately to the harasser, if possible. You are not required to address the situation with the harasser if there is any concern of aggression or harm. If the inappropriate conduct does not cease, or if the employee is unable to or uncomfortable with addressing the alleged harasser directly, he or she should report the incident to his or her own supervisor or manager. If the inappropriate conduct does not cease, or if the employee is unable to or uncomfortable with addressing the situation with the supervisor or manager, he or she should report the incident to the Human Resource Director. If the Human Resource Director is not available or the employee is uncomfortable addressing the situation with the Human Resources Director, the employee may report the incident to the CEO/Executive Director/President.

It is important to report any and all concerns of discrimination, harassment, or inappropriate sexual conduct to the HR director or a supervisor/manager as soon as possible. Management must

be made aware of the situation so that it can conduct an immediate and impartial investigation and take appropriate action to remediate or prevent the prohibited conduct from continuing.

Employees who violate this policy are subject to appropriate discipline. If an investigation results in a finding that this policy has been violated, the mandatory minimum discipline is a written reprimand. The discipline for very serious or repeat violations is termination of employment. Persons who violate this policy may also be subject to civil damages or criminal penalties.

All inquiries, complaints, and investigations are treated discreetly. Information is revealed strictly on a need-to-know basis. Information contained in a formal complaint is closely contained. All information pertaining to a discrimination or harassment complaint, or investigation is maintained by the HR director in secure files. The HR director can answer any questions relating to the procedures for handling information related to discrimination or harassment complaints and investigations to complainants and respondents.

Retaliation Prohibited

Federal, state, and local laws prohibit punishing job applicants or employees for asserting their rights to be free from discrimination, harassment, or inappropriate sexual conduct. Asserting these rights is called "protected activity," and it can take many forms. For example, it is unlawful to retaliate against applicants or employees for:

- filing or being a witness in a complaint, investigation, or lawsuit;
- communicating with a supervisor or manager about employment discrimination, including harassment;
- answering questions during an employer investigation of alleged harassment;
- refusing to follow orders that would result in discrimination;
- resisting sexual advances, or intervening to protect others; and
- requesting accommodation of a disability or for a religious practice.

Participating in a complaint process is protected from retaliation under all circumstances. Other acts to oppose discrimination are protected as long as the employee was acting on a reasonable belief that something in the workplace may violate federal, state, and/or local laws addressing the employment relationship, even if he or she did not use legal terminology to describe it or is ultimately incorrect about the issue, provided the employee has made complaint in good faith.

Engaging in protected activity, however, does not shield an employee from all discipline or discharge. Employers are free to discipline or terminate workers if motivated by non-retaliatory and non-discriminatory reasons that would otherwise result in such consequences.

ATTACHMENT: A

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Applicants
Funding Opportunity
Registrations
Projects
Submissions


[Contact Us](#)



Applicant:

Applicant Details

Applicant Name: The Center for Independent Living of North Florida, Inc., dba Ability1st
Applicant Number: 107552796

Registrants



Delete	Open	Name	User Name	Email	Group
		Bianchi, Mandy	danielmoore	mandybianchi@ability1st.info	<input type="text" value="Administrator"/>
		Fortmann, Jackie	jackiefortmann	jackiefortmann@ability1st.info	<input type="text" value="Administrator"/>

ATTACHMENT: D

Attachment D- Demonstrated Need

Q4: Include narrative and attach documentation of the community need for this project from approved data sources, such as, BBCoC Homelessness Assistance Plan, HMIS, PIT County Reports, or other HUD Approved Databases.

Unsheltered homelessness is continuing to rise throughout the country and the 2022 Point in Time (PIT) data shows that this is the case in Leon county, as well. The most recent 2022 PIT data identifies 164 individuals that are unsheltered in Leon county, up from 91 in 2021, this is an increase of 55%.

HUD reports that in nearly every community, Black, Indigenous, and other people of color as well as individuals who identify as LGBTQ+ and individuals with disabilities are substantially overrepresented in the homeless population. Additionally, unsheltered homeless individuals report greater health challenges and experience trauma and violence at a greater rate than those who are sheltered.

Our Street Outreach team aims to connect with these vulnerable, unsheltered individuals, with the main goal of assisting them in obtaining permanent housing. A crucial part of achieving this goal is for our Outreach staff to have access to rapid rehousing funds to assist with application fees, security deposits, utility deposits, utility arrears and short or medium term rental assistance. We would also like to provide emergency food/clothing assistance and short term emergency lodging in motels for low-income, unsheltered individuals with the most vulnerabilities, including severe health challenges and disabilities.

Having in house access to rapid rehousing funds aids us in aligning with the Housing First Approach to assist clients into housing as quickly as possible. Access to rapid rehousing funds also assists us in decreasing the average length of time homeless and increasing permanent housing placements from Outreach, which both exists as System Performance Measures in the Big Bend CoC's Homeless Assistance Plan (HAP).

Attached: PIT count, HAP

Date of PIT Count: 2/21/2022

Population: Sheltered and Unsheltered Count

Total Households and Persons

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	289	73	0	144	506
Total Number of Persons	380	77	0	164	621
Number of Children (under age 18)	96	3	0	3	102
Number of Persons (18 to 24)	13	0	0	3	16
Number of Persons (over age 24)	271	74	0	158	503

Gender

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	164	32	0	49	245
Male	216	45	0	114	375
Gender that is not singularly 'Female' or 'Male'	0	0	0	1	1
Questioning	0	0	0	0	0
Transgender	0	0	0	0	0

Ethnicity

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	352	74	0	150	576
Hispanic/Latino	28	3	0	14	45

Race

Point In Time Summary for FL-506 - Tallahassee/Leon County CoC

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
American Indian, Alaska Native, or Indigenous	6	0	0	8	14
Asian or Asian American	2	1	0	0	3
Black, African American, or African	245	54	0	54	353
Native Hawaiian or Pacific Islander	7	1	0	2	10
White	105	20	0	83	208
Multiple Races	15	1	0	17	33

Chronically Homeless

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total number of persons	76		0	77	153



Big Bend CoC 2021 Point In Time (PIT) Data

	2016	2017	2018	2019	2020	2021	2022
Total Households	699	880	698	811	647	547	506
Total Persons	869	1072	893	966	805	621	621
Total Adults > 24	638	798	650	756	596	530	503
Total Children <18	167	189	188	143	160	67	102
Total Youth ages 18-24	64	85	55	67	49	24	16
Veterans	117	110	106	91	83	95	86
Unsheltered Persons	148	122	99	91	109	91	164
Chronically Homeless	78	117	151	152	192	197	153
Adults with Serious Mental Illness	166	210	85	142	258	121	107
Adults w/ Substance Use Disorder	87	110	37	56	116	44	89
Adults with HIV/AIDS	8	8	10	22	19	11	11
Victims of Domestic Violence	117	72	73	61	142	17	11

The Point In Time Count (PIT) is a census of literally homeless persons and families, meaning the count only includes individuals and families who live in a place not meant for human habitation (including the streets or in their car), emergency shelter, transitional housing, and hotels paid for by a government or charitable organization on the night of 2/21/2022.

During the 2022 PIT count, we were actively surveying and conducting homeless services under CDC guidance, meaning there were implications related to the pandemic reflected in our data. There were some slight differences in our methodology and how we conducted the PIT count under CDC guidance as compared to past years. These changes include;

- We typically use 60-100 community volunteers to conduct PIT surveys with those thought to be experiencing homelessness. Due to changes in safety and COVID related protocols, we relied on 30 community volunteers and seasoned Outreach Advocates working with our homeless service providers to conduct the surveys to decrease the potential for spread and exposure of COVID-19.

**Big Bend Continuum of Care
Homelessness Assistance Plan (HAP) 2021-2025** (v.20210601)

Homeless Definition: HUD defines homelessness as being in one of four categories: 1) Literally Homeless, 2) Imminent Risk of Homelessness, 3) Homeless under other Federal Statutes, and 4) Fleeing/Attempting to Flee Domestic Violence. These categories are more fully defined at the end of this document.

Data Driven Plan: The Homeless Assistance Plan is updated and refined annually through ongoing community and agency feedback as well as a data driven approach using client data collected through the Homeless Management Information System, Coordinated Assessment Tool, System Performance Measures and other needs assessment engagement survey tools. There are three major System Performance Measures that should be improved upon as the goal of this version of the HHAP; **Decrease average length of time homeless, decrease returns to homelessness and increase placement and retention of permanent housing.**

<p>Improving System Performance</p>	<p>Across all areas of homelessness we need to focus efforts to improve system performance by; Measuring all System Performance Measures frequently to improve specific outcomes tied to each measure</p> <p>Sys PM 1 - DECREASE the overall average and median length of time a person remains homeless Target 2021: Average less than 144 nights, Median less than 65 nights <i>Ultimate Goal by 2025: Average is 30 nights or less</i></p> <p>SysPM2 - DECREASE returns to homelessness Target 2021: Returns to homelessness with in6 months less that 21%2 years, less than 33% <i>Ultimate Goal by 2025: Returns in 2 years, less than 20%</i></p> <p>Sys PM 3 - DECREASE number of homeless persons in annual and PIT count Target: PIT Count is less than 900 Annual Count is less than 2900</p> <p>Sys PM 4 - INCREASE or maintain income for persons in housing programs..... Target: Increase income for more than 60% system stayers Increase income for more than 30% system leavers</p> <p>Sys PM 5 - DECREASE instances of 1st time homelessness..... Target: first time homeless count is less than 1500</p> <p>Sys PM 7 - INCREASE permanent housing placements from Outreach, ES, TH, PH-RRH programs and retention of permanent housing Target: Increase placements to permanent housing from outreach to be greater than 65% of outreach exits Increase placements to permanent housing from ES, SH, TH and PH-RRH to be greater than 30% <i>Ultimate Goal by 2025: Increase placements to permanent housing from ES, SH, TH and PH-RRH to be greater than 60%</i> Increase rate of retention of permanent housing to be greater than 95%</p>
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ATTACHMENT: E

Attachment E- Goals of the Homeless Assistance Plan (HAP)

Q5: Include narrative and reference the BBCoC updated HAP indicating how your project will advance the goals identified in the HAP, citing specific elements to be addressed from the HAP.

The proposed project will positively impact the CoC's System Performance Measures as noted below:

- **SysPM1 - DECREASE the overall average and median length of time a person remains homeless**

This will be accomplished by utilizing the housing first approach of assisting clients in finding and obtaining safe, secure and permanent housing as quickly as possible. Clients will not have to wait to save the hefty upfront costs needed to secure housing, or wait to be approved by other agencies for assistance, as we will utilize our in house rapid rehousing funding and our outreach staff will work directly with the client and landlords.

- **Sys PM 3- DECREASE number of homeless persons in annual and PIT count.**

This will be accomplished by specifically using our rapid rehousing funding to focus on housing the unsheltered population. We will follow up with the client once housed every 3, 6, 9 and 12 months to ensure stability and address any concerns. This will ultimately decrease the number of homeless persons in the annual and PIT count.

- **Sys PM 7 - INCREASE permanent housing placements from Outreach, ES, PH,RRH**

This will be accomplished by using HMIS to exit all unsheltered individuals who obtain permanent housing placements properly. We will use our rapid rehousing funding to efficiently and quickly place unsheltered individuals into housing. We will screen individuals who are chronically homeless for PSH and make proper referrals.

Also, the proposed project will address the Overarching Objectives for the Chronically Homeless.

Specifically, **Obj. 2 - Prioritize housing for chronically homeless individuals**. We will assess unsheltered individuals for permanent supportive housing and make proper referrals through Coordinated Entry.

The proposed project will also address the overarching objectives for Family & Child Homelessness.

Specifically, Obj, 3- Ensure at least 85% of the families receiving rapid rehousing assistance remain in permanent housing for at least 6 months following receipt of last rental payment or case management assistance. We will follow up at 3, 6, 9 and 12 months to ensure stability and address any needs.

Attached: HAP

**Big Bend Continuum of Care
Homelessness Assistance Plan (HAP) 2021-2025 (v.20210601)**

Homeless Definition: HUD defines homelessness as being in one of four categories: 1) Literally Homeless, 2) Imminent Risk of Homelessness, 3) Homeless under other Federal Statutes, and 4) Fleeing/Attempting to Flee Domestic Violence. These categories are more fully defined at the end of this document.

Data Driven Plan: The Homeless Assistance Plan is updated and refined annually through ongoing community and agency feedback as well as a data driven approach using client data collected through the Homeless Management Information System, Coordinated Assessment Tool, System Performance Measures and other needs assessment engagement survey tools. There are three major System Performance Measures that should be improved upon as the goal of this version of the HHAP; **Decrease average length of time homeless, decrease returns to homelessness and increase placement and retention of permanent housing.**

<p>Improving System Performance</p>	<p>Across all areas of homelessness we need to focus efforts to improve system performance by; Measuring all System Performance Measures frequently to improve specific outcomes tied to each measure</p> <p>Sys PM 1 - DECREASE the overall average and median length of time a person remains homeless Target 2021: Average less than 144 nights, Median less than 65 nights <i>Ultimate Goal by 2025: Average is 30 nights or less</i></p> <p>SysPM2 - DECREASE returns to homelessnessTarget 2021: Returns to homelessness with in6 months less that 21%2 years, less than 33% <i>Ultimate Goal by 2025: Returns in 2 years, less than 20%</i></p> <p>Sys PM 3 - DECREASE number of homeless persons in annual and PIT countTarget: PIT Count is less than 900 Annual Count is less than 2900</p> <p>Sys PM 4 - INCREASE or maintain income for persons in housing programs.....Target: Increase income for more than 60% system stayers Increase income for more than 30% system leavers</p> <p>Sys PM 5 - DECREASE instances of 1st time homelessness.....Target: first time homeless count is less than 1500</p> <p>Sys PM 7 - INCREASE permanent housing placements from Outreach, ES, TH, PH-RRH programs and retention of permanent housingTarget: Increase placements to permanent housing from outreach to be greater than 65% of outreach exits Increase placements to permanent housing from ES, SH, TH and PH-RRH to be greater than 30% <i>Ultimate Goal by 2025: Increase placements to permanent housing from ES, SH, TH and PH-RRH to be greater than 60%</i> Increase rate of retention of permanent housing to be greater than 95%</p>
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	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Youth Homelessness	All Other Types of Homelessness
Overarching Objectives	<p>Obj. 1 – Prioritize housing for homeless veterans, reaching Functional Zero for Veterans by 2024 as defined by the Built for Zero national effort.</p> <p>Obj. 2 – At least 90% of veterans with homelessness prevention financial assistance will remain in permanent housing for at least 6 months following assistance.</p> <p>Obj. 3 – At least 85% of the veterans receiving rapid re-housing assistance will remain in permanent housing for at least 6 months following assistance.</p> <p>Obj. 4 – Ensure the Inflow of new veterans experiencing homelessness each month is less than the Outflow of veterans exiting to permanent housing each month.</p> <p>Obj. 5 – Ensure no service eligible Veteran experiences homelessness for more than 30 consecutive days.</p>	<p>Obj. 1 – Increase units of permanent housing by 300 units for individuals and couples with no minor children who receive \$750 per month in income or less and have chronic homelessness histories.</p> <p>Obj. 2 – Promote use of local ordinance and inclusionary housing regulations mandating new residential developments dedicate a minimum of 5% of newly developed unites be dedicated to those exiting chronic homelessness for which they would pay no more than 30% of their monthly income to maintain a permanent lease.</p> <p>Obj. 3 – Prioritize housing for chronically homeless individuals, and adult couples, reaching Functional Zero for Chronically Homeless Adults by 2025 as defined by the Built for Zero national effort.</p> <p>Obj. 4 - Increase funding dedicated to operations of permanent supportive housing programs to ensure participants do not reenter homelessness.</p>	<p>Obj. 1 – Ensure no families with minor children experiences unsheltered homelessness.</p> <p>Obj. 2 – Increase permanent housing appropriate for families with minor children with extremely low income and histories of homelessness by 500 units.</p> <p>Obj. 3 – Ensure at least 85% of the families receiving rapid re-housing assistance remain in permanent housing for at least 6 months following receipt of last rental payment or case management assistance.</p> <p>Obj. 4 – Increase access to section 8 housing vouchers for families with minor children and encourage use of homeless priority among PHAs.</p> <p>Obj. 5 – Reduce the average length of time that a family is literally homeless to no more than 30 days.</p>	<p>Obj. 1 – Implement the use of Host Homes for runaway, LGBTQ+ and at-risk youth as a emergency shelter diversion practice for youth.</p> <p>Obj. 2 – Identify resources and implement programing for parenting youth and pregnant youth experiencing homelessness.</p> <p>Obj. 3- Ensure no minor youth, up to age 18, experiences unsheltered homelessness.</p> <p>Obj. 4- Increase permanent housing units for youth including support services by 30 units.</p> <p>Obj. 5 – Increase funding dedicated to operating Transitional/Medium-Term/Bridge housing and support services for youth.</p> <p>Obj. 6 – Utilize the Youth Action Board committee of the BBCoC to vet and prioritize youth specific service and intervention approaches.</p>	<p>Obj. 1 – Promote use of local ordinance and inclusionary housing regulations mandating new residential developments dedicate a minimum of 10% of newly developed unites to those exiting homelessness for which they would pay no more than 30% of their monthly income to maintain a permanent lease.</p> <p>Obj. 2 - Increase permanent housing by 30 units for those with Sexual Offender and Predator status.</p> <p>Obj. 3 – Establish prevention assistance programs targeted to serve the elderly or medically needy designed to keep these individuals in permanent housing.</p> <p>Obj. 4 – Expand function of Landlord Liaison Initiatives to include identifying and engaging landlords willing to housing Sexual Offenders and those with Felonies in background as well as those with no or low credit.</p>

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Youth Homelessness	All Other Types of Homelessness
Coordinated Entry <i>(Intake, Assessment & Referrals)</i>	a. Ensure Emergency Shelters and SSVF and VA Outreach Teams are the primary Access Points for Veterans through Coordinated Entry.	a. Collaborate with agencies serving individuals experiencing chronic homelessness to ensure that agencies are fully utilizing the Coordinated Entry System in HMIS, which will connect clients with appropriate services. b. Increase functionality of Coordinated Entry service referral system by to allow for all HMIS participating agencies to send and receive support services and housing referrals within HMIS.	a. Collaborate with agencies serving families and children who are experiencing homelessness to ensure households are assessed and entered in the Coordinated Entry System in HMIS, within the first 14 days of becoming homeless. b. Expand use of the Coordinated Entry System to other emergency assistance providers for the purposes of case coordination and ensuring duplicative services are avoided. c. Utilize Homeless School Liaisons as an Access Partner for Coordinated Entry in rural communities	a. Collaborate with agencies serving youth who are experiencing homelessness to ensure that agencies are fully utilizing the Coordinated Entry System in HMIS, which will connect clients with appropriate services and housing opportunities. b. Partner with the child welfare, juvenile justice and at-risk youth programs to ensure they can assess youth experiencing homelessness through the Coordinated Entry System.	a. Collaborate with agencies serving individuals experiencing homelessness to ensure that agencies are fully utilizing the Coordinated Entry System in HMIS, which will connect clients with appropriate services and housing opportunities. b. Increase functionality of Coordinated Entry System to incorporate Landlords who have vacant permanent units prioritized for those exiting homelessness.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Youth Homelessness	All Other Types of Homelessness
Prevention & Diversion	<ul style="list-style-type: none"> a. Connect clients to legal aid when necessary to avoid entering homelessness. Specifically adding resources for Veteran’s Tax Court and Veteran Justice Outreach. b. Increase financial resources available for homeless prevention and diversion efforts for veterans who do not qualify for VA and SSVF assistance. 	<ul style="list-style-type: none"> a. Connect clients to legal aid when necessary to avoid entering homelessness. b. Prioritize individuals with chronic homeless histories for Diversion and Prevention resources in order to keep them from returning to homelessness. c. Create a formal partnership providing mediation and legal expertise for chronically homeless cases that have been permanently housed and face eviction again. 	<ul style="list-style-type: none"> a. Dedicate funding for Diversion activities through Family Emergency Shelters and Prevention Providers. b. Create a formal partnership providing mediation and legal expertise for families facing eviction. c. Expand Prevention activities serving our 7 rural counties targeted at families at imminent risk of homelessness. 	<ul style="list-style-type: none"> a. Seek funding through the HUD YHDP to implement Host Homes to divert youth from entering homelessness and emergency shelter. b. Increase resources available for homeless prevention and diversion for youth ages 16-24. c. Create a formal partnership with local CBC, Department of Children and Families and Department of Justice to prevent and divert youth 16-24 from entering homelessness. 	<ul style="list-style-type: none"> a. Connect clients to legal aid when necessary to avoid entering homelessness. b. Increase resources available for homeless prevention and diversion efforts system wide c. Dedicate funding to Reentry and Discharge planning from county jails and hospitals to avoid discharges directly to the streets or emergency shelters.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Youth Homelessness	All Other Types of Homelessness
Unsheltered Homelessness/ Outreach	<ul style="list-style-type: none"> a. Utilize SSVF funded Outreach workers as a component of the CoC Coordinated Outreach efforts. b. Assess all unsheltered Veterans through SSVF and VA Outreach for completion of Coordinated Entry Assessment and Referral. c. SSVF and VA Outreach teams to provide support for clients needing access to basic needs items such as hygiene, tarps, survival aid and access to emergency shelter. 	<ul style="list-style-type: none"> a. Dedicate case management and outreach services to chronic subpopulation that will follow clients through to support them after the first few months of permanent housing. b. Identify Individuals who are currently residing in primitive camps and prioritize permanent housing options to meet the needs of chronic and unsheltered population with limited income. c. Offer permanent housing to ALL Chronic clients every 14 days. d. Expand outreach coordination to include law enforcement, institutions and hospitals to ensure proper discharge planning to avoid unsheltered homelessness. 	<ul style="list-style-type: none"> a. Collaborate with Homeless School Liaisons to identify families needing prevention, diversion, shelter and permanent housing resources. b. Collaborate with local CBC, Department of Children and Families and Department of Justice to identify families with children who are literally homeless needing resources. c. Ensure there is adequate funding to cover hotel/motel vouchers for families needing short term stays to avoid unsheltered homelessness among families with minor children in all 8 counties. 	<ul style="list-style-type: none"> a. Utilize youth specific outreach teams to identify and assess unsheltered youth through age 24. b. Provide services and goods to meet basic needs for run away, homeless, and street youth and connect to service providers for youth to exit the streets into stable housing. c. Provide basic needs and assistance to homeless youth to increase youth’s personal safety, well-being, and self-sufficiency; and provide positive adult connections. 	<ul style="list-style-type: none"> a. Expand outreach coordination to include outreach to local county jails and hospitals for those that are likely to be discharged to homelessness. b. Continue to conduct bi-weekly outreach coordination calls facilitated by the CoC ensuring all “hot spots” for unsheltered homelessness are visited regularly by outreach workers. c. Evaluate the advantages of conducting an unsheltered Point In Time Count semi-annually, once in January and once during June, July, or August to better understand influx of unsheltered homelessness, specifically within Leon County.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Youth Homelessness	All Other Types of Homelessness
Emergency Shelter	<ul style="list-style-type: none"> a. Increase resources dedicated to emergency shelter operations. b. Increase resources for emergency shelter case management in order to enforce a 30:1 Client : Case Manager ratio. c. Increase use of hotel/motels as emergency shelter when congregate shelters are at capacity d. Create shelter programing for clients with pets. 	<ul style="list-style-type: none"> a. Increase resources available for emergency shelter operations. b. Ensure clients nearing chronic homelessness are prioritized for permanent housing opportunities. c. Ensure no client remains homeless and in emergency shelter for more than 12 months. d. Reduce the rate of returns to chronic homelessness by prioritizing use of diversion and prevention for the formerly chronic population. e. Increase resources for emergency shelter case management in order to enforce a 30:1 Client : Case Manager ratio. f. Increase use of hotel/motels as emergency shelter when congregate shelters are at capacity g. Create shelter programing for clients with pets. 	<ul style="list-style-type: none"> a. Assess the need for additional shelter capacity in neighboring counties. b. Increase resources for emergency shelter case management in order to enforce a 30:1 Client : Case Manager ratio. c. Ensure no household remains homeless and in emergency shelter for more than 12 months. 	<ul style="list-style-type: none"> a. Identify need and potential funding for emergency shelter beds targeting youth ages 18-24, including LGBTQ+ youth. b. Designate a "Safe Place" within the current Emergency Shelter system for LGBTQ+ youth. c. Increase resources for emergency shelter case management in order to enforce a 14:1 Client : Case Manager ratio. d. Evaluate the need for emergency shelter options for minors with children and/or pregnant minors. 	<ul style="list-style-type: none"> a. Increase resources for emergency shelter case management in order to enforce a 30:1 Client : Case Manager ratio. b. Identify funding required to implement a small 12-18 bed a Safe Haven Shelter option.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Youth Homelessness	All Other Types of Homelessness
Medium Term Supportive Housing/Bridge Housing/Transitional Housing	<ul style="list-style-type: none"> a. Strategize with GPD Transitional Housing Provider to turnover units to Bridge Housing and permanent housing units in order to achieve Functional Zero. b. Create Bridge Housing option with 15 units. c. Identify need and scope of services and support for Respite Living Program. 	<ul style="list-style-type: none"> a. Create Bridge Housing option up to 20 units for chronic population waiting for PSH and working to identify housing. b. Identify need and scope of services and support for Respite Living Program. 	<ul style="list-style-type: none"> a. Identify funding to increase transitional housing options for families with children by 94 beds. a. Increase funding options covering support staff costs for transitional and medium term supportive housing. b. Identify need and scope of services and support for Respite Living Program. 	<ul style="list-style-type: none"> a. Apply for HUD YHDP Grant to implement a 18-24 bed Bridge/Medium Term Supportive Living program for youth ages 16-24. b. Increase funding available for providing life skills training and transitional supports to better prepare them for housing stability in the future. 	<ul style="list-style-type: none"> a. Identify funding and Implement housing options for sexual offenders/predators and those exiting institutions by 18 units. a. Increase funding options covering discharge planning from jails and prisons so that those re-entering can go directly into medium term supportive options rather than shelter or the streets.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Youth Homelessness	All Other Types of Homelessness
Permanent Rental Housing <i>(Rapid Rehousing, Rental, Permanent Supportive Housing, Vouchers)</i>	<ul style="list-style-type: none"> a. Increase the number of VASH Vouchers available to CoC Coverage area. b. Identify funding for 10 additional units of PSH for veterans not eligible for VASH Vouchers. c. Utilize Emergency Housing Vouchers designated through PHAs to serve veterans not qualifying for other assistance. d. Identify housing options with higher levels of care including Assisted Living Facilities and Nursing Homes targeted towards serving veterans that are service eligible and ineligible. 	<ul style="list-style-type: none"> a. Ensure PSH clients are assessed annually and supported to move on to other permanent housing as intensive support services are no longer needed. b. Expand local funding of Permanent Supportive Housing program operations. c. Identify funding of pilot project utilizing 3-4 small quad apartments to house those with SPMI who lack family support. d. Work with local governments to incentivize development/rehab housing stock making a portion of the units available to extremely low income clients exiting chronic homeless. e. Continue the work of the Landlord Liaisons focusing on education, recruitment and support of landlords willing to house those with unstable housing backgrounds. f. Expand access to the landlord mitigation fund as a security measure for landlords housing chronic clients. g. Expand the work of the Landlord Liaison focusing on education, recruitment and support of landlords willing to house those with barriers to housing. 	<ul style="list-style-type: none"> a. Increase funding dedicated to PSH units for families with minor children by 30 units. b. Work with PHAs to identify 300 set aside voucher for homeless families with children and or prioritize section 8 vouchers to homeless families first. c. Utilize Emergency Housing Vouchers designated through PHAs. d. Increase RRH funds available for families with children and couples with no children. e. Increase funding and partnerships to provide component of wrap around services and continued case management to help sustain housing. f. Work with local governments to incentivize development/rehab housing stock making a portion of the units available to extremely low income families exiting homelessness. 	<ul style="list-style-type: none"> a. Apply for the HUD YHDP to fund a pilot Youth PSH program for 18-24 year olds with chronic homelessness, family violence, child welfare involvement, juvenile justice involvement, developmental disabilities or generational homelessness histories. b. Identify or create appropriate housing with supports for pregnant youth and youth with children. c. Implement use of roommate matching criteria to decrease financial burden on youth. d. Expand the work of the Landlord Liaison focusing on education, recruitment and support of landlords willing to house youth needing stable housing. e. Expand financial assistance services to include Direct Cash Transfers (DCT) to youth to cover basic needs, including permanent housing costs. 	<ul style="list-style-type: none"> a. Increase local funding of PSH operations. b. Identify and partner with Senior Citizen Housing communities and senior service organizations to refer elderly homeless individuals to the most appropriate housing and care options. c. Expand MoUs with Florida Housing Finance Corporation funded tax credit properties setting aside units for seniors, those with disabilities and extremely low incomes. d. Explore use of Sponsor Housing agreements and Master Leasing entities to help permanently house those with backgrounds that prohibit them from attaining a lease on their own. e. Identify or create dedicated housing for sexual offenders/predators in compliance with residence requirements. f. Implement roommate matching criteria to lower cost burden of housing.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Unaccompanied Youth Homelessness	All Other Types of Homelessness
Home Ownership	<p>a. Provide education on Veteran’s Home Loan assistance programs.</p>	<p>a. Assess if there is any participant in the THA voucher program or PSH programs that could transition to home ownership.</p> <p>b. Educate those identified to move towards home ownership on mortgages, subsidies, and other home ownership opportunities through relationships with community partner organizations.</p>	<p>a. Provide opportunities for education on federal, state and local incentive programs to qualify low-income households for home purchases.</p> <p>b. Encourage local incentives for developers creating low-cost, smaller sized housing to be created for home ownership.</p>	<p>a. Offer connections to budgeting, saving and future planning education to youth, sparking interest in homeownership goals.</p>	<p>b. Create formal partnerships with local organizations specializing in home ownership preparation and first-time home buyer education.</p>

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Unaccompanied Youth Homelessness	All Other Types of Homelessness
Employment & Income Support Services	<ul style="list-style-type: none"> a. Identify programs focused on vocational training and certification programs at free or substantially reduced cost. b. Expand veteran involvement in employment and income support services. c. Ensure that SSVF programing offers the services of a SOAR processor to improve system access for veterans trying to secure/restore SSI/SSDI benefits. d. Partner with CareerSource Capital Region and the VET program to assist all veterans seeking employment. 	<ul style="list-style-type: none"> a. Expand participant involvement with employment and income support services. b. Increase number of SOAR processors dedicated to chronic clients, to improve system access for individuals trying to secure/restore SSI/SSDI benefits. c. Increase referrals to WIPA programs to ensure access to work incentive programs. d. Increase referrals to programs offering job readiness and employability training support services (including financial literacy supports) to help individuals access employment programs/efforts. e. Increase number of representative payees available for chronic clients. f. Create training on gaining part time employment and maintaining disability benefits for PSH participants. 	<ul style="list-style-type: none"> a. Expand participant involvement with employment and income support services. b. Ensure case managers serving families are SOAR certified to improve system access for families trying to secure/restore SSI/SSDI benefits. c. Create training on gaining part time employment and maintaining disability benefits for PSH participants. 	<ul style="list-style-type: none"> a. Explore the development of a vocational training program for youth experiencing homelessness. b. Increase number of SOAR processors dedicated to youth, to improve system access for individuals trying to secure/restore SSI/SSDI benefits. c. Build partnerships with local businesses to pair youth with internships and apprenticeships. 	<ul style="list-style-type: none"> a. Increase access to SOAR processors to improve system access for individuals trying to secure/restore SSI/SSDI benefits. b. Expand participant involvement with employment and income support services. c. Create training on gaining part time employment and maintaining disability benefits for PSH participants.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Unaccompanied Youth Homelessness	All Other Types of Homelessness
Transportation Assistance	<ul style="list-style-type: none"> a. Increase transportation options for cross county travel (outer counties to Leon for services) when services cannot be delivered in rural counties. b. Encourage public transportation services to allow homeless veterans to receive free or reduced fare bus passes. 	<ul style="list-style-type: none"> a. Continue to collaborate with public transportation services through the partnership with StarMetro to ensure organizations serving the chronically homeless can purchase reduced fare bus passes for clients. b. Provide education on reduced fare bus transportation services options for individuals in PSH programs. 	<ul style="list-style-type: none"> a. Increase transportation options for cross county travel (outer counties to Leon for services) when services cannot be delivered in rural counties. b. Continue to collaborate with public transportation services to ensure homeless services programs can receive vouchers/discounted rates for clients who are homeless. c. Continue partnership with County Schools to provide transportation to and from school through the McKinney Vento Act. 	<ul style="list-style-type: none"> a. Continue to collaborate with public transportation services to ensure homeless services programs can receive vouchers/discounted rates for clients who are homeless. b. Continue partnership with County Schools to provide transportation to and from school through the McKinney Vento Act. c. Increase transportation options for cross county travel (outer counties to Leon for services) when services cannot be delivered in rural counties. 	<ul style="list-style-type: none"> a. Continue to collaborate with public transportation services to ensure homeless services programs can receive vouchers/discounted rates for clients who are homeless. b. Increase free and reduced transportation services options for individuals accessing homeless services and exiting the homeless system of care to permanent housing. c. Increase transportation options cross county travel (outer counties to Leon for services) when services cannot be delivered in rural counties. d. Provide homeless families with education about the McKinney Vento act and accommodations for bus travel to maintain school placements.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Unaccompanied Youth Homelessness	All Other Types of Homelessness
Childcare	<ul style="list-style-type: none"> a. If needed, connect veteran families to various childcare opportunities through set-aside vouchers available through ELC. 	<ul style="list-style-type: none"> a. Ensure chronically homeless families are prioritized for ELC vouchers if requested. 	<ul style="list-style-type: none"> a. Refer homeless households needing childcare to the Early Learning Coalition for vouchers. 	<ul style="list-style-type: none"> a. Connect pregnant youth with childcare options upon birth of child through ELC. 	<ul style="list-style-type: none"> a. Ensure families with minor children have access to childcare vouchers in all 8 counties if they are experiencing homelessness.
Healthcare/Benefits	<ul style="list-style-type: none"> a. Initiate partnership with health care providers and hospitals and increase collaboration on discharge policy and procedures. b. Identify health care and benefit resources for veterans who do not qualify for veteran's assistance due to dishonorable discharge, etc. c. Connect Veterans with a dishonorable discharge with VA access to Mental Health Services now available. d. Identify need and funding for service ineligible veterans needing temporary respite housing 	<ul style="list-style-type: none"> a. Access Medicaid benefits for those who qualify to cover cost of case management and peer support services among individuals experiencing chronic homelessness. b. Initiate partnership with health care providers and hospitals and increase collaboration on discharge policy and procedures. c. Ensure healthcare supports and services for individuals experiencing chronic homelessness are accessible. d. Ensure behavioral healthcare supports and substance abuse treatment services for individuals experiencing chronic homelessness are available through partnership with providers and the area Managing Entity. 	<ul style="list-style-type: none"> a. Assess how access to Medicaid benefits can be used for case management services among families experiencing homelessness. b. Initiate partnership with health care providers and hospitals and increase collaboration on discharge policy and procedures. c. Ensure healthcare supports and services for families experiencing homelessness are available through partnership with mainstream providers and providers operating in the Kearney Center. d. Work to improve access of families and children without insurance to ongoing behavioral health services. 	<ul style="list-style-type: none"> a. Connect youth experiencing homelessness with managed care plans for education on accessing benefits of health insurance and acquiring health insurance. b. Initiate partnership with health care providers and hospitals and increase collaboration on discharge policy and procedure. 	<ul style="list-style-type: none"> a. Initiate partnership with health care providers and hospitals and increase collaboration on discharge policy and procedure. b. Complete data analysis on need for temporary respite housing to decrease use of emergency departments as primary health care.

	Veteran Homelessness	Chronic Homelessness	Family & Child Homelessness	Unaccompanied Youth Homelessness	All Other Types of Homelessness
Education/Advocacy	<ul style="list-style-type: none"> a. Implement PR campaign and Action Plan promoting reaching Functional Zero for Veteran Homelessness by 2024. b. Implement standardized education to clients on budgeting, how to be a good roommate/tenant and life skills needed to retain housing. c. Provide seminars for case managers and clients on fair housing laws through local partner organizations. d. Collaborate with local substance abuse providers to offer education on Harm Reduction for clients with SA issues and housing stability issues. 	<ul style="list-style-type: none"> a. Implement PR campaign and Action Plan promoting reaching Functional Zero for Chronic Homelessness by 2025. b. Conduct Landlord education and engagement to reduce common barriers to housing for individuals with criminal backgrounds, eviction and damage histories c. Implement standardized education to clients on budgeting, how to be a good roommate/tenant and life skills needed to retain housing. d. Collaborate with local substance abuse providers to offer education on Harm Reduction for clients with SA issues and housing stability issues. e. Provide seminars for case managers and clients on fair housing laws through local partner organizations. 	<ul style="list-style-type: none"> a. Provide educational seminar to Homeless School Liaisons on existing prevention and homelessness resources in September each year. b. Implement standardized education to clients on budgeting, how to be a good roommate/tenant and life skills needed to retain housing. c. Provide seminars for case managers and clients on fair housing laws through local partner organizations. d. Collaborate with local substance abuse providers to offer education on Harm Reduction for clients with SA issues and housing stability issues. e. Partner with DCF and the CBC to offer training on family safety practices. 	<ul style="list-style-type: none"> a. Implement standardized education to clients on budgeting, how to be a good roommate/tenant and life skills needed to retain housing. b. Provide seminars for case managers and clients on fair housing laws through local partner organizations. c. Collaborate with local substance abuse providers to offer education on Harm Reduction for clients with SA issues and housing stability issues. d. Continue outreach efforts to hotels, restaurants, and businesses to educate on how to identify and help trafficked/exploited youth and individuals. e. Provide education to local entities interesting in serving as a Sponsor or Master Lease Holder for youth who do not have access to cosigners and are experiencing homelessness. 	<ul style="list-style-type: none"> a. Partner with Florida Coalition to End Homelessness to advocate for increased DCF Challenge and Staffing Grant funds dedicated to BBCoC b. Advocate at the federal and state level to increase funding allocations and further explain the complexity of being an 8 county CoC, with one city that is an ESG entitlement jurisdiction. c. Provide an Annual Homelessness Update report to each county commission within the CoC coverage are with recommendations about allocation of resources to prevent and end homelessness. d. Encourage local funders to measure performance of homelessness specific projects through the 6 identified HUD System Performance Measures and partner with the CoC to administer and allocate funding of homeless prevention and homelessness services.

ATTACHMENT: CE

Attachment CE: Coordinated Entry

Q6: Include narrative describing how this project participates in the BBCoC Coordinated Entry Assessment and Referral process. Reference the CE policies and procedures if this project is considered a CE Access Point.

Ability1st is a current coordinated entry access point and only accepts referrals through the coordinated entry process. This process involves using an assessment tool (Vi-SPDAT) to assess consumers level of need as it relates to health, daily activities, medical history, and homeless experiences. Referrals will be made based on the results of the assessment to homeless assistance programs (RRH, PSH and other related programs when appropriate). Our staff attend case conferencing meetings, where the following is discussed:

- Participants and what housing resources they are eligible for
- Current location of client (camping, at a shelter, unknown, etc.);
- Barriers (review and problem solve);
- Safety (brainstorm how to ensure any unsheltered participants are safe for the near-term);
- Next steps: identify what is next or critical action items, including roles and timelines as well as any participant updates that need to be documented.

Individuals are prioritized for available slots based the BBCoC's prioritization guidelines and eligible applicants are referred to Ability1st. Once referred, our staff begin the process of identifying permanent stable housing for the consumer(PSH). Once housed, the consumer is provided with ongoing supportive services to assist them in maintaining housing and furthering their independence.

Attached: CE Access Point

Attachment 1:
Coordinated Entry Access Point
Hours of Operation
(Subject to Change)

Designated Access Points:

Access Point	Location	Assessment Hours
CCYS Going Places Drop in Center for Youth	654 Dunn Street Tallahassee, FL 32304	Tuesday-Thursday: 12 noon-7 pm Friday: 2 pm-7 pm Saturday: 12 noon- 5 pm
The Kearney Center Emergency Shelter for Individuals	2650 Municipal Way Tallahassee, FL 32304	Monday- Friday: 8:30 am- 4:30 pm
HOPE Community Emergency Shelter for Families	2729 West Pensacola St. Tallahassee, FL 32304	Monday- Thursday: 10am-7 pm Friday: 10 am-4 pm By-Appointment
Ability 1 st	1823 Buford Court, Tallahassee, FL 32308	Monday, Tuesday, and Thursday: 1 pm-4 pm Wednesday and Friday: 9 am- 12 noon

Street Outreach Teams

Dedicated outreach teams, including street outreach, will function as access points to the CE process by seeking to engage persons who may be served through CE but who are not seeking assistance via agencies that offer participate in CE. Each team will be trained to provide assessments while conducting outreach.

ATTACHMENT: F

Attachment F- Racial Equity

Q7: Include narrative and data demonstrating organizations executive and direct service staff racial and ethnic makeup is reflective of the clients served within the past year.

Agency wide comparison:

We were able to provide a “snapshot” of the racial and ethical makeup of our consumers by pulling an APR from HMIS. Our consumers who are seeking housing services are entered into HMIS, however, this does not account for all our consumers as our main client documentation system

(COMS) does not have the capability to exclude those entered into HMIS, so pulling data from COMS, would duplicate consumers, resulting in skewed data. We feel confident that the APR reporting provides adequate data to convey our consumer’s racial and ethnic makeup.

The majority (56%) of our consumers report racially as Black/African American, along with 40% of our staff, and 57% of our Board reporting as the same race. We realize that these percentages are not within 10% of each other and we plan to correct this while hiring for two current position vacancies. We will also have a position opening for a new program that will begin October 1st that we will be hiring for in the next month.

38% of consumers report their race as White, along with 60% of staff and 43% of the Board.

The majority of our consumers (94%) report their ethnicity as non-Hispanic/Latino, along with 95.5% of staff and 100% of the Board.

The majority of our Executive Staff (Executive Director, Deputy Director, Office Manager, Human Services Outreach Manager and Housing Services Manager) identify as White (60%) and (40%) report as African American. This is an area that can be approved upon to become more diverse to more adequately match clients served.

Overall, based on the data presented, we feel as though our staff structure will be racially and ethnically representative of the consumers that we serve once our vacancies are filled.

Attached: Org chart, APR (clients served)



Executive Director
Mandy Bianchi

Deputy Director
Jackie Fortmann

Human Services Outreach Manager/VOCA
LaTunya Pritchett-Arnold

Victim Advocate
Kimberly Blan

MHO/Benefits Specialist
Wanda McKenzie

Independent Living Coordinator
Bruce Weaver

MHO Housing Coordinator
VACANT

Professional Accommodation
VACANT

Street Outreach Coordinator
Renee Kissel

Street Outreach Coordinator
Tori Stephenson

Housing Services Manager
Andrea Wiggins

APCH Housing Specialist
Dee Humose

Operations & HR Manager
Shelley Shaul

Administrative Assistant
Tina Ferfort

Administrative Assistant
Cathy Ellsworth

Facilities & Maintenance
Ronald Mozee

Youth Services Coordinator
Chris Carlberg

HSHT Wakulla
Sharon Scherbarth

HSHT Wakulla
Patricia Bodiford

Accessibility & Mobility Manager
Timmy Dyke

Accessibility Specialist
Savannah Middlebrooks

Report Run History

Report ID	Date Ran (Run-time)	Report Type	Name	User Creating	Running Provider	Running User	Report Status
256447	08/29/2022 09:49:51 AM (0.00 mins)	COCAPR		Jackie Fortmann	FL506 - BBCoC: Ability 1st	Jackie Fortmann	Running
256445	08/29/2022 09:42:20 AM (0.13 mins)	COCAPR		Jackie Fortmann	FL506 - BBCoC: Ability 1st	Jackie Fortmann	Completed
256406	08/26/2022 03:55:42 PM (0.57 mins)	COCAPR		Jackie Fortmann	FL506 - BBCoC: Ability 1st	Jackie Fortmann	Completed
256405	08/26/2022 03:55:16 PM (1.00 mins)	COCAPR		Jackie Fortmann	FL506 - BBCoC: Ability 1st	Jackie Fortmann	Completed
256404	08/26/2022 03:54:45 PM (0.06 mins)	COCAPR		Jackie Fortmann	FL506 - BBCoC: Ability 1st	Jackie Fortmann	Completed

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Report Options

Name	
Description	
Provider Type	<input checked="" type="radio"/> Provider <input type="radio"/> Reporting Group
Provider *	FL506 - BBCoC: Ability 1st (9346) <input checked="" type="radio"/> This provider AND its subordinates <input type="radio"/> This provider ONLY
Program Date Range *	09/01/2021 to 08/31/2022
Entry/Exit Types *	<input type="checkbox"/> Basic <input checked="" type="checkbox"/> HUD <input type="checkbox"/> PATH <input type="checkbox"/> Quick Call <input type="checkbox"/> RHY <input type="checkbox"/> Standard <input type="checkbox"/> VA <input type="checkbox"/> HPRP (Retired)

CoC-APR Report Results - Date Ran: 08/26/2022 03:55:16 PM - Report ID: 256405

4a - Project Identifiers in HMIS

#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	All
Organization Name	Org. ID	Project Name	Project ID	HMIS Project Type	Method for Tracking ES	Affiliated with a residential project? (SSO)	Project IDs of Affiliation	CoC Codes	Geocodes	Victim Service Provider																	
FL506 - BBCoC: Ability 1st	9346	FL506 - BBCoC: Ability 1st	9346	Services Only (HUD)		Yes	9346	FL-506	129073	False																	
FL506 - BBCoC: Ability 1st - APCH_Families (PSH)	9368	FL506 - BBCoC: Ability 1st - APCH_Families (PSH)	9368	PH - Permanent Supportive Housing (disability required for entry) (HUD)				FL-506	129073	False																	
FL506 - BBCoC: Ability 1st - APCH_Individuals (PSH)	9367	FL506 - BBCoC: Ability 1st - APCH_Individuals (PSH)	9367	PH - Permanent Supportive Housing (disability required for entry) (HUD)				FL-506	129073	False																	
FL506 - BBCoC: Ability 1st	9346	FL506 - BBCoC: Ability 1st DCF-ESG Rapid Rehousing	9702	PH - Rapid Re-Housing (HUD)				FL-506	129073	False																	
FL506 - BBCoC: Ability 1st	9346	FL506 - BBCoC: Ability 1st DCF-ESG Street Outreach	9701	Street Outreach (HUD)				FL-506	129073	False																	
FL506 - BBCoC: Ability 1st	9346	FL506 - BBCoC: Ability 1st - Rapid Rehousing (DCF-ESG-CV) (RRH)	9570	PH - Rapid Re-Housing (HUD)				FL-506	129073	False																	
FL506 - BBCoC: Ability 1st - Street Outreach (CoT-ESG-CV) (SO)	5978	FL506 - BBCoC: Ability 1st - Street Outreach (CoT-ESG-CV) (SO)	5978	Street Outreach (HUD)				FL-506	123000	False																	
FL506 - BBCoC: Ability 1st - Street Outreach (CoT-ESG-CV) (SO)	5978	FL506 - BBCoC: Ability 1st - Street Outreach (DCF-ESG-CV) (SO)	9569	Street Outreach (HUD)				FL-506	123000	False																	
ZZZ><(inactive)><FL506 - APCH2	5844	ZZZ><(inactive)><FL506 - APCH2	5844	PH - Permanent Supportive Housing (disability required for entry) (HUD)				FL-506	Missing	False																	

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5a - Report Validations Table

Report Validations Table	
1. Total Number of Persons Served	407
2. Number of Adults (age 18 or over)	319
3. Number of Children (under age 18)	86
4. Number of Persons with Unknown Age	2

5. Number of Leavers	251
6. Number of Adult Leavers	197
7. Number of Adult and Head of Household Leavers	205
8. Number of Stayers	156
9. Number of Adult Stayers	122
10. Number of Veterans	13
11. Number of Chronically Homeless Persons	202
12. Number of Youth Under Age 25	21
13. Number of Parenting Youth Under Age 25 with Children	0
14. Number of Adult Heads of Household	295
15. Number of Child and Unknown-Age Heads of Household	8
16. Heads of Households and Adult Stayers in the Project 365 Days or More	56

6a - Data Quality: Personally Identifiable Information

Data Element	Client Doesn't Know/Client Refused	Information Missing	Data Issues	Total	% of Error Rate
Name (3.1)	1	0	0	1	0%
SSN (3.2)	40	2	1	43	11%
Date of Birth (3.3)	1	1	0	2	0%
Race (3.4)	0	0		0	0%
Ethnicity (3.5)	1	2		3	1%
Gender (3.6)	0	0		0	0%
Overall Score				45	11%

6b - Data Quality: Universal Data Elements

Data Element	Error Count	% of Error Rate
Veteran Status (3.7)	1	0%
Project Start Date (3.10)	0	0%
Relationship to Head of Household (3.15)	14	3%
Client Location (3.16)	3	1%
Disabling Condition (3.8)	11	3%

6c - Data Quality: Income and Housing Data Quality

Data Element	Error Count	% of Error Rate
Destination (3.12)	14	6%
Income and Sources (4.2) at Start	20	6%
Income and Sources (4.2) at Annual Assessment	19	34%
Income and Sources (4.2) at Exit	17	8%

6d - Data Quality: Chronic Homelessness

Entering into project type	Count of total records	Missing time in institution (3.917.2)	Missing time in housing (3.917.2)	Approximate Date started (3.917.3) DK/R/missing	Number of times (3.917.4) DK/R/missing	Number of months (3.917.5) DK/R/missing	% of records unable to calculate
ES, SH, Street Outreach	126			27	15	18	22%
TH	0	0	0	0	0	0	0%
PH(all)	84	0	0	1	0	0	1%
Total	210						14%

6e - Data Quality: Timeliness

Time For Record Entry	Number of Project Start Records	Number of Project Exit Records
0 days	132	53
1 - 3 days	26	81
4 - 6 days	3	1
7 - 10 days	6	6
11+ days	7	34

6f - Data Quality: Inactive Records: Street Outreach and Emergency Shelter

	# of Records	# of Inactive Records	% of Inactive Records
Contact (Adults and Heads of Household in Street Outreach or ES - NBN)	16	16	100%
Bed Night (All clients in ES - NBN)	0	0	0%

7a - Number of Persons Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Adults	319	277	42		0
Children	86		75	11	0
Client Doesn't Know/Client Refused	2	0	0	0	2
Data Not Collected	0	0	0	0	0

Total	407	277	117	11	2
For PSH and RRH - the total persons served who moved into housing	100	57	43	0	0
7b - Point-in-Time Count of Persons on the Last Wednesday					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	181	118	58	3	2
April	198	137	56	3	2
July	125	78	44	3	0
October	124	76	44	3	1
8a - Number of Households Served					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Total Households	303	263	33	5	2
For PSH and RRH - the total persons served who moved into housing	70	56	14	0	0
8b - Point-in-Time Count of Households on the Last Wednesday					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	127	107	18	0	2
April	150	130	18	0	2
July	88	74	14	0	0
October	88	72	15	0	1
9a - Number of Persons Contacted					
		All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine
Once		98	0	81	0
2-5 Times		4	0	3	0
6-9 Times		0	0	0	0
10+ Times		0	0	0	0
Total Persons Contacted		102	0	84	0
9b - Number of Persons Engaged					
		All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine
Once		64	0	55	0
2-5 Times		1	0	1	0
6-9 Times		0	0	0	0
10+ Times		0	0	0	0
Total Persons Engaged		65	0	56	0
Rate of Engagement		64%	0%	67%	0%
10a - Gender of Adults					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Male	158	149	9	0	
Female	160	127	33	0	
No Single Gender	0	0	0	0	
Questioning	0	0	0	0	
Transgender	0	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	
Data Not Collected	1	1	0	0	
Subtotal	319	277	42	0	
10b - Gender of Children					
	Total	With Children and Adults	With Only Children	Unknown Household Type	
Male	34	26	8	0	
Female	52	49	3	0	
No Single Gender	0	0	0	0	
Questioning	0	0	0	0	
Transgender	0	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	
Data Not Collected	0	0	0	0	
Subtotal	86	75	11	0	
10c - Gender of Persons Missing Age Information					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	0	0	0	0	0
Female	2	0	0	0	2

No Single Gender	0	0	0	0	0
Questioning	0	0	0	0	0
Transgender	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Subtotal	2	0	0	0	2

11 - Age

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Under 5	18		16	2	0
5 - 12	45		40	5	0
13 - 17	23		19	4	0
18 - 24	22	16	6		0
25 - 34	31	17	14		0
35 - 44	50	36	14		0
45 - 54	90	84	6		0
55 - 61	72	70	2		0
62 +	54	54	0		0
Client Doesn't Know/Client Refused	2	0	0	0	2
Data Not Collected	0	0	0	0	0
Total	407	277	117	11	2

12a - Race

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
White	158	136	20	1	1
Black, African American, or African	229	129	89	10	1
Asian or Asian American	6	4	2	0	0
American Indian, Alaska Native, or Indigenous	4	4	0	0	0
Native Hawaiian or Pacific Islander	1	1	0	0	0
Multiple Races	9	3	6	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	407	277	117	11	2

12b - Ethnicity

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Non-Hispanic/Non-Latin(a)(o)(x)	383	260	111	10	2
Hispanic/Latin(a)(o)(x)	19	14	4	1	0
Client Doesn't Know/Client Refused	1	0	1	0	0
Data Not Collected	4	3	1	0	0
Total	407	277	117	11	2

13a1 - Physical and Mental Health Conditions at Start

	Total Persons	Without Children	Adults in HH with Children and Adults	Children in HH with Children and Adults	With Only Children	Unknown Household Type
Mental Health Disorder	167	142	17	6	0	2
Alcohol Use Disorder	13	13	0	0	0	0
Drug Use Disorder	23	21	2	0	0	0
Both Alcohol and Drug Use Disorders	19	18	1	0	0	0
Chronic Health Condition	87	79	7	1	0	0
HIV/AIDS	5	3	2	0	0	0
Development Disability	26	12	2	12	0	0
Physical Disability	123	116	6	1	0	0

13b1 - Physical and Mental Health Conditions at Exit

	Total Persons	Without Children	Adults in HH with Children and Adults	Children in HH with Children and Adults	With Only Children	Unknown Household Type
Mental Health Disorder	94	80	8	4	0	2
Alcohol Use Disorder	9	9	0	0	0	0
Drug Use Disorder	9	9	0	0	0	0
Both Alcohol and Drug Use Disorders	10	9	1	0	0	0
Chronic Health Condition	54	45	6	3	0	0
HIV/AIDS	1	1	0	0	0	0
Development Disability	18	7	0	11	0	0
Physical Disability	69	65	3	1	0	0

13c1 - Physical and Mental Health Conditions of Stayers

	Total Persons	Without Children	Adults in HH with Children	Children in HH with Children	With Only Children	Unknown Household Type
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Column1	Column12	Column2	Column3	Column4	Column5	Column6
Race	Consumers		Staff		Board	
White	158	38%	12	60%	4	43%
Black/African American	229	56%	8	40%	7	57%
Asian	6	1.40%	0	0	0	0
American Indian of Alaska Native	4	0.98%	0	0	0	0
Native Hawaiian or Other Pacific Islander	1	0.002	0	0	0	0
Multiple Races	9	0.02%	0	0	0	0
Doesn't Know/Refused	0	0.00%	0	0	0	0
Not Collected	0	0.00%	0	0	0	0
TOTAL	407	100%	20	100%	11	100%

Column1	Column2	Column3	Column4	Column5	Column6	Column7
Ethnicity	Clients		Staff		Board	
Non-Hispanic/Non-Latino	383	94%	20	100.00%	14	100%
Hispanic/Latino	19	4.66%	0	0.00%	0	0
Doesn't Know/Refused	1	0.00%	0	0	0	0
Not Collected	4	2.20%	0	0	0	0
TOTAL	407	100%	20	100.00%	14	100.00%

ATTACHMENT: G

Attachment G- Commitment to Housing First

Q8: Include narrative and reference the organizations policies and procedures that demonstrate the program does not mandate client participation in services either before obtaining housing or in order to retain housing. In addition, reference established policies and procedures within the organization that prioritize rapid placement and stabilization in permanent housing and improvement of economic self-sufficiency.

All Participants will be considered “Housing Ready” without prejudice. Consistent with a Housing First Approach, Program staff will work to house participants as quickly as possible regardless of barriers. Likewise, we will comply with all CoC Policy and Procedure, HUD Regulation, ADA and Fair Housing Standards.

Policy: Tenants have full rights, responsibilities, and legal protections

Procedure: It is the practice of Outreach staff to help people experiencing homelessness achieve long-term housing stability in permanent housing. Permanent housing is defined as housing where tenants have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and

local housing laws. Tenants are educated about their lease terms, given access to legal assistance, and encouraged to exercise their full legal rights and responsibilities. Landlords and providers in Housing First models abide by their legally defined roles and obligations. For instance, landlords and providers do not enter tenants' apartments without tenants' knowledge and permission except under legally-defined emergency circumstances.

Policy: Participants will experience a rapid and streamlined entry into housing: In order to ameliorate the potential anxiety and uncertainty experienced by participants during a lengthy housing application and approval process, Outreach staff will make every effort to help participants move into permanent housing as quickly as possible, streamlining application and approval processes, and reducing wait times.

Policy: Supportive services are voluntary but can and should be used to persistently engage tenants to ensure housing stability- Outreach staff will proactively offer follow up to participants in order to help them achieve and maintain housing stability, but tenants are not required to participate in services as a condition of receiving rapid rehousing assistance.

ATTACHMENT: HEALTH

Attachment Health: Coordination with Healthcare Organization

Q7. Include narrative on how project participants will be connected to obtain health insurance and address healthcare needs. Attach MoUs with healthcare organizations and letters of financial or in-kind commitment to this project by healthcare organizations.

Participants without income will be connected to our in-house Benefits Specialist, who will conduct an assessment to assess whether they may qualify for SSI/SSDI and if they do qualify, they will assist the participant in applying for these benefits, for which upon approval will provide them with monthly income and Medicaid health benefits.

While a participant is uninsured, our staff will connect them with Neighborhood Medical, for which provides checkups, preventive care, diagnosis, treatment, medication therapy and follow-up care to those who are currently uninsured. Once a participant receives insurance, our housing coordinator will assist them in coordinating any healthcare needs.

We also work closely with the Apalachee Center, to assist participants in keeping up with their mental health appointments and medication.

ATTACHMENT: H

Attachment H- Staffing Plan with Job Descriptions

Q8. Describe how the project will be implemented, including staff qualifications, a staffing plan with target dates of hire, location of service delivery, and all available supportive services. For maximum points, provide a detailed plan and attach job descriptions

Ability1st has implemented a very successful street outreach program to specifically serve unsheltered homeless individuals and families in Leon County. Our outreach staff will work with landlords and property owners throughout the city of Tallahassee and Leon County. Our primary goal is to assist our clients in achieving permanent, stable housing. However, we will also assist with emergency food and clothing, hygiene items, transportation assistance, benefits assistance, etc.

Supportive Services Plan: Our staffing plan will include two FT Outreach Coordinators (currently employed with us) who will conduct street outreach throughout Leon county to engage unsheltered individuals/families. Our staff will work to identify unsheltered individuals who are interested in housing, this includes an VI-SPDAT assessment, along with ongoing assessment of participant service needs and monitoring the delivery of individualized services to meet the needs of the program participant until the goals are met.

Our staff further provides direct assistance with the participant's housing search, assistance with application fees, past utility arrears, security deposits and short to medium term rental assistance. Offered support services include individualized life skills training, information and referral, supportive counseling and maintaining entitlement benefits. There is no time frame for duration of services, our goal is to provide unsheltered homeless individuals with the supplies and resources they need and assist them with housing when they are ready. Our outreach staff will be supervised by our Human Services Outreach Manager.

Other critical services include crisis counseling, health care advocacy and victimization related counseling by the housing coordinator, supportive services specialist, and other Ability1st staff. Additional supports are provided via in-house referral to other Ability1st staff members such as our SOAR trained SSI/SSDI Benefits Specialists and our SAMH funded Public Transportation specialist. Other referrals are made to:

- Local Food Banks/SNAP for supplemental food resources
- Legal Services of North Florida for legal services
- Apalachee Center/Florida Therapy for mental health treatment
- BOND/Neighborhood Medical/Care Point for outpatient health/primary care
- DISC Village for substance abuse treatment

Outreach Coordinator Job Description

This is a full time, non-exempt position that is responsible for conducting unsheltered homeless outreach, with the goal to assist those experiencing homeless into permanent housing. This position will report to the Deputy Director.

Tasks:

- Provides direct outreach activities to the eligible target population in Leon and Gadsden County, including assisting with tasks related to housing, assistance with other basic needs, and supportive/crisis counseling.
- Utilize in house rapid rehousing funds and other resources to assist eligible consumers into permanent housing.
- Assess consumer service needs, develops independent living plans, and arranges for related services as needed.
- Provides advocacy, independent living skills training and other supportive services to persons with disabilities.
- Maintains all appropriate program and consumer documentation, including COMS and HMIS entries, as well as program funder reporting requirements.
- Provide general information and referral to those experiencing homelessness and persons with disabilities.

Qualifications:

A Master's degree in a social service field preferred with at least one year experience working with those experiencing homelessness and individuals living with disabilities. A BS degree with an additional 2 years of related work experiencing is required. Must have reliable transportation or be able to arrange own travel when required to meet job responsibilities.

Note: the agency reserves the right, at the discretion of the Executive Director, to modify this job description any time and requires only written notification to the employee.

Center for Independent Living of North Florida DBA Ability1st

Human Services Outreach Manager Job Description

Summary:

This is a 40.0 hours per week professional position that provides specialized counseling and case management services for VOCA consumers served by Ability1st. Consumers targeted by this position have significant disability barriers to recovery, safety, and independent living. This position also is responsible for supervision of the program, along with the Street Outreach and Mental Health and Substance Abuse program. This position reports to the Deputy Director.

Tasks:

- Provides advocacy and case management services to victims of crime including: (50% VOCA)
 - Providing outreach to identify victims of crime. (15%)
 - Crisis-counseling to victims (10%)
 - Follow-up case management services to crime victims including assistance in completing housing applications, general entitlement benefits, emergency assistance and assisting consumers in filing crime victim compensation claims. (25%)
- Provide appropriate information and referral for needs that cannot be met directly by Ability1st. (10%)
- Maintains all appropriate documentation for VOCA services including entering data for the monthly performance reporting and assisting with grant reporting (15%)

Total VOCA Allocation: 75% VOCA

- Supervision of the VOCA program, SAMH program and Street Outreach program, including assistance with reporting for these programs. (25%)

Total Allocation: 100%

Minimum Qualifications:

MS/MSW minimum with at least 1 year related experience, and an understanding of the criminal justice process and disability issues. Qualified person with a disability and/or with DV experience is preferred. Must have reliable transportation or be able to arrange own travel when required to meet job responsibilities.

Note: The agency reserves the right, at the discretion of the Executive director, to modify this job description at any time and requires only written notification to the employee. 02/21 rev

I have read and understand the job requirements, responsibilities and expectations set forth in the job description provided for my position. I attest that I am able to perform the essential job functions as outlined with or without any reasonable accommodations.

ATTACHMENT: I



Executive Director
Mandy Bianchi

Deputy Director
Jackie Fortmann

Human Services Outreach Manager/VOCA
LaTunya Pritchett-Arnold

Victim Advocate
Kimberly Blan

MHO/Benefits Specialist
Wanda McKenzie

Professional Accommodation
VACANT

Independent Living Coordinator
Bruce Weaver

MHO Housing Coordinator
VACANT

Street Outreach Coordinator
Renee Kissel

Street Outreach Coordinator
Tori Stephenson

Housing Services Manager
Andrea Wiggins

APCH Housing Specialist
Dee Humose

Operations & HR Manager
Shelley Shaul

Administrative Assistant
Tina Ferfort

Administrative Assistant
Cathy Ellsworth

Facilities & Maintenance
Ronald Mozee

Youth Services Coordinator
Chris Carlberg

HSHT Wakulla
Sharon Scherbarth

HSHT Wakulla
Patricia Bodiford

Accessibility & Mobility Manager
Timmy Dyke

Accessibility Specialist
Savannah Middlebrooks

ATTACHMENT: J

Attachment J- Operational Plan

Q10. Describe the following aspects of the project operational plan:

- a. Staffing – Hiring: Provide dates of hire for each project position, indicate what methods of recruitment will be used to advertise positions.

Our first Outreach Coordinator was hired on 7/19/21 & the second was hired on 5/16/22. These positions will be responsible for running the Street Outreach and RRH programs. Our Human Services Outreach Manager was hired on 8/23/21 and she will be responsible for supervising the program.

(See Job Descriptions in Attachment H)

- b. Training Provided:

- a. New Staff/Orientation- All employees will be required to undergo an initial period of orientation that takes place throughout the first 30 days of employment. Orientation will consist of such items as Independent Living history and philosophy, benefits and policy & procedures manual, confidentiality practices, job description on, organizational structure, agency services and other material as deemed appropriate by the Executive Director. At the end of 30 days, the employee and supervisor, indicating that the employee has received and understands each aspect of the orientation, will sign an orientation checklist. This checklist will be kept in the employee's personnel file.
- b. New Grantee/HUD JAX- We are committed to having our executive staff attend this training once per year, along with at least one direct care staff member.
- c. Trauma Informed Care- We now mandate trauma informed care training once a year. This is something that has been implemented in the past year as we believe it this instrumental to proper service delivery.
- d. Confidentiality and Security- All staff must complete HIPAA Training and Security Awareness Training through the Dept. of Children and Families annually.
- e. Conflict Resolution and Grievance P&P- All new staff members are presented and informed about our conflict resolution process and Grievance policies and procedures regarding the on-boarding process. We have implemented an acknowledgment of all policies and procedures, in the form of an acknowledgment form to be signed annually for all staff members.

- c. Adoption of Policies and Procedures

- a. Homeless status and eligibility determination- Ability1st serves individuals living with disabilities. Eligibility is determined by:
- b. 1) An individual with a physical or mental impairment that substantially limits one or more major life activities. Major life activities include, but are not limited to self care, manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

2) A reasonable expectation that the provision of IL services will improve one's independence or quality of life. Additionally, All participants must meet the criteria of paragraph (1) of the definition of homeless at 578.3, except that persons coming from transitional housing must have originally come from places not meant for human habitation, emergency shelters, safe havens, or institutions where they resided for 90 days or less and originally came from places not meant for human habitation, safe havens, or emergency shelters; or 2. meet the criteria of paragraph (4) of the definition of homeless at 578.3. (See attachments)

b. Programmatic requirements- We prioritize rapid placement and stabilization in permanent housing and do not have service participation requirements or preconditions.

d. Forms and Documentation

- a. Client screening and eligibility forms- See attachment J
- b. Data collection forms- See attachment J

For maximum points, attach completed policies and procedures as **Attachment J**.

Attachments: CE Policies and Procedure (Unsheltered Homeless Criteria), Screening and eligibility forms, data collection forms, Consumer P&P, Grievance Procedure, Staff P&P Acknowledgment form

3. a development disability, with limitations as defined above.

10. Diversion – Diversion is a strategy that prevents households seeking emergency shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

11. Family/Households- includes, but is not limited to the following, regardless of actual or perceived sexual orientation, gender identity, or marital status:

4. A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or
5. A group of persons residing together, and such group includes, but is not limited to:
6. A family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family); (ii) An elderly family; (iii) A near elderly family; (iv) A disabled family; (v) A displaced family; and (vi) The remaining member of a tenant family. 24 CFR 5.403.

12. Homeless – means

Category 1: Literally Homeless An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- (1) an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- (2) an individual or family living in a supervised publicly or privately-operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low- income individuals);
- (3) An individual who is exiting an institution where they resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

Category 2: Imminent Risk of Homelessness An individual or family who will imminently lose their primary nighttime residence, provided that:

- (1) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
 - (a) No subsequent residence has been identified; And
 - (b) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

Category 3: (3) Unaccompanied youth under 25 years of age, or families with Category 3 children and youth, who do not otherwise qualify as homeless under this definition, but who:

- (1) Are defined as homeless under the other listed federal statutes;
- (2) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;
- (3) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and

- (4) Can be expected to continue in such status for an extended period of time due to special needs or barriers

Category 4: Fleeing or Attempting to Flee Domestic Violence Any individual or family who:

- (1) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- (2) Has no other residence; and
- (3) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing. 24 CFR 578.3

13. Homeless Management Information System (HMIS) - The Homeless Management Information System (HMIS) is a centralized electronic database/record keeping system designed to allow homeless service providers to produce unduplicated data.

14. Housing First – Housing First is an approach that offers permanent housing as quickly as possible for people experiencing homelessness. The approach begins with an immediate focus on helping individuals and families get housing. Income, sobriety and/or participation in treatment or other services are not required as a condition for getting housing. All services are voluntary and are not a condition for retaining housing.

15. Housing Interventions – Housing programs and subsidies; these include transitional housing, rapid re-housing, and permanent supportive housing programs, as well as permanent housing subsidy programs.

16. Multi-Site Model for Access Points– model where there are 2 to 4 centralized access points located throughout the CoC at high volume providers where participants can access CE services.

17. Participant- Person at-risk of or experiencing homelessness or someone being served by the coordinated entry process.

18. Permanent Supportive Housing (PSH) – means community-based housing without a designated length of stay paired with supportive services that are provided to assist homeless persons with a disability to live independently, as referenced in 24 CFR Part 578.3.

19. Program – A specific set of services or a housing intervention offered by a provider (e.g. HOPE Emergency Shelter for Families, The Emergency Shelter for Individuals at the Kearney Center, etc.)

20. Provider – Organization that provides services or housing to people experiencing or at-risk of homelessness (e.g. CESC, Inc., Big Bend Homeless Coalition, Refuge House, etc.)

21. Rapid Re-Housing (RRH) – Rapid re-housing is an intervention, informed by a Housing First approach that is a critical part of effective homeless crisis response system. Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

22. Severity of Service Needs –

For the purposes of HUD Notice (CPD-16-11), this means an individual for whom at least one of the following is true:

- a) History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or



APPLICATION FOR SERVICES

Revised 05.29.19

New Consumer

Reactivated Consumer

Date Opened: _____

Staff Initials: _____

Date Closed: _____

Staff Initials: _____

Consumer Name:								
Reason Closed: <input type="checkbox"/> Goals Met <input type="checkbox"/> Moved <input type="checkbox"/> Died <input type="checkbox"/> Withdrew <input type="checkbox"/> Other:								
Social Security:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		E-mail:				
Address:				City/Zip:				
County:		Telephone:		Birth date:				
Emergency Contact Person:				Phone:				
Program:	<input type="checkbox"/>	ADM	<input type="checkbox"/>	High School High Tech	<input type="checkbox"/>	ILP	<input type="checkbox"/>	ATI/Nursing Home Diversion
	<input type="checkbox"/>	Deaf Services	<input type="checkbox"/>	VOCA	<input type="checkbox"/>	HUD	<input type="checkbox"/>	SHIP
Disability:	<input type="checkbox"/>	Mental	<input type="checkbox"/>	Physical	<input type="checkbox"/>	Visual	<input type="checkbox"/>	Multiple
	<input type="checkbox"/>	Cognitive	<input type="checkbox"/>	Hearing	<input type="checkbox"/>	Other:		
Race:	<input type="checkbox"/>	African-American	<input type="checkbox"/>	Caucasian	<input type="checkbox"/>	Hawaiian/Pacific Islander		
	<input type="checkbox"/>	Asian	<input type="checkbox"/>	Native American/ Alaskan				
Ethnicity:			<input type="checkbox"/> Hispanic			<input type="checkbox"/> Non-Hispanic		
Disability (P=Primary, S=Secondary) Check all that apply:								
<input type="checkbox"/>	AD/HD	<input type="checkbox"/>	Chemical Dependency	<input type="checkbox"/>	Head Injury (not TBI)	<input type="checkbox"/>	Physical – other	
<input type="checkbox"/>	Alzheimer's	<input type="checkbox"/>	Cerebral Palsy	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>	Post Polio	
<input type="checkbox"/>	Amputation	<input type="checkbox"/>	Chronic Fatigue Syndrome	<input type="checkbox"/>	Learning Disability	<input type="checkbox"/>	Sickle Cell	
<input type="checkbox"/>	Arthritis	<input type="checkbox"/>	Deaf/Hearing Impaired	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>	Speech Impediment	
<input type="checkbox"/>	Asperger Syndrome	<input type="checkbox"/>	Digestive Disease	<input type="checkbox"/>	MH/Other	<input type="checkbox"/>	Spina Bifida	
<input type="checkbox"/>	Autism	<input type="checkbox"/>	Developmental/MR	<input type="checkbox"/>	Muscular Dystrophy	<input type="checkbox"/>	Spinal Cord Injury	
<input type="checkbox"/>	Blind/Visually Impaired	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Multiple Sclerosis	<input type="checkbox"/>	Stroke	
<input type="checkbox"/>	Cancer	<input type="checkbox"/>	Eating Disorder	<input type="checkbox"/>	Neurological – Other	<input type="checkbox"/>	TBI (Traumatic Brain Injury)	
<input type="checkbox"/>	Cardio/Pulmonary	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>	Orthopedic	<input type="checkbox"/>	Other	
Request to be added to mailing list?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	Email:			
Has the consumer been a crime victim?			<input type="checkbox"/> Yes	<input type="checkbox"/> No				
Referred to Victim Services Coordinator ?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, why?			
Referred to Ability1st by:								
Verifying Source of Disability:			<input type="checkbox"/> Self	<input type="checkbox"/> Other:	Verifying Staff:			
Please describe any concerns or issues you have related to your disability:								
What long term goal would you like to accomplish with Ability1st's services?								

**CENTER FOR INDEPENDENT LIVING OF NORTH FLORIDA, INC.
GRIEVANCE AND COMPLAINT PROCEDURES**

As a consumer of *Ability1st*, you have the right to file a complaint or grievance **at any time** with Disability Rights Florida, Client Assistance Program (CAP). You may contact CAP at the following address or phone number: **Disability Rights Florida, 2473 Care Drive, Suite 200, Tallahassee, Florida 32308; (800) 342-0823 toll Free; (850) 488-9071 (Voice) or (850) 488-8640 (fax).**

The following internal procedures have been developed for consumers who are not satisfied with *Ability1st* services or staff, and wish to address those issues within the agency:

1. Discuss the matter directly with the staff member that you feel is not assisting you.
2. If not satisfied, then submit a written or taped statement of your grievance to the Program Coordinator/Director, who will meet with you to hear the complaint.
3. If this person is unable to resolve the complaint, the Executive Director of the Agency will hear the matter and make a decision within two weeks.
4. If still not satisfied, you can then submit a written or taped statement to the Board of Directors, who will make a final decision within one month.

***Ability1st* serves people regardless of race, religion, disability, ethnicity, sexual orientation, gender or political affiliation.**

AGREEMENT OF UNDERSTANDING

Eligibility Criteria: *Ability1st*, the Center for Independent Living of North Florida, Inc., is a non-profit organization that provides services to persons with physical, mental, and/or emotional disabilities. Services are available to assist persons with disabilities in achieving greater independence in daily living.

***Ability1st* provides core Independent Living Services** consisting of information and referral, independent living skills training, peer support, advocacy, and accessibility services. These services are provided through a variety of specific programs. (For information on any of the programs offered by *Ability1st*, please refer to the attached brochures or discuss additional services with an *Ability1st* staff member.)

As a consumer of *Ability1st*, an individual Independent Living Plan will be developed with a staff member to assist you in achieving your independent living goals. If you choose not to develop an Independent Living Plan, you must sign a waiver. Your goals will be reviewed periodically. A staff member will explain this process. If you choose not to follow through with the identified Independent Living Plan, you will be contacted to determine if you wish to inactivate your Consumer Services Record. You will always have the option to re-open your file upon request for any additional services.

Confidentiality: All records and information are held confidential by *Ability1st*. Release of information to any person, agency or organization will be done only through a written release signed by you for the express purpose of obtaining services on your behalf or to further your Independent Living goals.

There are three occasions when our agency may be required to release information without your expressed consent, as follows:

- By court order or lawful subpoena,
- In the event you report an intention to harm yourself or others,
- In the event you report the abuse or neglect of a child, aging adult, or person who is disabled.

Non-Discrimination: *Ability1st* provides services to individuals regardless of race, ethnicity, religion, sexual orientation, disability or political affiliation.

As a consumer of *Ability1st*, there are many consequences that occur as the result of obtaining or improving your employment status. Specifically, any change or increase in earned income may affect your Cash Assistance or Health Insurance/Medicaid benefits being received. It is your responsibility to contact the Social Security Administration, Department of Children and Families, and/or any community agencies necessary, to report the initiation of an active search for or upon obtaining employment. ***Ability1st* is not responsible for any loss of benefits, cash and/or insurance due to your failure to report pertinent information to the appropriate agencies/providers.**

VOTER REGISTRATION PREFERENCE

Please check next to one of the statements below. If you do not check next to a statement, you will be considered to have decided not to register to vote or update a voter registration at this time.

- I would like to apply to register to vote.
- I am already registered to vote, and I don't need to register now.
- I have already registered to vote and would like to update my registration record.
- I do not want to apply to register to vote at this time.
- Not applicable -or- Rights Restored
- I am 17 or younger.

____ If you choose to register to vote at this time, please initial that you were given a voter registration form.



Ability 1st Case Management Agreement

Name: _____

Please review the items below and INITIAL in the appropriate boxes. Please wait to sign this form in front of a staff member.

Initial

	I agree to work on a housing plan and an independent living plan with my case manager.
	A copy of the "Grievance Procedure" was presented to me, and I have no questions.
	A copy of the "Agreement of Understanding" was presented to me, and I have no questions.
	I was provided the opportunity to update my voter registration preferences.
	I certify that all information provided is true and complete to the best of my knowledge.
	If I have an appointment, I understand that I need to cancel it at least 24 hours in advance. If I arrive over 15 minutes late, it may be considered a no-show and I understand that I may be rescheduled.
	I understand that this interview does not guarantee that Ability 1st will be able to assist me with my needs.
	I understand that if I am asked to submit required documents, I must return all necessary documents to the case manager within five working days from the requested date, or my case may be closed and/or services may be delayed.

Consumer Signature

Date

Staff Member Signature

Date



Rapid Rehousing Intake Form

Begin with the head of household and list everyone who will reside in the potential unit:

First Name	Last Name	M.I.	D.O.B.	SS#

Phone number: _____

What type of rapid rehousing assistance is being requested?

- Application fee \$ _____
- Security deposit \$ _____
- First month's rent \$ _____
- Utility arrears/deposits \$ _____
- Moving costs \$ _____
- Hotel/Motel costs \$ _____
- Other: _____
- _____
- _____

NEEDS:

1. _____
2. _____
3. _____

GOALS:

1. _____
2. _____
3. _____

Ability1st

1823 Buford Court ♦ Tallahassee, Florida 32308
850-575-9621 (voice) ♦ 850-575-5740 (fax) ♦ 850-576-5245 (TDD) ♦ ability1st@ability1st.info

Rapid Re-Housing Program: HOMELESSNESS CERTIFICATION

Applicant Name(s): _____ Number of adults in the household: _____

This document is to certify that the above named individual or household currently meets homelessness criteria based on information about current living situation and staff signatures.

Living Situation (Please check one):

Emergency Shelter (Name): _____

Transitional Housing (Name): _____

Place not meant for human habitation (describe): _____

Other: _____

Start and end date of residence: _____

Agency Staff Printed Name & Title: _____

Phone: _____

Agency Staff Signature: _____ Date: _____

I certify that the above statements about my living situation are true and complete. If they are not accurate or complete, please describe your situation below:

Applicant Signature: _____ Date: _____

Rapid Re-housing Staff: Documentation of attempts made for third-party verification:

Rapid Re-housing Staff Signature: _____ Date: _____



Rapid Re-Housing Program Certification of Income Eligibility

Applicant Name(s) : _____

Gross annual income will be used to determine the upper income limits for eligibility. Annual income includes but is not limited to the types of income listed below. Please check the box of any sources of income that you receive and enter the amounts in the table below.

- The gross amount of income earned before taxes and deductions.
- The net income earned from the operation of a business, i.e., total revenue minus business operating expenses. This also includes any withdrawals of cash from the business or profession for your personal use.
- Monthly interest and dividend income credited to an applicant's bank account and available for use.
- The monthly payment amount received from Social Security, annuities, retirement funds, pensions, disability, and other similar types of periodic payments.
- Any monthly payments in lieu of earnings, such as unemployment, disability compensation, SSI, SSDI, and worker's compensation.
- Monthly income from government agencies **excluding** amounts designated for shelter, utilities, WIC, food stamps, and childcare.
- Alimony, child support, and foster care payments received from organizations or from persons not residing in the dwelling.
- All basic pay, special pay and allowances of a member of the Armed Forces excluding special pay for exposure to hostile fire.

Please provide any of the following documentation as proof that you receive the income listed below:

- A letter from employer;
- Two pay stubs or other check stubs dated within the past month that includes the net and gross pay before and after tax and withholdings;
- Statements of benefits, such as social security statements;
- Bank statements from the previous three months.

Type of Documentation	Source	Amount	Frequency
Total Gross Monthly Income (before taxes)			
Total Gross Annual Income (above x 12)			

How many people (including yourself) are in your household? _____

What is 30% of your AMI Area Median Income based on your household size (see table below)? _____

30% AMI	1	2	3	4	5	6
---------	---	---	---	---	---	---

Leon	16,050	18,350	21,960	26,500	31,040	35,580
------	--------	--------	--------	--------	--------	--------

Net monthly income (after taxes and deductions) along with the total cost of basic monthly expenses will be used to determine the lower limits for income eligibility.

Source	Amount
Total Net Monthly Income (after taxes)	
Total Basic Monthly Expenses (from budget)	
Net monthly income – monthly expenses	

Is your income likely to change in the next three months? Yes No

If so, in what way? _____

Are your expenses likely to change in the next three months? Yes No

If so, in what way? _____

Current Budget	Amount
A) How much money do you have right now in a savings account, checking account or otherwise?	
B) How much money will you earn between now and one month from today?	
C) Total Amount (add A + B):	
D) Amount needed to cover basic expenses between now and one month from today (other than move-in costs)?	
Total amount available to cover move-in costs (C – D):	
If you have an outstanding utility bill, how much is it?	

I certify that the information I have provided about my income and expenses is true and complete and is likely to represent my financial situation for the next 3 months:

Applicant Signature: _____

Date: _____

Staff Verification

- The applicant has provided sufficient documentation to verify their current income and financial situation.
- Income of applicant is at or below 30% AMI for their household size.
- The rapid re-housing specialist has met with the client and determined that their monthly income is sufficient to cover basic family expenses.
- The rapid re-housing specialist has met with the client and determined that their monthly income is not sufficient to cover basic family expenses.

Notes: _____

Staff Signature: _____ Date: _____

HMIS Data Collection Template for Project ENTRY—CoC Program

updated 10/11/2016 rw

CLIENT LOCATION [All clients]: **FL-506** (This code identifies the Big Bend CoC region)

COUNTY OF RESIDENCE [All clients]

<input type="checkbox"/> Franklin	<input type="checkbox"/> Gadsden	<input type="checkbox"/> Jefferson	<input type="checkbox"/> Leon	<input type="checkbox"/> Liberty
<input type="checkbox"/> Madison	<input type="checkbox"/> Taylor	<input type="checkbox"/> Wakulla	<input type="checkbox"/> Other: _____	

LENGTH OF TIME ON STREET, IN AN EMERGENCY SHELTER, OR SAFE HAVEN [Head of household and Adults]

Status Documented? Yes No

<p>Continuously Homeless for at Least One Year</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused	<p>Total Number of Months Homeless in the Past Three Years</p> <input type="checkbox"/> If 0-12 months, specify #: _____ <input type="checkbox"/> More than 12 months <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused
<p>Number of Times the Client has been Homeless in the Past Three Years (do not include the current episode)</p> <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused	<p>Number of Months Continuously Homeless Immediately Prior to Project Entry (this current episode)</p> <p>[Integer]: _____</p>

Does the client have a disabling condition? [All clients] Yes No Client doesn't know Client refused

Documentation of disabilities and severity on file? Yes No

[Mark "x" for all disabilities and respond to last four columns with "yes/no", and a start date]

Disability Type	Disability Determination							
	Yes	No	Client doesn't know	Client refused	Impairs ability to live independently?	Receiving services or treatment?	Long term condition?	Approximate Start Date of condition(s)
Alcohol Abuse (only)								
Both Alcohol and Drug abuse								
Chronic Health Condition								
Developmental Condition								
Drug Abuse (only)								
HIV or AIDS								
Mental Health Problem								
Physical Condition								

HMIS Data Collection Template for Project ENTRY—CoC Program

updated 10/11/2016 rw

RESIDENCE PRIOR TO PROJECT ENTRY (Mark "x" for the appropriate living condition)

HOMELESS SITUATIONS	INSTITUTIONAL SITUATIONS	TRANSITIONAL AND PERMANENT HOUSING SITUATIONS
<input type="checkbox"/> Place not meant for habitation	<input type="checkbox"/> Foster care home or foster care group home	<input type="checkbox"/> Hotel/motel paid for without emergency shelter voucher
<input type="checkbox"/> Emergency Shelter, including hotel/motel paid for with ES voucher	<input type="checkbox"/> Hospital or other residential non-psychiatric medical facility	<input type="checkbox"/> Owned by client, no ongoing housing subsidy
<input type="checkbox"/> Safe Haven	<input type="checkbox"/> Jail, prison, or juvenile detention center	<input type="checkbox"/> Owned by client with ongoing housing subsidy
<input type="checkbox"/> Interim Housing	<input type="checkbox"/> Long term care facility or nursing home	<input type="checkbox"/> Permanent housing for formerly homeless persons (e.g., CoC Project, HOPWA PH)
<input type="checkbox"/> Client doesn't know	<input type="checkbox"/> Psychiatric hospital or other psychiatric facility	<input type="checkbox"/> Rental by client, no ongoing housing subsidy
<input type="checkbox"/> Client refused	<input type="checkbox"/> Substance abuse treatment facility or detox center	<input type="checkbox"/> Rental by client, with VASH subsidy
		<input type="checkbox"/> Rental by client, with GPD TIP subsidy
		<input type="checkbox"/> Rental by client, with other ongoing housing subsidy
		<input type="checkbox"/> Residential project or halfway house with no homeless criteria
		<input type="checkbox"/> Staying or living in a family member's room, apartment, or house
		<input type="checkbox"/> Staying or living in a friend's room, apartment, or house
		<input type="checkbox"/> Transitional housing for homeless persons (including homeless youth)

LENGTH OF STAY IN PREVIOUS PLACE [Head of household and adults]

- One night or less
 2-6 nights
 One week or more; less than one month
 One month or more; less than 90 days
 90 days or more; less than one year
 One year or longer
 Client doesn't know
 Client refused

Client entering from the streets, ES (Emergency shelter), or SH (Safe Haven)? Yes No

If Yes, for "client entering from streets, ES or SH"

Approximate Start Date [of the current episode]: _____/_____/_____

Regardless of where they stayed last night—

Number of times the client has been on the streets, in ES or SH in the past three years, including today?

- One time
 Two times
 Three times
 Four or more times
 Client doesn't know
 Client refused

Total number of months homeless on the streets, in ES, or SH in the past three years?

- One month (this is the first month)
 Client doesn't know
 Client refused

- 2
 3
 4
 5
 6
 7
 8
 9
 10
 11
 12
 More than 12 months

Domestic Violence Victim/Survivor?

- Yes
 No
 Client doesn't know
 Refused

If yes for "domestic violent victim/survivor: **When experience occurred?**

- Within the past three months
 3-6 months ago (excluding six months exactly)
 6-12 months (excluding one year exactly)
 More than a year ago
 Client doesn't know
 Client refused

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Covered by health Insurance?

Yes No

Client doesn't know

Client refused

[Answer 'yes' or 'no' for each health insurance source with an 'x'. Answer 'no' for sources that are not currently active]

Health Insurance Type	Covered?	
	YES	NO
Medicaid		
Medicare		
State Children's Health Insurance Program		
Veteran's Administration (VA) Medical Services		
Employer-provided Health Insurance		
Health insurance obtained through COBRA		
Private Pay Health Insurance		
State Health Insurance for Adults		
Indian Health Services Program		
Other (please indicate):		

Income from any source? Yes No Client doesn't know Client refused

Total monthly income (indicate "0" if no income): \$ _____

Source of Income	Receiving Income Source?	
	Yes (if yes, indicate exact or approximate amount)	No
Alimony or other spousal support	\$	
Child support	\$	
Earned income (i.e. employment income)	\$	
General Assistance (GA)	\$	
Other source (if yes, specify):	\$	
Pension or retirement income from former job	\$	
Private disability insurance	\$	
Retirement income from Social Security	\$	
Supplemental Security Income (SSI)	\$	
Social Security Disability Income (SSDI)	\$	
Temporary Assistance for Needy Families (TANF)	\$	
Unemployment Insurance	\$	
VA Non-Service-Connected Disability Pension	\$	
VA Service-Connected Disability Compensation	\$	
Worker's Compensation	\$	

Non-cash benefit from any source? Yes No Client doesn't know Client refused

Non-cash Benefit Source	Currently Receiving Benefit?	
	Yes	No
Special Supplemental Nutrition Assistance Program (SNAP)	Amount: \$	
Special Supplemental Nutrition Assistance Program for Women, Infants, and Children (WIC)		
TANF Child Care Services (or use local name):		
TANF transportation services (or use local name):		
Other TANF-Funded services (or use local name)		
Section 8, Public Housing, or other rental assistance		
Temporary rental assistance. If yes, specify source:		
Other Source (specify):		

In Permanent Housing? Yes No

Residential Move-in Date: _____/_____/_____

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FOR TEXT FIELDS, USE BLOCK LETTERS. OTHERWISE, MARK APPROPRIATE BOXES WITH AN "X"
Fill out separate form for each household member and attach to project entry template.

PROJECT ENTRY DATE (e.g., 10/10/2016) [All clients]

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month			Day			Year			

CLIENT (name or other identifier)

DESTINATION [Head of household and adults]

<input type="checkbox"/> Deceased	<input type="checkbox"/> Rental by client, with GPD TIP housing subsidy
<input type="checkbox"/> Emergency shelter, including hotel/motel paid for with emergency voucher	<input type="checkbox"/> Rental by client, with other ongoing housing subsidy (Specify):
<input type="checkbox"/> Foster care home or foster care group home	<input type="checkbox"/> Safe Haven
<input type="checkbox"/> Hospital or other residential non-psychiatric medical facility	<input type="checkbox"/> Staying or living with family, permanent tenure
<input type="checkbox"/> Hotel/motel paid for without emergency shelter voucher	<input type="checkbox"/> Staying or living with family, temporary tenure (e.g. room, apartment, or house)
<input type="checkbox"/> Jail, prison, or juvenile detention facility	<input type="checkbox"/> Staying or living with friends, permanent tenure
<input type="checkbox"/> Long-term care facility or nursing home	<input type="checkbox"/> Staying or living with friends, temporary tenure
<input type="checkbox"/> Moved from one HOPWA funded project to HOPWA TH	<input type="checkbox"/> Substance abuse treatment facility or detox center
<input type="checkbox"/> Owned by client, no ongoing housing subsidy	<input type="checkbox"/> Transitional housing for homeless persons (including homeless youth)
<input type="checkbox"/> Owned by client with ongoing housing subsidy	Other (please describe destination):
<input type="checkbox"/> Permanent housing for formerly homeless persons (such as SHP, S+C, or SRO Mod Rehab)	<input type="checkbox"/> No exit interview completed (e.g. client 'disappeared')
<input type="checkbox"/> Place not meant for habitation (e.g. vehicle, abandoned building, bus/train/subway station/airport, streets/parks)	<input type="checkbox"/> Client doesn't know
<input type="checkbox"/> Psychiatric hospital or other psychiatric facility	<input type="checkbox"/> Client refused
<input type="checkbox"/> Rental by client, no ongoing housing subsidy	
<input type="checkbox"/> Rental by client, with VASH housing subsidy	

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Income from any source? Yes No Client doesn't know Client refused

Total Monthly Income: \$ _____

Source of Income	Receiving Income Source?	
	Yes (if yes, indicate exact or approximate amount)	No
Alimony or other spousal support	\$	
Child support	\$	
Earned income (i.e. employment income)	\$	
General Assistance (GA)	\$	
Other source (if yes, specify):	\$	
Pension or retirement income from former job	\$	
Private disability insurance	\$	
Retirement income from Social Security	\$	
Supplemental Security Income (SSI)	\$	
Social Security Disability Income (SSDI)	\$	
Temporary Assistance for Needy Families (TANF)	\$	
Unemployment Insurance	\$	
VA Non-Service-Connected Disability Pension	\$	
VA Service-Connected Disability Compensation	\$	
Worker's Compensation	\$	

Non-cash benefit from any source? Yes No Client doesn't know Client refused

Non-cash Benefit Source	Currently Receiving Benefit?	
	Yes	No
Special Supplemental Nutrition Assistance Program (SNAP)	Amount: \$	
Special Supplemental Nutrition Assistance Program for Women, Infants, and Children (WIC)		
TANF Child Care Services (or use local name):		
TANF transportation services (or use local name):		
Other TANF-Funded services (or use local name)		
Section 8, Public Housing, or other rental assistance		
Temporary rental assistance. If yes, specify source:		
Other Source (specify):		

Covered by health insurance?

Yes No

Client doesn't know

Client refused

[Indicate 'yes' or 'no' for each health insurance type with an "x". Answer "no" for sources that are not currently active]

Health Insurance Type	Covered?	
	YES	NO
Medicaid		
Medicare		
State Children's Health Insurance Program		
Veteran's Administration (VA) Medical Services		
Employer-provided Health Insurance		
Health insurance obtained through COBRA		
Private Pay Health Insurance		
State Health Insurance for Adults		
Indian Health Services Program		
Other (please indicate):		

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Does the client have a disabling condition? *[All clients]* Yes No Client doesn't know Client refused

Documentation of disabilities and severity on file? Yes No

[Mark "x" for all disabilities and respond to last four columns with "yes/no", and a start date]

Disability Type	Disability Determination							
	Yes	No	Client doesn't know	Client refused	Impairs ability to live independently?	Receiving services or treatment?	Long term condition?	Approximate Start Date of condition(s)
Alcohol Abuse (only)								
Both Alcohol and Drug abuse								
Chronic Health Condition								
Developmental Condition								
Drug Abuse (only)								
HIV or AIDS								
Mental Health Problem								
Physical Condition								

Domestic Violence Victim/Survivor?

Yes No Client doesn't know Refused

If yes for "domestic violent victim/survivor: When experience occurred?

Within the past three months 3-6 months ago (excluding six months exactly) 6-12 months (excluding one year exactly)
 More than a year ago Client doesn't know Client refused

HMIS Data Collection Template for Project ENTRY

HOUSEHOLD MEMBERS <18yrs

(ALL HOUSEHOLD MEMBER 18 AND OLDER SHOULD HAVE THEIR OWN HMIS INTAKE FORM COMPLETED.)

Head of Households' Name: _____

ADDITIONAL HOUSEHOLD MEMBER #: _____

FIRST NAME			MI	LAST NAME		
SOCIAL SECURITY NUMBER _____ - _____ - _____			Date of Birth _____ / _____ / _____ (Age: _____)			
WHAT IS THIS HOUSEHOLD MEMBERS RELATION TO THE HEAD OF HOUSEHOLD? (check one)						
<input type="checkbox"/> Daughter	<input type="checkbox"/> Father	<input type="checkbox"/> Granddaughter	<input type="checkbox"/> Grandfather	<input type="checkbox"/> Grandmother	<input type="checkbox"/> Grandson	
<input type="checkbox"/> Husband	<input type="checkbox"/> Husband and Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Other Non-relative	<input type="checkbox"/> Other relative	<input type="checkbox"/> Self	
<input type="checkbox"/> Significant other	<input type="checkbox"/> Son	<input type="checkbox"/> Step-daughter	<input type="checkbox"/> Step-son	<input type="checkbox"/> Unknown	<input type="checkbox"/> Wife	
<input type="checkbox"/> Wife and Mother						
ETHNICITY: <input type="checkbox"/> Non-Hispanic / Non-Latino <input type="checkbox"/> Hispanic / Latino						
RACE: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American						
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander						
GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender M→F <input type="checkbox"/> Transgender F→M						
<input type="checkbox"/> Client doesn't identify as male, female, or transgender <input type="checkbox"/> Other <input type="checkbox"/> Don't Know <input type="checkbox"/> Refused						
The history of housing/homelessness for household members under 18 years old should mirror the Head of the Household's responses.						
Does additional household member #1 have a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Check all that apply or None Apply: <input type="checkbox"/> Physical disability <input type="checkbox"/> Mental health disability <input type="checkbox"/> Developmental Disability						
<input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Chronic Health Condition <input type="checkbox"/> Drug Abuse <input type="checkbox"/> Other: _____						
Is the physical disability expected to be of long, continued, indefinite duration and substantially impairs the client's ability to live independently? <input type="checkbox"/> YES <input type="checkbox"/> NO						
Documentation of the disability and its severity on file? <input type="checkbox"/> YES <input type="checkbox"/> NO						
Is client currently receiving services/treatment for this disability? <input type="checkbox"/> YES <input type="checkbox"/> NO						
DOES THIS HOUSEHOLD MEMBER HAVE HEALTH INSURANCE? <input type="checkbox"/> YES <input type="checkbox"/> NO						
(IF YES, CHECK ALL THAT APPLY)						
<input type="checkbox"/> Medicaid <input type="checkbox"/> Medicare <input type="checkbox"/> State Children's Health Insurance Program <input type="checkbox"/> Veteran's Administration (VA) Medical Services						
<input type="checkbox"/> Employer-Provided Health Insurance <input type="checkbox"/> Health insurance obtained through COBRA <input type="checkbox"/> Private Pay Health Insurance						
<input type="checkbox"/> State Health Insurance for Adults <input type="checkbox"/> Indian Health Insurance <input type="checkbox"/> Other (specify): _____						



BIG BEND HOMELESS COALITION
HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)
Client Consent To Share Information

updated 04/02/2012

HMIS ID# _____

Agency Name: _____ Program Name: _____

Client Name: _____

Dependent children, if any (first and last names and date of birth)

Purpose of this form: This agency participates in the Homeless Management Information System (HMIS) and works with other agencies to provide services to people in the Big Bend area. When you request or receive services, we may collect data about you and your household such as: your name, date of birth, Social Security Number, gender, ethnicity, race, veteran status, etc.

Client Informed Consent/Authorization for Sharing of Information

By signing this form, I agree that this agency may share my HMIS data with other participating agencies in the Big Bend HMIS and may use my information for lawful purposes mentioned in this agency's client privacy policy and specified in the Big Bend HMIS Privacy Statement. (please check one below)

- I agree that my information can be shared with other agencies.
- I do not agree to have my information shared with other agencies.

How will my data be used?

The ways in which this agency may use or disclose your information within and outside the agency are described in this agency's client privacy policy. You may request a paper copy of this policy from agency staff. The Big Bend HMIS Privacy Statement governs the way your information is handled in the HMIS and this statement is available from this agency and posted at the Big Bend Homeless Coalition website.

How will my data be protected?

We enter your data in a computer program that is protected by passwords and industry-standard encryption technology. Each participating agency agrees to maintain the security and confidentiality of the information. Anyone who violates the agreement is subject to penalties which may include legal action.

How do I benefit by providing the requested information and sharing it with other agencies?

By sharing your information with other agencies, you may be able to avoid being screened again, get services faster, and minimize the number of times you have to tell your "story."

I UNDERSTAND THAT:

- I am not required to sign this consent. If I refuse to sign this consent, my treatment, payment, or eligibility for benefits will not be affected. I may also request a copy of this consent after I sign it.
- This consent form expires in three (3) years. I have the right to revoke this consent at any time by writing to this agency. If I withdraw this authorization in the future, I understand that it will not change the fact that records were shared before that date. I understand that my revocation must be in writing.
- This agency has a written policy that describes ways in which my personal information may be used and disclosed within and outside this agency and I may request a paper copy of that policy from this agency. I acknowledge that I have been given an opportunity to read and/or request a copy of that policy.
- I may also request a paper copy of the Big Bend HMIS Privacy Statement by writing to the Big Bend Homeless Coalition, 2729 W. Pensacola St., Tallahassee, FL 32304.
- I understand that neither this agency, nor the HMIS, can completely control how another participating agency will use or disclose my information that it receives under this consent.

Signature of Client or Guardian

Date

Signature of Agency Witness

Date



Consumer Services Policy and Procedure Manual

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PART I - INTRODUCTION

This manual contains the Consumer Services policies and procedures of Ability1st, the Center for Independent Living of North Florida. This manual is designed to be a working guide and it applies to all employees, volunteers, interns, or any other individual working with Ability1st and engaging in direct contact with consumers. Employees, volunteers, interns, etc., are expected to be familiar with the policies and procedures within this manual, to comply with them and to make an inquiry if the manual is not understood.

The purpose of this manual is to standardize employee practices in providing quality Consumer services to Floridians with disabilities in a six county area including Leon, Wakulla, Gadsden, Jefferson, Madison, and Taylor counties. Ability1st is committed to providing services to all persons with disabilities and their families and to collaborating with other disability-focused organizations in our community to that end.

Ability1st will provide independent living services based on the following principles:

- Consumer Empowerment
- Integration
- Self help
- Personal Choice

The employee base, which is made up of a majority of individuals with disabilities, will empower the consumers they serve to make the crucial decisions as to the direction and the type of services needed and to take an active role in formulating the solution to their service needs. Ability1st employees will utilize and incorporate a team approach to problem solving, which maximizes the capabilities of the consumer and Ability1st employees. The employee will network and work with all pertinent local and state, public and private service providers, with the consumer's consent, in order to provide the necessary services and supports to reach the consumer's goals. This approach will assure that the organization is being economically efficient and programmatically effective.

Our Mission is to empower people with disabilities to live independently and enhance their quality of life.

Our Vision . It is the right of each individual with a disability to live independently and participate actively in the community. Through the leadership of Ability1st, the community will recognize and eliminate all significant barriers, which prevent persons with disabilities from achieving their desired level of independence.

INDEPENDENT LIVING PHILOSOPHY

(Excerpted from the mtstcil.org website)

What is independent living? Independent living is participating in day-to-day life, living where you choose and making decisions that lead to self-determination.

Most Americans take for granted opportunities they have regarding living arrangements, employment situations, means of transportation, social and recreational activities, and other aspects of everyday life.

For many Americans with disabilities, however, barriers in their communities take away or severely limit their choices. These barriers may be obvious, such as lack of ramped entrances for people who use wheelchairs, lack of interpreters or captioning for people with hearing impairments, or lack of Braille or taped copies of printed materials for people who have visual impairments.

Other barriers-frequently less obvious-can be even more limiting to efforts on the part of people with disabilities to live independently, and they are caused by people's misunderstandings and prejudices about disability. These barriers result in low expectations about things people with disabilities can achieve.

People with disabilities not only have to deal with the effects of their disabling conditions, but they also have to deal with both physical and attitudinal barriers. Otherwise, they are likely to be limited to a life of dependency and low personal satisfaction. This need not occur.

Millions of people all over America who experience disabilities have established lives of independence: they fulfill many different roles in their communities, from employers and employees, to marriage partners, parents, students, athletes, politicians, taxpayers-the list is unlimited. In most cases, the barriers facing these people haven't been removed, but these individuals have been successful in overcoming or dealing with them.

Again, what is independent living? Essentially, it is living just like everyone else-having opportunities to make decisions that affect one's life, being able to pursue activities of one's own choosing, and being limited only in the same ways that one's non-disabled neighbors are.

Independent living should not merely be defined in terms of living on one's own, being employed in a job fitting one's capabilities and interests, or having an active social life. Independent living has to do with self-determination. It is having the right and the opportunity to pursue a course of action. And, it is having the freedom to fail and to learn from one's failures just as non-disabled people do.

HISTORY OF INDEPENDENT LIVING MOVEMENT

(Excerpted from NCIL; <http://www.ncil.org/about/WhatsIndependentLiving.html>)

Prior to the 1960's, people with significant disabilities were invariably incarcerated in state-run institutions. People with mental illness, developmental disabilities, and sensory or physical disabilities were kept in appalling and inhumane conditions often far worse than criminals were subjected to, even at the time. Deinstitutionalization is a process that began to occur in the 1960's in which people with significant disabilities were gradually released from institutions to return to their communities where treatment was to be available. This process created for the first time in American history an opportunity, an imperative, for people with disabilities to live free and independent lives. From this, a community and a culture with history, values, and an objective were born. As with any minority, the real battle would come in winning the support of the public. The movement toward deinstitutionalization came about through disability activism, but another historically important factor was the emergence of new technologies and medications, coupled with an expectation of even better assistive technology. Although deinstitutionalization was a victory for the disability community, the public did not yet believe that people with disabilities were entirely entitled to their civil and human rights regardless of disability.

Emancipation from *state-run* institutions came from the disability community amidst massive Civil Rights Movements nationally and abroad. Leaders of the disability community began to realize that our human rights and civil liberties would come only as we fought for them, and that we would have to fight in the street to have our voice heard in Washington in order to enact anti-discrimination and civil rights laws that applied to people with disabilities directly. With most state-run institutions closed, people with significant disabilities became more visible, and more audible, too. Bust society's unwelcoming attitude did not change. This situation created an opportunity for the private medical industry to appropriate the position once held by state-run institutions. Nursing home expansion allowed society to avoid integration of people with disabilities while maintaining a clean conscience, as the nursing home industry began to spin the issue as a social welfare cause. All the while, they pushed policies that would make it almost impossible for a person to leave a nursing home one they had entered. The nursing home industry worked to enact laws that created an —institutional bias, which means that the government will pay for needed services for a person residing in a nursing home but not for the same services provided in one's own home, even when the cost is less. For people who depend on these services, this effectively means that they may never be able to leave a nursing home. With people with disabilities out of sight and out of mind, segregation remained a viable option for America and the nursing home industry became a formidable and affluent opponent for the Disability Rights Movement.

Beginning in the 1940's and 50's, people with disabilities began to organize for political change. Leagues developed for the Blind, the Deaf, and the Physically Handicapped, advocated for an end to discrimination in Federal programs, education, and employment. Disability-specific advocacy efforts initiated and pioneered the Disability Rights Movement and realized significant accomplishments in opportunities available to people with disabilities, but real political power was achieved with the dawn

of the Independent Living Movement, which is founded in the belief that people with disabilities, regardless of the form, have a common history and a shared struggle, that we are a community and a culture that will advance further banded together politically.

The Independent Living Movement articulated and embodied the values of the Disability Rights Movement. One critical aspect of Independent Living philosophy is the conversion from the Medical Model to the Independent Living Model (or Social Model) of understanding disability, which gave people with disabilities a new way of understanding our identities as people with disabilities. As it developed and took hold the political identity of people with disabilities cemented itself. Protests, occupations, and other acts of civil disobedience intended to gain basic civil rights for people with disabilities were held nation-wide. Heroes of the Disability Rights Movement realized sweeping legal victories over the years, including the overriding of President Nixon's veto of the Rehabilitation Act by Congress and the Individuals with Disabilities Education Act (formerly the Education of all Handicapped Children Act), which requires that children with disabilities be educated in the least restrictive environment possible.

Ed Roberts and other disability activists founded the first recognized and funded Center for Independent Living in Berkeley, California. Centers for Independent Living were created to be run by and for people with disabilities, and offer support, advocacy, and information on empowerment in the attainment of independence from a peer viewpoint, a perspective that was hitherto excluded from participation in the discussion and execution of —services for the disabled.¶

Ed Roberts is often referred to as the —Father of Independent Living.¶ Ed faced audacious discrimination in his educational pursuits. He first encountered adversity in high school, advocating for the physical education and driving license requirements to be waived, and the diploma he had earned granted. The California Department of Rehabilitation refused his request for financial aid to attend college on the basis that he was —too disabled¶ to work. The University of California accepted him as a student, but later rescinded their decision with the comment by on Dean, —We've tried cripples before and it didn't work.¶ After going public with his story, both the University and the Department of Rehabilitation reconsidered their positions and Ed eventually went on to become head of the Department of Rehabilitation, the very same agency that had dismissed him as unemployable fifteen years earlier.

After winning her right to a public education after having been declared a Fire Hazard, Judy Heumann faced similar discrimination in access to employment in her field. The New York City Board of Education refused to allow her to teach on the basis that she could not pass a physical education exam. She eventually persuaded the Board that their decision was discriminatory and taught elementary school for three years before going on to found Disabled in Action in New York.

"When I actually applied for my teaching credentials you had to take three exams, a written exam, an oral exam and a medical exam. All three of those exams were given in completely inaccessible buildings. So I had to be carried up 1 to 2 flights of stairs depending on where I had to go; I passed the oral exam and I passed the written exam but I failed the medical exam and the board wrote down that I failed because I couldn't walk and so we sued and when I sued the Board of Ed that was the beginning of many things. ...In essence what they were saying was I was a fire hazard. I couldn't walk. So suing the Board of Ed and getting that credential and actually teaching really helped me realize that *...when you begin to push, push, push, in many cases you can beat the system.*"

Across the country, other Centers for Independent Living began to grow simultaneously in Houston, Boston, and Chicago. Wade Blank and the Atlantis Community established ADAPT, an activist organization that reformed access for people with disabilities to public transit and continues its fight for deinstitutionalization today. These are often remembered as the glory days of the Disability Rights Movement, fondly recalled by activists, and rightly so, as they carried out some of the most daring protests in American Civil Rights history, including the longest occupation of a Federal building in history April 5th through May 1st, 1972. In conjunction, rallies and sit-ins were held in nine cities across the country, and the action led to the release of the regulations of the Rehabilitation Act of 1973, which bans discrimination against people with disabilities in federally funded programs.

Independent Living philosophy emphasizes consumer control, the idea that people with disabilities are the best experts on their own needs, having crucial and valuable perspective to contribute and deserving of equal opportunity to decide how to live, work, and take part in their communities, particularly in reference to services that powerfully affect their day-to-day lives and access to independence.

As the Independent Living philosophy took hold nationally and the Disability Rights Movement gained acceptance and political influence, a grassroots movement for a comprehensive disability rights law was implemented. The Americans with Disabilities Act, which prohibits discrimination on the basis of disability in employment, public transportation, places of business and other services available to the public was signed into law July 26, 1990 by President George H.W. Bush.

Though the Act is often misinterpreted, the preamble states its intent clearly, "Enactment of the ADA reflects deeply held American ideals which treasure the contributions which individuals can make when free from arbitrary, unjust, or outmoded societal attitudes and practices that prevent the realization of their potential. The ADA reflects a recognition that the surest path to America's continued vitality, strength and vibrancy is through the full realization of the contributions of all of its citizens. The Disability Rights Movement has achieved a sizable presence only over the course of the past twenty years. In contrast to earlier conceptions of disability, it presupposes the human potential of people with disabilities, maintains that people with disabilities have the competence and should have the right to govern their lives, and holds that the

proper goals of public policy are the creation of meaningful equal opportunity encouraging the growth and integration of people with disabilities into society. And it maintains that the elimination of a multitude of attitudinal, communication, transportation, policy and physical barriers based on erroneous assumptions about disability will result in a substantial enhancement of the productive integration of people with disabilities into our society."

Today, Centers for Independent Living and other Disability Rights organizations fight similar battles to ensure that the rights of individuals with disabilities, as well as people with disabilities as a class are protected. Even with the passage of the Americans with Disabilities Act, people with disabilities often find that advocacy and support from the disability community and the Disability Rights Movement is an essential element in enforcement of the civil rights law. Though the ADA provides a useful legal groundwork for understanding the rights guaranteed to Americans through a disability perspective, society as a whole still often embraces the negative and paternalistic attitudes that restrict us from participating fully in our communities and gaining access to basic civil rights, such as voting, opportunity for gainful employment, and equal education.

The Disability Rights Movement today is not a cause among a multitude of other causes, with an agenda simply competing for attention of lawmakers. Many of the issues we fight for have strong opposition and powerful lobbyists in the for-profit sector. It is imperative that the Disability Rights Movement and leaders of the Independent Living Movement remain dedicated to the community values, objectives, and unity built on our history and experiences, lest we lose the fundamental civil and human rights we have won, though not fully seized.

10 KEY ELEMENTS OF INDEPENDENT LIVING PHILOSOPHY

Civil Rights – equal rights and opportunities for all; no segregation by disability type or stereotype.

Consumerism – a person (—consumer or —customer) using or buying a service or product and decides what is best for him/herself.

De-institutionalization – no person should be institutionalized (formally by a building, a program, or by family life) on the basis of a disability.

De-medicalization – individuals with disabilities are not —sick, as prescribed by the assumptions of the medical model and do not require help from certified medical professionals for daily living activities.

Self-help – people learn and grow by discussing their needs, concerns, and issues with people who have had similar experiences; this may include —professionals with or without disabilities but are not the only source of the help provided.

Advocacy – systemic, systematic, long-term, and community-wide change activities are needed to ensure that people with disabilities benefit from all that society has to offer.

Barrier-removal – in order for civil rights, consumerism, de-institutionalization, de-medicalization, and self-help to occur, architectural, communication and attitudinal barriers must be removed.

Consumer control – the organizations best suited to support and assist individuals with disabilities are governed, managed, employed and operated by individuals with disabilities.

Cross-disability – activities conducted by organizations supporting independent living philosophy must be cross-disability in approach, meaning work is carried out by people with different types of disabilities for the benefit of all persons with disabilities.

Inclusion – after barriers are removed and legal rights instituted, society in its broadest sense appreciates and includes people with disabilities in all its forms, including institutions of education, employment, housing, recreation, transportation and all other forms of public and private group activity.

DEFINITIONS

Centers for independent living (CILs): are private, nonprofit corporations that provide services to maximize the independence of individuals with disabilities and the accessibility of the communities they live in. Centers are funded in part by the Department of Education, Rehabilitation Services Administration, Independent Living Branch, to provide, among other things, the four core services: Advocacy, Independent living skills training, Information and referral, and Peer counseling.

Consumer: is any individual with a disability who may be a past, present, or future participant in independent living services or one who may indirectly benefit from independent living advocacy efforts. The consumer must agree to participate in an intake process to determine and document eligibility and to determine whether the consumer would like to develop an Independent Living Plan with individualized goals or sign a waiver.

Consumer Control: means getting consumer input on the provision of services and direction on how the CIL is operated. Consumers are also encouraged to be involved in the governing board.

Crisis: A disruption or breakdown in a person's or family's normal or usual pattern of functioning. A crisis cannot be resolved by a person's customary problem-solving resources/skills.

Cross Disability: Ability1st will offer and provide services to people with various disabilities, and assure that services are relevant to all groups.

Disability: a physical or mental impairment that substantially limits one or more of the major life activities of an individual. Major life activities means functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

Primary Disability: includes the disability that causes the most impairment.

Secondary Disability: all other disabilities.

Unusual Incident: any event that could possibly cause a liability to Ability1 st.

Vulnerable Adult: a person age 18 years or older who has a disability or is suffering from the infirmities of aging.

PART II - ETHICS, RIGHTS, AND RESPONSIBILITIES

CIL EMPLOYEE CODE OF ETHICS

1. Ability1st and its employees, volunteers and interns shall behave in a legal, ethical, and moral manner in the conduct of their profession, maintaining integrity, and avoiding behavior that would cause harm to others.
2. Ability1st and its employees, volunteers and interns shall respect the integrity and protect the interests of people and groups with whom they work.
 - Employees will respect the right of consumers to self-determination.
 - Employees will share all information and records, kept on file for a consumer, with that consumer.
 - Employees will always place the interests of consumers above personal interests.
3. Ability1st and its employees, volunteers and interns shall respect the confidentiality of information obtained from consumers and business or other clients in the course of their work.
 - Employees will take reasonable personal action, or inform responsible authorities, or inform those persons at risk, when the conditions or actions of a consumer indicates that there is clear and imminent danger to themselves or others. Employees will inform consumers at the onset of the limits of confidentiality, after advising the consumer that this must be done. Consultation with other professionals is advised.
 - Employees will not forward to another person, agency, business, or potential employer, any confidential information without the written permission of consumers.
 - Employees will ensure that any person who must have access to consumer records will be thoroughly briefed concerning the confidentiality standards to be observed.
4. Ability1st and its employees, volunteers and interns shall expand their knowledge base needed to more effectively serve people with disabilities. Further, when a consumer presents with a disability or barrier to independent living that is not within the realm of experience of the staff person, this staff person will immediately discuss this issue with their supervisor to seek guidance. The staff person may be directed to specific internal/external resources or the consumer may be reassigned to a different staff person more experienced in the relevant area of need.

CIVIL RIGHTS COMPLIANCE

All of Ability1st's practices with consumers will adhere to the following Civil Rights Laws:

- 1964 - Civil Rights Act: Title VI prohibits discrimination on the basis of race, religion, ethnicity, national origin, and creed; later, gender was added as a protected class.
- 1968 - Architectural Barriers Act: prohibits architectural barriers in all federally owned or leased buildings.
- 1973 - Rehabilitation Act: particularly Title V, Sections 501, 503, and 504, prohibits discrimination in federal programs and services and all other programs or services receiving federal funding.
- 1975 - Developmental Disabilities Bill of Rights Act: among other things, establishes Protection and Advocacy services (P & A).
- 1975 - Age Discrimination Act: as amended, prohibits discrimination on the basis of age in programs and activities receiving or benefiting from federal financial assistance.
- 1975 - Education of All Handicapped Children Act (PL 94-142): requires free, appropriate public education in the least restrictive environment possible for children with disabilities. This law is now called the Individuals with Disabilities Education Act (IDEA).
- 1978 - Amendments to the Rehabilitation Act: provides for consumer-controlled centers for independent living.
- 1981 - Omnibus Reconciliation Act, as amended, prohibits discrimination on the basis of gender or religion in programs and activities receiving or benefiting from federal financial assistance.
- 1983 - Amendments to the Rehabilitation Act: provides for the Client Assistance Program (CAP), an advocacy program for consumers of rehabilitation and independent living services.
- 1985 - Mental Illness Bill of Rights Act: requires protection and advocacy services (P & A) for people with mental illness.
- 1988 - Civil Rights Restoration Act: counteracts bad case law by clarifying Congress' original intention that under the Rehabilitation Act, discrimination in ANY program or service that is a part of an entity receiving federal funding--not just the part which actually and directly receives the funding--is illegal.
- 1988 - Air Carrier Access Act: prohibits discrimination on the basis of disability in air travel and provides for equal access to air transportation services.

1988 - Fair Housing Amendments Act: prohibits discrimination in housing against people with disabilities and families with children. Also provides for architectural accessibility of certain new housing units, renovation of existing units, and accessibility modifications at the renter's expense.

1992 - Florida Civil Rights Act: prohibits discrimination on the basis of race, color, religion, gender, national origin, age, disability, or marital status and thereby to protect their interest in personal dignity, to make available to the state their full productive capacities, to secure the state against domestic strife and unrest, to preserve the public safety, health, and general welfare, and to promote the interests, rights, and privileges of individuals within the state.

1990 - Americans with Disabilities Act: provides comprehensive civil rights protection for people with disabilities; closely modeled after the Civil Rights Act and the Section 504 of Title V of the Rehabilitation Act and its regulations.

2008 - Americans with Disabilities Amendments Act: The amendments made it clear that disability was to be defined broadly to cover anyone who faces discrimination because disability. The amendments also list major life activities as opposed to leaving it to interpretation. Major life activities include but are not limited to caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating and working. The act also lists major bodily functions including, but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine and reproductive functions so there can be no ambiguity.

EMPLOYEE-CONSUMER RELATIONSHIPS

Relationships between employees (includes volunteers and interns) and consumers will be characterized first and foremost, by respect, support and assistance in developing the consumer's capacity to meet his/her own personal goals.

It is difficult to draft blanket policies that perfectly apply to all people and all circumstances, especially when peer support is an essential component of service delivery in a CIL. For this reason, employees are encouraged to carefully consider the nature of relationships they develop with all consumers and to seek guidance from other employees and supervisors whenever uncertainties arise about the best course of action.

There are several considerations that must be kept in mind, that have a direct impact on the nature of the relationship that should exist between consumers and employees. These considerations have resulted in the development of the following guidelines concerning the nature of their relationships with consumers.

Guidelines:

- The relationship should, at all times, focus on consumer-identified goals and needs. It is inappropriate for an employee to look to consumers for support and assistance with their own personal and professional issues. Our responsibility is, first and foremost, to our consumers.
- The dignity, autonomy, and personal safety of consumers will be promoted at all times.
- Employees must continually encourage and support consumers' autonomy, decision-making, and self-direction. While employees may provide information, support, and guidance, we must always remember and clearly communicate our conviction that consumers should have absolute authority over their own lives.
- Because many consumers have become disempowered due to their minority status as individuals with disabilities, and because they are in need of services that the Center has the means to provide, employees may be viewed as having a considerable amount of power. Many consumers may have learned that the easiest way to get what you need is to —go alongll. Employees must be continually mindful of their responsibility not to misuse the power they may have over consumers.
- Intimate and or sexual relationships between employees and consumers are expressly prohibited.

- The relationship between employees and consumers may be friendly, and there may be many social situations where employee-consumer interaction may promote or support the consumer's personal and professional goals. Employees are encouraged to develop such friendly relations with consumers, **to the extent that they remain focused on consumer needs.**
- Employees are prohibited from engaging in relationships with consumers when the fulfillment of their own needs is primary to that of the consumer. Employees should seek consultation with their supervisor to clarify their roles and responsibilities in such circumstances.
- Any social activities with consumers outside of Ability1st business hours will generally not be acceptable unless such activity is clearly related to the consumer's needs and the activity has been discussed and approved by a supervisor prior to the event.
- Employees who are members of a profession governed by a Code of Professional Ethics or other similar standard of conduct are obligated to comply with such codes/standards.
- Business relationships such as business investments, partnerships, contracts, or other business transactions with consumers are expressly prohibited.
- However, consumers may become volunteers or employees of Ability1st, when doing so is consistent with the IL goals identified by and/or with an individual consumer.
- Employees will not share personal home or cell phone information with consumers.

CONFIDENTIALITY

All Ability1st employees, volunteers, interns, or any other individuals involved in providing assistance to consumers shall be made aware of the essential nature of confidentiality. Consumers will be informed of their right to confidentiality during the initial contact with Ability1st.

The following guidelines shall be used to ensure the confidentiality of consumer information:

- Identifying consumer information may be shared on an as-needed basis only with Ability1st employees who are directly related to the provision of Independent Living services.
- Consumer information may not be discussed casually with friends, relatives, acquaintances or co-worker in such a manner that would identify the consumer.
- Employees may disclose confidential information when appropriate, with written consent from the consumer (See Appendix ## for sample *Release of Consumer Information* form).
- When information is disclosed, Ability1st employee should disclose only the information that is directly relevant, and the least amount of information necessary to achieve the desired purpose.
- All conversations concerning consumer information (either between employee member and employee member, or between employee member and consumer) must be in private. Communication in public places is only for purposes of exchanging non-sensitive information and for relationship development, not for discussing a consumer's confidential issues.
- Ability1st employees must protect the confidentiality of their consumer's written and electronic records by ensuring they are stored in a secure location.
- Ability1st employees will thoroughly brief any person who must have access to consumer records concerning the confidentiality standards to be observed.

RELEASE OF CONSUMER INFORMATION

All employees, volunteers, interns, or any other individuals involved in providing assistance to consumers must protect the confidentiality of all consumer information obtained in the course of professional service, except in the case of suspected abuse, neglect, or harm to oneself or others, in accordance with all federal and state laws. Consumers will be informed of their right to confidentiality during initial contact with Ability1st. The employee will also explain the conditions for involuntary release of information. Consent to release information shall be time limited and for a specific purpose. There shall be no blank, signed forms in consumer files; all consent to release information forms must be fully completed.

No information shall be released without a signed release from the consumer. Specific requests about consumer progress without express written permission of the consumer will be denied. The release of confidential information shall be evaluated on a need-to-know-basis. The conditions of certain funding constraints allow for contract managers to have access to consumer information.

Confidentiality may not be breached except in the following circumstances:
when the consumer poses imminent danger to him/herself or other;

- when abuse or neglect of a child, elder or disabled adult is reported or suspected;
- court order; or
- in certain situations as a result of court order or a subpoena.

In regards to CIL services that are provided to persons with disabilities subsequent to a lawful court order or by referral to Ability1st from Court personnel: Ability1st may disclose to the Court and related personnel, only information related to the participation in services as required of the consumer by the Court. This may include information related to Competency Restoration status, participation in support services and in acquisition of benefits.

All information that contains confidential consumer information or confidential employee information MUST be shredded prior to disposal.

AGREEMENT OF UNDERSTANDING

Employees will provide all active consumers with an Agreement of Understanding to ensure that consumers fully understand the eligibility criteria, the services they may receive from Ability1st, and the policies regarding confidentiality and non-discrimination. Employees will review the agreement with consumers and then both the employee member and the consumer will sign it. A copy is to be provided to the consumer and the original to be kept in the hard-copy consumer file.

CONSUMER COMPLAINT/GRIEVANCE PROCEDURE

All employees, interns, and volunteers will also make consumers aware of the Consumer Grievance Procedure. A consumer grievance is dissatisfaction expressed by a consumer pertaining to any condition of their service program or any other aspect of the assistance provided by Ability1st. The grieved matter can be connected directly with the provision of service or arising from the interpersonal relationship within Ability1st.

The consumer may also file a complaint at Ability1st. The following are the internal procedures:

- The consumer can discuss the matter with the employee member that he/she feels is not assisting him/her.
- If not satisfied, the consumer may submit a written or taped statement of their grievance to the Assistant Director, who will meet with the consumer to hear their complaint.
- If the Assistant Director is unable to resolve the complaint, the Executive Director of the agency will hear the matter and make a decision within two weeks. If the consumer is not satisfied with the Executive Director's decision, he/she may submit a written statement/tape to the Executive Committee of the Board of Directors, who will make a final decision within one month.

When the desires of the consumer differ from those of a relative, the rights and wishes of the consumer shall take priority if the consumer has attained the age of majority and has not been adjudicated incompetent.

CLIENT ASSISTANCE PROGRAM (CAP)

The Client Assistance Program (CAP) was established by the Rehabilitation Act Amendments of 1984. Persons eligible for assistance under this program are those who are receiving or seeking services under the Rehabilitation Act of 1973, as amended. CAP is free of charge and available to all persons applying for or receiving independent living rehabilitation services, as authorized under the Rehabilitation Act.

CAP is a unit of the Disability Rights Florida. It provides consumers of vocational rehabilitation and independent living services with information and referral, as well as assistance in pursuing legal, administrative, and other available remedies to insure rights under the Rehabilitation Act.

The CAP is available at any time in the independent living process when it is felt that the person can benefit from the services offered by CAP, which include:

- Helping the applicant or client to understand the rehabilitation process.
- Advising applicants and clients of all benefits available to them through Federal and State rehabilitation programs, and their respective rights and responsibilities.
- Assisting applicants and clients in their relationships with projects, programs, and facilities.
- Mediating disputes between applicants and clients and the agency prior to any other action.
- Helping applicants and clients in pursuing legal, administrative, and other available remedies.

All employees, interns, and volunteers must make each consumer aware of the availability of the Client Assistance Program at each of the following stages in the independent living rehabilitation process:

- Application/Initial Interview
- Independent Living Plan Development or Waiver
- Goals Achieved notification

Ability1st consumers may contact Florida's CAP at:

Disability Rights Florida
Client Assistance Program
2473 Care Drive, Suite 200
Tallahassee, FL 32308
850-488-9071
Toll Free: (800) 342-0823
Fax: (850) 488-8640
TDD: (800) 346-4127
<http://www.advocacycenter.org/index.html>

REPORTING OF ABUSE AND NEGLECT

Ability1st employees, interns, and volunteers will report each incident of suspected abuse, abandonment, and or neglect of children or abuse, neglect, exploitation of persons 60 years or older, and adults with disabilities.

In the event that a consumer provides information to an employee member, intern or volunteer, that involves the suspicion of abuse, abandonment, and or neglect of children or abuse, neglect, exploitation of persons 60 years or older, and adults with disabilities, the employee or volunteer will:

Whenever appropriate, inform the consumer of your obligation to report the relevant information to the appropriate authorities, depending on individual circumstances.

Discuss the incident when possible with your immediate supervisor or Executive Director, to ensure compliance with incident reporting.

Make a report of the suspected abuse or neglect by contacting the Florida Abuse Hotline. You should be prepared to provide the following information:

1. Victim name, address or location, approximate age, race and sex;
2. Physical, mental or behavioral indications that the person is infirm or disabled;
3. Signs or indications of harm or injury, including a physical description if possible
4. Relationship of the alleged perpetrator to the victim, if possible. If the relationship is unknown, a report will still be taken if other reporting criteria are met.

Telephone reporters will always be told prior to concluding your conversation, whether the information provided has been accepted as a report.

TELEPHONE: 1-800-96-ABUSE (1-800-962-2873)

TDD: 1-800-453-5145

FAX: 1-800-914-0004

A fax form is available in PDF Format at: <http://www.dcf.state.fl.us/abuse/> and requires that you use Adobe Acrobat to view and print.

For faxed information, notification will be provided only when additional information is needed to accept a report, or when the report does not fall within the jurisdiction of Children & Families. Your fax number must be clearly indicated on your report. Although

you may request confirmation, you can assume that your report was accepted if you provided your fax number and receive no response from the Hotline.

WEBSITE: <http://www.dcf.state.fl.us/abuse/report/>

About the website: This secure website is being provided for you to report suspicions of abuse, abandonment, and or neglect of children or abuse, neglect, exploitation of persons 60 years or older, and adults with disabilities. The Florida Statute requires professionals to make a report of suspected abuse, abandonment, neglect, and or exploitation of children. The Florida Statute requires a person having cause to believe that an elderly or disabled person is in the state of abuse, neglect, and or exploitation to report the information required immediately.

This reporting system is provided for your convenience to report **non-emergency** concerns of abuse and/or neglect. An emergency situation occurs when a child or elderly/disabled person appears to face immediate risk of abuse or neglect that is likely to result in death or serious harm (without intervention). If your concerns meet the definition of an emergency situation: **FIRST**, call 911 or your local law enforcement agency. **SECOND**, contact the Florida Abuse Hotline at 1-800-96ABUSE (1-800-962-2873).

Web Browser Requirements: You must have JavaScript and Popups enabled to complete an abuse report. If you are unable to use JavaScript and/or enable popup windows call the Florida Abuse Hotline at 1-800-96ABUSE (1-800-962-2873) to file your report.

Web sessions will time out after 30 minutes of inactivity.

ADDITIONAL INFORMATION . ABUSE AND NEGLECT REPORTING

As described in Chapters 39 and 415, Florida Statutes, the Florida Department of Children & Families is charged with providing comprehensive protective services for children who are abused, neglected or at threat of harm and vulnerable adults who are abuse, neglected or exploited in the state by requiring that reports of abuse, neglect, threatened harm, or exploitation be made to the Florida Abuse Hotline. In taking action to prevent further harm to the child, any other children living in the home, or a vulnerable adult the Department of Children & Families must preserve the family life of the parents, children, and vulnerable adults to the maximum extent possible. Law enforcement is to take the lead in all criminal investigations and prosecution.

Child - any born, unmarried person less than 18 years old who has not been emancipated by order of the court.

Vulnerable Adult - a person age 18 years or older who has a disability or is suffering from the infirmities of aging.

The Florida Abuse Hotline will accept a report when:

1. There is reasonable cause to suspect that a child
2. who can be located in Florida, or is temporarily out of the state but expected to return in the immediate future,
3. has been harmed or is believed to be threatened with harm
4. from a person responsible for the care of the child.

OR

1. Any vulnerable adult who is a resident of Florida or currently located in Florida
2. who is believed to have been abused or neglected by a caregiver in Florida, or
3. suffering from the ill effects of neglect by self and is need of service, or
4. exploited by any person who stands in a position of trust or confidence, or any person who knows or should know that a vulnerable adult lacks capacity to consent and who obtains or uses, or endeavors to obtain or use, their funds, assets or property.

Description of Harm (Child):

Abuse: Any willful or threatened act or omission that results in any physical, mental, or sexual injury or harm that causes or is likely to cause the child's physical, mental, or emotional health to be significantly impaired.

Neglect: Any act or omission where a child is deprived of, or allowed to be deprived of, necessary supervision, food, clothing, shelter, or medical treatment, or a child is permitted to live in an environment when such deprivation or environment causes the child's physical, mental, or emotional health to be significantly impaired or to be in danger of being significantly impaired. The foregoing circumstances shall not be considered neglect if caused primarily by financial inability unless actual services for

relief have been offered to and rejected by the caretaker responsible.

Threatened Harm: A situation, circumstances or behavior that leads a prudent person to have reasonable cause to suspect abuse or neglect has occurred or may occur in the immediate future if no intervention is provided.

Special Conditions: A situation that does not rise to the reasonable cause to suspect harm level, but requires intervention.

Description of Impairment (Vulnerable Adult):

Abuse: Any willful or threatened act or omission that causes or is likely to cause significant impairment to a vulnerable adult's physical, mental or emotional health.

Neglect: The failure or omission on the part of the caregiver to provide the care, supervision and services necessary to maintain the physical and mental health of the vulnerable adult. The failure of a caregiver to make reasonable efforts to protect a vulnerable adult from abuse, neglect or exploitation by others.

Exploitation: Actions of deception or intimidation, for the purpose of personal gain or benefit by a person in a position of trust, that deprives a vulnerable adult of the use, benefit or possession of funds, assets or property. Exploitation also occurs when the Possible Responsible Person knows or should know that the vulnerable adult lacks the capacity to consent and who obtains or uses, or endeavors to obtain or use, their funds, assets or property for personal gain or benefit.

Special Conditions: A vulnerable adult in need of services as a result of self-neglect.

PART III . PROGRAMS AND SERVICES

CORE SERVICES

Ability1st, as part of a nationwide network of Centers for Independent Living, provides core services to a cross disability population in our service area. These core services consist of independent living skills training, information and referral, peer counseling, and advocacy.

Independent Living Skills Training – Instruction and skill building for living independently with a disability. Topics can include cooking, budgeting, transportation, and social skills training.

Information and Referral – Information and Referral services educate consumers, family, and community members about what community resources are available, as well as coordination of referrals from and to other community agencies or services. Having adequate information and knowing where to go for specific services promotes empowerment.

Peer Counseling – Peer support means one person with a disability helping another with a disability... primarily by mentoring, being a role model and advocating for recovery. The main objective of peer counseling is helping a consumer set his or her own identified goals and objectives and working to obtain them. Mental health peer specialist often provide peer support services by working one-on-one with individuals, facilitating groups, serving as a consumer advocate and providing consumer information and education.

Advocacy - Advocacy is an important part of the Independent Living Philosophy. According to Webster's definition, being an Advocate means one that pleads the cause of another or one that defends or maintains a cause or proposal. Not only does the agency strive to fulfill this role, but we also educate and train consumers to be their own advocate.

Ability1st supports and actively participates in community efforts and local and statewide grassroots advocacy organizations. We work with bringing about systems change goals by influencing legislation that would affect the disability community and offer scheduled training to our consumers on disability related issues. Ability1st also offers one-on-one consumer advocacy by accompanying and/or assisting consumers to agencies where they receive different services. Some of the services include supporting them in court, researching their rights on a particular issue or working with them on understanding their rights with Exceptional Student Education (ESE) programs.

OTHER PROGRAMS

Access to Independence Services The range of services offered through this program increases opportunities for low-income individuals with physical disabilities to remain in the community and live as independently as possible. Accessibility Services include the construction of wheelchair ramps, loans of durable medical equipment, and provision of disposable medical supplies. In addition to purchasing materials and supplies so that Ability1st can offer these services free to persons in need, the program relies on critical volunteer construction and supervision resources, as well as gifts of cash and in-kind materials.

The goals for the program address the needs of persons with disabilities allowing for:

- a home that is accessible and barrier free
- maximum independent mobility
- necessary and sufficient supplies to prevent secondary medical complications
- medical equipment that allows a person with a disability to independently carry out daily living activities, thus remaining in the community with dignity

Crime Victims Assistance (VOCA) The specific victim populations served by Ability1st's VOCA project is persons with disabilities (adults and youth) who have been victims of crimes or victims who have become disabled as a result of the crime experience and who reside in the 2nd Judicial District.

The specific services provided by the program include crisis counseling and follow up contact to offer emotional support and guidance; in-person information and referral to identify additional service needs and available resources; criminal justice support and advocacy to assist with all stages of the criminal justice process; personal advocacy to assist victims with such tasks as securing rights, remedies, filing for covered losses and financial assistance, and advocating for any additional identified needs. Independent-living skills training is provided to assist consumers in developing safety plans and during the course of teaching activities of daily living (ADL's) related to their disability.

This program is funded by the Florida State Attorney General's Office Victims of Crime Act (VOCA) Grant.

Community Education Ability1st ADA information specifically tailored for businesses, civic and human service organizations and the criminal justice system. In addition, we provide Disability Awareness and Sensitivity Training through interactive experiences.

Deaf Services This program provides community and family member sign language instruction, technical assistance and advocacy or accommodations regarding hearing loss as well as core services for Deaf and hard of hearing individuals.

FTRI/Communication Equipment Ability1st is now a Regional Distribution Center (RDC) for Florida Telecommunications Relay, Inc. (FTRI). As an RDC, we administer Specialized Telecommunications Equipment to qualified citizens of Florida who are Deaf, Hard of Hearing, Deaf/Blind and Speech Disabled.

Mental Health Outreach This program provides **short-term engagement and** supportive services targeting indigent and homeless person with mental illness, substance abuse and co-occurring disorders **that do not have access to Medicaid funded services. Outreach** services are delivered through three different program components: Direct Outreach, Supported Housing and Benefits Access/Restoration. The primary purpose of these **outreach services is to identify individuals as described above and with a brief period of contact, successfully connect them with needed mental health and substance abuse treatment, housing programs and other community resources.**

Street Outreach- The Ability1st Street Outreach Program provides services to those who are unsheltered and living with disabilities in Leon and surrounding counties. Our coordinators engage people living in encampments, parks, and other areas to distribute food and supplies; provide crisis counseling and independent living skills training; with the ultimate goal of placing them in permanent housing.

Supportive Housing/Leasing Assistance This HUD funded program, A Place Called Home (APCH), offers permanent housing in the form of leasing assistance to chronically homeless persons with disabilities (primarily mental health and co-occurring illnesses). Ability1st has 45 housing and coordinates the requisite support services to assist these individuals sustain permanent housing. Ability1st also receives a HUD funded grant for 12 additional slots in APCH for Families, which houses homeless, disabled parents with custody of at least one minor child. The primary target population for this program is women with mental health and substance abuse disabilities who have also been victims of domestic violence.

Youth Transition/High School/High Tech This program is designed to provide high school students with all types of disabilities the opportunity to explore jobs or postsecondary education leading to technology-related careers.

HS/HT links youth to a broad range of academic, career development and experiential resources and experiences that will enable them to meet the demands of the 21st century workforce. The program has been shown to reduce high school dropout rate and increase the overall self-esteem of participating students.

The HS/HT Guideposts are a statement of principles that provide direction for young people transitioning into adulthood. They encompass five major areas, based upon

research, that are proven to help youth with disabilities prepare for their future. Ability1st provides program participants with activities based on the HS/HT Design Features, which include:

- Preparatory Experiences include the activities and services the students partake in while at the program site or postsecondary education facility.
- Work-Based Experiences create an opportunity for the student to learn about workplace culture and expectations and to make what they are learning in school more meaningful
- Connecting Activities for HS/HT students are vital to the program, ensuring that the participants transition properly into the next phase of their lives. The focus is on services and activities requiring support from other organizations.
- Youth Development & Leadership activities help students become self-sufficient and productive members of society.
- Family Involvement & Support Parents and Caregivers play a vital role in transitioning the student to the next phase of his or her life.

INDEPENDENT LIVING MODEL OF SERVICE

(Lachat, M. A., The Independent Living Service Model, Center for Resource Management, Inc. South Hampton, NH 1988)

The essence of the independent living movement and its core values became the foundation for a consumer-oriented service model that emphasizes individual choice, personal control, and the need for self-determination. These key features of the independent living service model underscore the importance of constituency control, the power of peer support, and the fact that independent living centers have been established to meet the needs of specific disability populations that had been underserved and segregated by traditional rehabilitation services. Also, the independent living service model is characterized by the dual thrusts of individualized support services to promote self-determination and community advocacy to promote integration in the social and economic mainstream.

Ability1st employees have an obligation to continue serving, supporting, and encouraging consumers to do what our experience has taught us to believe is best, even if we believe a consumer is making a decision that goes against his or her IL goals. We must understand and accept that helping consumers to make their own choices good or bad will ultimately be in the best interests of their independence, even if we believe that a particular action is a bad idea. As professionals, we need to take a supportive role, rather than one as a decision maker.

HOUSING FIRST APPROACH

Housing First prioritizes rapid placement and stabilization in permanent housing and does not have service participation requirements or preconditions. All participants will be considered “Housing Ready” without prejudice. Consistent with a Housing First Approach, Program staff will work to house participants as quickly as possible regardless of barriers. Likewise, we will comply with all CoC Policy and Procedures, HUD Regulation, ADA and Fair Housing Standards.

Policy: Tenants have full rights, responsibilities, and legal protections

Procedure: It is practice of outreach staff to help people experiencing homelessness achieve long term housing stability in permanent housing. Permanent housing is defined as housing where tenants have leases that confer the full rights, responsibilities, and legal protections under federal, state, and local housing laws. Tenets are educated about their lease terms, given access to legal assistance, and encouraged to exercise their full legal rights and responsibilities. Landlords and providers in Housing First models abide by their legally defined roles and obligations. For instance, landlord and providers do not enter tenets’ apartments without tenant’ knowledge and permission except under legally-defined emergency circumstances.

Policy: Participants will experience a rapid and streamlined entry into housing: In order to ameliorate the potential anxiety and uncertainty experienced by participants during a lengthy housing application and approval process, Outreach staff will make every effort to help participants move into permanent housing as quickly as possible, streamlining application and approval processes, and reducing wait times.

Policy: Supportive services are voluntary but can and should be used to persistently engage tenants to ensure housing stability- Outreach staff will proactively offer follow up to participants in order to help them achieve and maintain housing stability, but tenants are not required to participate in services as a condition of receiving rapid rehousing assistance.

DEVELOPMENT OF INDEPENDENT LIVING PLANS

All consumers who need assistance beyond information and referral services will be notified of their right to develop an Independent Living Plan (hereafter referred to as ILP). Those consumers who decide not to develop such a plan will be asked to sign a waiver but will still be eligible for all services offered by the Center. The ILP (printed from COMS) will be maintained in the consumer hardcopy file.

Unless the consumer signs a waiver, the employee will assist the consumer in developing and periodically reviewing the ILP. If the consumer knowingly and voluntarily signs a waiver stating that an ILP is unnecessary, an ILP will not be required but services and goals will be listed in the consumer file.

Development of an ILP will be initiated after documentation of eligibility has been established. It must indicate the goals and action plan chosen, the service or services to be provided and the anticipated duration of the service program and each component service.

The ILP must be developed and jointly signed by the appropriate employee and consumer, or if he/she chooses, the consumer's representative. A copy of the ILP and any amendments must be provided in an accessible format to the consumer.

The ILP must be reviewed as often as necessary, but regularly on a six-month basis to determine whether services should be continued, modified, discontinued, or whether the consumer should be referred to some other program of assistance.

The consumer will be given an opportunity to review the ILP, with employee assistance as appropriate and needed, and if necessary, jointly redevelop and agree by signature to its terms. Consumers should be given a copy of the ILP

The development of the ILP and the provisions of the IL service shall be coordinated with any services the consumer is receiving from any other agency in order to maximize the potential outcomes.

INDEPENDENT LIVING PLAN WAIVERS

A consumer may opt to waive the development of an ILP. Waiving the option to have a plan in place does not cancel or waive the right of the consumer to appeal any decision, seek remedies through the Client Assistance Program or preclude access from any services that would otherwise be available if the consumer chooses to develop an ILP.

The choice to waive the development of an ILP shall be exclusively made by the consumer or her or his legal guardian, or court appointed conservator. In consulting with the consumer as to the option for waiving the development of an ILP, the consumer shall be advised that all services available through an Independent Living Plan will also be available through a waiver. However, the consumer should also be notified that waiving the option for developing an ILP would remove the provision of detailed goals, objectives, services, providers, and anticipated duration of services from a written document.

For consumers that select to waive the development of an ILP, a signed waiver shall be obtained and placed in the case record of services and COMS shall be updated accordingly. The reason(s) for choosing to waive the development of an ILP shall be recorded onto the waiver form and in COMS.

Information on the appeals process and the Client Assistance Program shall be included with the written waiver, and a copy of the waiver and the appeals information shall be provided to the consumer in an accessible format.

ESTABLISHING INDEPENDENT LIVING GOALS

In many cases, consumer service requests for assistance exceed information and referral services. In these cases, Ability1st employees will open a consumer file and facilitate the development and achievement of independent living goals selected by the consumer. Employees will only act in an assistive role in this process. Employees will document the IL goals in the consumer's file and maintain documentation on the consumer's progress in achieving those goals. IL Plans will identify dates for review and actual achievement dates.

Ability1st employees will coordinate the provision of empowerment services necessary for the consumer to achieve their own independent living goals. Employees will facilitate the development and achievement of such independent living goals by providing varying degrees of peer support and/or IL technical assistance.

The consumer may also choose to enlist the assistance of other relevant parties in the development of his/her IL goals. Such relevant parties may include family members, significant others, and service providers. However, in all such cases, employee members will insure to the greatest degree possible that such parties will also act in a facilitative role.

PART IV - PROVISION OF SERVICE

ELIGIBILITY, INELIGIBILITY DETERMINATION & REVIEW OF INELIGIBILITY DETERMINATION

Ability1st serves individuals with disabilities. Eligibility is determined by:

- 1) An individual with a physical or mental impairment that substantially limits one or more major life activities. Major life activities include, but are not limited to self care, manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.
- 2) A reasonable expectation that the provision of IL services will improve one's independence or quality of life.

Information and referral (I&R) is available to anyone calling, writing, or inquiring at Ability1st. As appropriate and with the written permission of the consumer, family members, employers, employees, co-workers, landlords, and friends of consumers may receive services of an advocacy, supportive or training nature that will directly assist the consumer.

For the provision of the core independent living services (beyond I&R assistance), consumers must self-report the presence of a disability. In the event that the individual does not self-report the disability, they may receive services based on the employee obtaining additional information which verifies the presence of a disability. Eligibility for services will never be denied solely based on the presence of a particular type of disability.

Any person or agency may make referrals, but services will be provided to or on behalf of the consumer only with his/her permission.

The geographic area served by Ability1st includes Leon, Gadsden, Taylor, Wakulla, Madison and Jefferson counties.

Specific grants may have specific eligibility requirements. Consumers will be informed as to any specific requirements for a particular service, outside of the four core services.

Ability1st employees, interns, volunteers and Board Members are eligible for services.

If a determination is made that an applicant for IL service is not an individual with a disability, employee shall provide documentation of the ineligibility determination. The employee may determine an applicant to be ineligible for IL services only after a full consultation with their supervisor or the Director of Programs and the applicant, or if the applicant chooses a representative. A consumer or his/her representative may appeal the decision through the Consumer Grievance/Appeals Procedure.

The employee shall notify the applicant in writing of action taken and inform the applicant, or, if the applicant chooses, the applicant's representative, of the applicant's rights and means by which the applicant may appeal the action taken.

The employee shall provide a detailed explanation of the availability and purposes of the Client Assistance Program. If appropriate, the employee shall refer the applicant to other agencies and facilities.

If an applicant for IL services has been found ineligible, the employee shall review the applicant's ineligibility at least once within 12 months after the ineligibility determination has been made to determine whether the applicant's status has materially changed.

A review is not necessary in situations where the applicant has refused the review or the applicant's whereabouts are unknown.

SUSPENSION OF CONSUMER SERVICES

A consumer may be suspended from utilizing an Ability1st program and from receiving personal services.

It is not possible to provide an exhaustive list of all types of conduct that may necessitate suspension, but the following are some examples of behavior that may lead to the suspension of consumer services:

- Verbal or physical threats of violence against an Ability1st employee, intern, volunteer or Board member
- Unwelcome physical contact or harassment
- Active and on-going illegal/criminal activity

Justification for suspension will be put in writing and the Executive Director will make the final decision. In all cases, the consumer will be referred to another organization, or agency that might help the consumer. When, in the judgment of the Executive Director, the situation has been satisfactorily resolved, Ability1st may continue to render services.

INACTIVE STATUS

No duration limitations will be imposed on the provision of IL services. Employees shall move the file to inactive status when a consumer 1) relocates, 2) states that he/she has no further interest in the program, 3) is deceased, 4) achieves all goals set, or 5) does not desire any other service(s). It is the consumer who establishes the goals, not Ability1st employee, and determines the achievement of an individual's goals.

ALTERNATIVE MODES OF COMMUNICATION

Ability1st is committed, to the maximum extent feasible, to facilitate employees being able to communicate with individuals with disabilities who rely on alternative modes of communication. Ability1st is also committed, to the maximum extent possible, to arranging for native language interpreter services for individuals whose English proficiency is limited.

For visually impaired persons who require written material in an alternative format, Ability1st employee will arrange for material to be printed either in large print, put on a disk, or printed in Braille, depending upon the preference of the consumers.

For hearing impaired persons, Ability1st employee will consult with their supervisor for the most current procedure regarding arranging for sign language interpreter services, either in-house if available, or through an outside agency. Employees should also utilize TDD lines whenever feasible.

For consumers who speak a language other than English, Ability1st employees will consult with their supervisor for current resources for interpreter services.

PERSON FIRST LANGUAGE

Ability1st is committed to respecting and empowering each consumer to achieve his or her goal(s) and to helping increase awareness that persons with disabilities should be considered people first and not solely distinguished by their disability. To that end it is important that Ability1st employee, in choosing words about people with disabilities, adhere to the guiding principle, which is to refer to the person first, not the disability. In place of saying "the disabled," it is preferable to say "people with disabilities." This way, the emphasis is placed on the person, not the disability.

It is only important to refer to the person's disability if it is relevant to the conversation or situation. Disability should not be the primary, defining characteristic of an individual but merely one aspect of the whole person.

Many labels used for disabilities in our society have negative connotations or are misleading. Using labels contributes to negative stereotypes and devalues the person they attempt to describe. Avoid them when speaking to, or about, persons with disabilities.

The following examples illustrate that the person is emphasized first, the disability second:

Use: person with a disability	Not: disabled or handicapped person
Use: individual without speech	Not: mute, dumb
Use: woman who is blind/has a visual disability	Not: blind woman or "the blind"
Use: student who is deaf or hard of hearing	Not: deaf student or "the deaf"*
Use: man with paraplegia	Not: paraplegic
Use: woman who is paralyzed	Not: paralyzed woman
Use: individual with epilepsy	Not: epileptic
Use: person with mental disability/ cognitive impairment	Not: crazy, demented, insane
Use: person with a developmental disability	Not: mentally retarded
Use: congenital disability	Not: birth defect

It is important to describe the person, not the disability. Persons without disabilities should be referred to as "nondisabled," not "normal" or "able-bodied."

Rather than using words such as "confined," "bound," "restricted," or "dependent," the most appropriate phrasing is "a person who uses a wheelchair" or "a person who walks with crutches." Again, the emphasis is on the person.

The word "handicap" should only be used in reference to a condition or a physical barrier. Reference should not be made to the person as being handicapped. Examples include: "The stairs are a handicap for her," or "He is handicapped by the inaccessible bus."

It is important to avoid labeling or group categorizations that begin with "the," i.e. "the disabled," "the deaf," "the blind." Also to be avoided are euphemisms such as "the physically challenged," "partially sighted," "handicapable," and "special." The use of the word "disabled" is discouraged without referring to the person first.

PART V . SAFETY

SAFETY PRECAUTIONS

Safety for all employee, volunteers, and interns is of utmost importance and should be observed during all activities related to program or service delivery.

The guidelines below are to be followed to assist employee in maintaining safety:

- Your supervisor needs to know where you are at all times
- Always carry business cards and identification with you
- Inform collaborating agencies of your presence
- Introduce yourself and inform people of what you are doing and why
- Maintain confidentiality with all consumers

The following scenarios are deemed —high riskll and require a minimum of two employees present or supervisor permission for a single employee during a **home visit**:

- a) An employee visits the home of a consumer of the opposite sex
 - b) An employee visits the home of a consumer with a known/reported history of violence. This includes but is not limited to criminal charges of aggravated assault, felony and aggravated battery, arson, kidnapping, rape, any crime in which a weapon was used, manslaughter and murder.
 - c) An employee visits the home of a consumer with a known/reported current or recent (within the last year) history of substance abuse and/or drug related criminal history
 - d) An employee visits the home of a consumer located in a geographic area known by the agency to have a high rate of crime.
- Do not carry valuables or other personal possessions such as jewelry, large amounts of money, portable radios, CD or MP3 players, laptops, etc. If you must carry incentives, make arrangement to hold these in a secure place
 - Do not remain in a location where you are privy to an illegal activity in process. Leave the area immediately without drawing attention to yourself or others
 - Do not linger with a person you know is holding illicit drugs or accept or hold any type of illicit drugs or controlled substance
 - Do not initiate in-person contact with a consumer who has active warrants

- Do not give or lend personal money to consumers or buy merchandise from (or for) consumers
- Immediately report any unusual developments and or incidents to your supervisor
- Develop a contingency plan for worst-case scenarios or dangerous situations with your supervisor
- Leave immediately if at ANY time you feel uncomfortable in a situation
- In case of emergency, call or have someone call 9-1-1

The following situations must be reported to a supervisor and are in addition to the unusual incident reporting section on page 44.

- a) Direct or indirect threat of violence
- b) Consumer behavior consistent with threat of violence
- c) Direct or indirect sexual/romantic advances
- d) On-going consumer illegal activity

CONSUMERS IN CRISIS

To ensure employee and consumer safety, aggressive, intoxicated or psychotic individuals should be dealt with in the least restrictive measure possible while ensuring that all emergencies are addressed immediately and effectively.

To deal with individuals in the least restrictive measure, the following should be observed:

1. **Prevention** - An early assessment of the consumer may hint at signs of problems such as an increase or decrease in voice volume, defiant attitude, excessive swearing, clenched fists, etc. Try to speak to the consumer about what is going on with empathy and non-defensiveness.
2. **De-Escalation of Tension** - Listening and attending to the consumer may help de-escalate the situation. This involves finding out what the consumer is thinking and feeling and seeking their input about a possible solution to the problem. Ask open-ended questions and listen carefully to what is being said. Allowing the other person to talk may de-escalate the situation alone, or allow you and the consumer to devise a solution to the underlying problem.
3. **Action** - If the consumer is intoxicated and refuses to leave Ability 1st upon request, or makes suicidal gestures or threats it is necessary to call 9-1 -1 to have a law enforcement officer intervene. Keep a safe distance from the consumer and identify an escape route convenient to you. Maintain eye contact and do not turn away from the consumer if at all possible.

A crisis may be different from a problem or an emergency

- While a *problem* may create stress and be difficult to solve, the individual is capable of finding a solution. Consequently, a problem that can be resolved by an individual without outside intervention is not a crisis. Oftentimes, a problem may seem like a crisis to an individual under stress.
- An *emergency* is a sudden, pressing necessity, such as when a life is in danger because of an accident, a suicide attempt, or family violence. It requires immediate attention by law enforcement or other professionals trained to respond to life-threatening events. If a situation can wait 24 to 72 hours for a response, without placing an individual or a family in jeopardy, it is a crisis and not an emergency.

Everyone has experiences that make him or her feel upset, disappointed, or fatigued. When these types of feelings are combined with certain life events or situations, they often lead to mounting tension and stress. Five types of situations have been identified that may produce stress and, in turn, contribute to a state of crisis. Types of consumer crisis situations may include:

- **Family Situations** - a child abuse investigation, spouse abuse, an unplanned Pregnancy, a parent's desertion, a chronically ill family member, and lack of social supports are examples of family situations that can create stress and crises.
- **Economic Situations** – sudden or chronic financial strain is responsible for many family crises, such as loss of employment, eviction, no food, a theft of household cash or belongings, high medical expenses, missed child support payments, repossession of a car, utilities cut off from service, money – lost to gambling or drug addiction, and poverty.
- **Community Situations** – neighborhood violence, inadequate housing, a lack of community resources and inadequate educational programs illustrate some ways the community may contribute to family crises.
- **Significant Life Events** – events that most view as happy, such as a marriage, the birth of a child, a job promotion, or retirement, can trigger a crisis in a family; a child enrolling in school, the behaviors of an adolescent, a grown child leaving the home, the onset of menopause, or the death of a loved one can also be very stressful life events.
- **Natural Elements** – crises are created by disaster such as floods, hurricanes, fires, and earthquakes, or even extended periods of high heat and humidity, or gloomy or excessively cold weather.

UNUSUAL INCIDENT REPORT

Any unusual incident must be reported to the direct supervisor or designee within one hour of the incident, and the Executive Director must be notified within 24 hours. An unusual incident report form must be filled out, and an investigation is to be completed by the Executive Director within 5 days. Unusual incidents will be reported to the Board of Directors by the Executive Director as deemed necessary by the Executive Director.

All incidents shall be treated as strictly confidential and may not be discussed with anyone without prior approval of the Executive Director.

At the end of each fiscal year, the Executive Director shall review with the Executive Committee of the Board all unusual incidents.

An unusual incident is any event that could possibly cause a liability to Ability1st.

Examples include:

- Unwelcome, physical contact between anyone (employees, consumers, visitors or volunteers)
- Unprofessional conduct by an employee, volunteer or contract employee
- Property damage
- Anything which could result in unfavorable publicity or criticism for Ability1st
- Injury to anyone while at Ability1st (must also complete an *Accident/Injury Investigation Report*)
- Breach of confidentiality
- Illegal contraband in the facility including weapons
- Verbal or physical threats
- Any behavior that jeopardizes Ability1st funding sources

UNIVERSAL PRECAUTIONS

To protect against and to reduce the risk of exposure to potentially infective materials all Ability1st employee are require to observe "Universal precautions" when interacting with consumers in situations where exposure to infective materials may occur.

Universal precautions defined by the Centers for Disease Control, are a set of precautions designed to prevent transmission of human immunodeficiency virus (HIV), hepatitis B virus (HBV), and other blood-borne pathogens. Under universal precautions, the blood and other body fluids containing visible blood, semen, and vaginal secretions, of all consumers are considered potentially infectious for HIV, HBV and other blood-borne pathogens and therefore require universal precaution.

To protect against infection and to reduce the risk of exposure to potentially infective materials, Ability1st employee members are required to comply with the following guidelines:

- Use protective barriers such as gloves, masks, or protective eyewear in all situations where you may be exposed to potentially infective materials, including blood and other bodily fluids.
- Hands and other skin surfaces should be washed immediately or as soon as safety permits if contaminated with blood or body fluids requiring universal precautions.
- Hands should be washed immediately after gloves are removed.

TRANSPORTATION

Ability1st does not provide direct transportation services. Ability1st's liability limitations dictate that, under no circumstances, should Ability1st employee transport a consumer, nor should Ability1st employee accept a ride in a consumer's car. This policy applies to all Ability1st employees, volunteers, and interns.

In the event that an Ability1st employee, volunteer, or intern becomes aware that a consumer is in need of transportation, all possible alternatives to the direct transport of a consumer should be explored. Consumers should be encouraged to find their own transport solutions or seek transportation support from relatives or friends. Employees may provide consumers with a bus pass for the use of public transportation or may elect to provide taxi fare to the consumer, which may be a reimbursable expense.

Exceptions to this policy may be made in an emergency situation only and must be verbally approved by either the Assistant Director or the Executive Director prior to providing direct transportation services to a consumer.

Ability1st does routinely provide Star Metro bus passes to indigent consumers and persons with disabilities during outreach contacts in the community. This resource should be provided only to the extent that it furthers the accomplishment of independent living goals and is not considered to be a permanent transportation resource.

CONTRABAND

There will be no alcoholic beverages, illegal drugs, firearms or weapons allowed at the Ability1st office whenever consumer services are being delivered, or wherever consumer services are being delivered. With the approval of the Executive Director, alcohol may be served in after-hours functions at Ability1st, where no consumer services are being delivered.

VISITORS

When in the process of delivering direct consumer services, Ability1st employees, interns and volunteers are not permitted to have visitors of any kind, including friends, family, or children or other relatives, within their office, automobile or at any community location. Such visitors may be present at agency events, meetings or offices, for social activities or when the public is invited.

SERVICE LOCATIONS

Ability1st is a non-residential, community based organization that provides individual and group services as well as community wide activities throughout a six county region. While the Tallahassee office is the primary work location for services, Ability1st employees and volunteers often travel within our catchment area to conduct outreach, participate in collaborative projects or to network with other service providers. Additionally, consumer services are often provided within integrated community locations as well as in consumer homes. Consumer home visits are however limited to those situations where there is no other appropriate service location or there is a critical need that the consumer be seen within their home.

In either case, this should only occur after consultation with the employee's supervisor to explore the necessity of a home visit. There are only a few programs where home visits may occur routinely, such as IL rural outreach, our HUD funded supportive housing program or follow up related to nursing home transition. Visits to community partner agencies, emergency shelter locations or transitional living programs are not considered home visits.

PART VI - MANAGEMENT OF INFORMATION

COMS

COMS stands for Comprehensive Organization Management System and is used by Ability1st for the electronic organization and storage of consumer services data.

The applications that COMS provides to CIL's include:

- helps manage employee (Time clock, Alerts, Check-list reports, Personal Activity Reports)
- gathers and organizes information (Consumers and Information & Referral, Contacts, Activities, FTRI, Housing and Urban Development, Search capabilities)
- provides flexible and powerful reporting tools (Simple lists, Custom Reports, Exportable to Excel).

Each Ability1st employee, volunteer or intern is required to enter all Consumer, Information & Referral and activity information into COMS, including all contacts, as well as Community and Internal Activities.

CONSUMER FILES/RECORDS

Consumer information will be maintained in two forms. The records of consumer services, ILP's, demographic and other statistical information will be electronically maintained in COMS. All other consumer information (release of information, applications for entitlement benefits, etc.) will be retained in a hard copy consumer file.

- Ability1st employees shall maintain a consumer record that includes the following:
- Application with documentation concerning eligibility or ineligibility for service(s).
- The service(s) requested by consumer
- The ILP developed by the consumer or a waiver signed by the consumer stating that the ILP is unnecessary
- The service(s) actually provided to the consumer, and:
- The consumer's IL goals or action plan –
- Employee and consumers will work together to establish IL goals and action plans. These goals and action plans will be developed and monitored whether or not an IL plan is developed; and
- Achievements of the consumer goals and action plans will be recorded.
- Consumer contact logs containing documentation regarding contacts, services and activities
- Grievance and complaint procedures (CAP)
- Release of information documentation, if appropriate

Consumer files/records will be maintained in such a manner to ensure that confidentiality is guaranteed at all times.

CONFIDENTIALITY OF CONSUMER FILES/RECORDS

Ability1st maintains a hard-copy file as well as an electronic record for each active and inactive consumer. Consumer files contain such information as demographics, consumer contact information, an ILP and other consumer-specific data. The confidentiality of both electronic and physical consumer records is the responsibility of all employee members.

The following guidelines shall be used to ensure the confidentiality of consumer files and electronic consumer records

- Active hard-copy consumer files are kept locked in a designated location to limit access and maintain confidentiality. Employees have access to their consumer's files and files must be returned to the file cabinet by the close of business each day.
- Consumer information should not be left in a viewable format on unattended employee computer screens, or left on desk tops of unattended work areas. Computers must be locked (password protected) when left unattended
- Consumers have the right to review their file at any time.
- Inactive consumer files are kept in a locked filing cabinet designated for inactive files.
- The representatives of the Ability1st funding sources, and/or accrediting bodies may review, for bona fide reasons, consumer files.
- Consultants engaged by Ability1st will have access to consumer files with permission of the Executive Director.
- Interns engaged in fieldwork will have access to consumer files; but may not photocopy information.
- Volunteers are not permitted access to consumer files until they have successfully completed agency orientation and have signed a volunteer confidentiality agreement.
- After reviewing their record, a consumer and/or their representative may request a conference to challenge the record's content.
- Third party records (information generated by persons other than Ability1st personnel) may not be photocopied or released.

- Consumers may request in writing, that Ability1st release copies of the records. This release is time limited and a form must be completed by the consumer each time the record is released.
- Before a release of information may be sought or given, the consumer must sign a release of information.
- Hard copy consumer files should not leave the building without permission from the Director of Programs or the Executive Director

EMPLOYEE COMPLAINT PROCEDURE

1. Ability1st is committed to providing the best possible working conditions for its employees. Part of this commitment is encouraging an open and frank atmosphere in which any problem, complaint, suggestion, or question receives a timely response from Ability1st supervisors and management. Ability1st strives to ensure fair and honest treatment of all employees. Supervisors, managers, and employees are expected to treat each other with mutual respect.
2. Each employee is expected to communicate directly with his/her supervisor, Executive Director and all other supervisory employees concerning any work-related problems. The supervisor receiving the verbal complaint must write a memo describing the complaint and the nature of the conversation. If this method does not solve a problem, the employee may make a formal complaint using the procedures described below:

The employee or employees submit(s) a written complaint or grievance to the Supervisor/Executive Director, for decision and resolution. The written complaint must detail the nature of the problem and steps that have already been taken in an attempt to resolve the problem. If the grievance cannot be solved at that step, the Executive Director shall submit his/her findings to the Executive Committee of the Board for decision and resolution.

3. If the Executive committee cannot resolve the grievance, it shall forward its findings to the full Board of Directors for final resolution.
4. The Board of Directors will review the findings of the Executive Committee. The Board may choose to stay the decision of the Executive Committee or, at their discretion, may schedule an appeal hearing. A written decision by the Board of Directors shall be

provided to the Executive Director and to the employee/employees within 10 work days of its meeting. The decision of the Board of Directors shall be final.

POLICY AND PROCEDURES ACKNOWLEDGEMENT FORM

Policy and Procedures describe important information about Ability 1st, and I understand that I should consult with my supervisor regarding any questions that are not answered in this handbook.

I have entered into my employment with Ability 1st voluntarily and acknowledge that there is no specified length of employment. Accordingly, either Ability 1st or I can terminate the relationship at will, with or without cause, at any time so long as there is no violation of applicable federal or state law.

Since the information policies and benefits described here are subject to change, I acknowledge that revisions to the handbook may occur, except the Ability1st's policy of employment-at-will. All such changes will be communicated through official memorandums.

I understand that revised information may supersede, modify, or eliminate existing policies.

Only the Executive Director of Ability 1st has the ability to adopt any revisions to the policies in this handbook.

Furthermore, I acknowledge that this handbook is neither a contract of employment nor a legal document. I have reviewed the handbook and I understand my responsibility to read and comply with the policies contained in this handbook and any revisions made to it.

Employee's Signature

Date

Employee's Name (typed or printed)

ATTACHMENT: K

Attachment K- Client Eligibility

Q11.The applicant has clear written procedures to verify client eligibility for program services as defined in the NOFO based on the project type and has defined policies for referring and receipt of referrals through Coordinated Entry. This includes detail on how clients will be connected to mainstream benefits promoting economic self-sufficiency

Eligibility for Rapid Rehousing Assistance Program through Ability1st is based on the following:

-The Participant (or child of participant) must report as living with a disability to be served by Ability1st.

-The Applicant must meet the criteria of paragraph (1) of the definition of homeless at 578.3, except that persons coming from transitional housing must have originally come from places not meant for human habitation, emergency shelters, safe havens, or institutions where they resided for 90 days or less and originally came from places not meant for human habitation, safe havens, or emergency shelters; or 2. meet the criteria of paragraph (4) of the definition of homeless at 578.3. This may be verified by:

(1) third-party documentation; (2) intake worker observations; and (3) self-certification.

-We will follow any additional eligibility criteria set forth in the NOFA through which a project was funded and the grant agreement.

Sending and receiving referrals through BBCoC Coordinated Entry:

Outreach and Referral Process: HUD expects all CoC Program Recipients to collaborate with their respective CoCs to reach out and engage homeless individuals that may be eligible for the CoC Programs. As such, effective October 01, 2014 all program participant referrals to Program will come from the Big Bend CoC Coordinated Entry prioritization list. Program will work in conjunction with the CoC to identify and outreach to potential participants. The CoC will provide referrals to Program Coordinators, who will vet candidate's eligibility based on the Prioritization set forth in HUD guidance CPD-14-012 and the CoC Program Interim rule.

How clients will be connected to mainstream benefits:

Life skills training: Teaching critical life management skills that may never have been learned or have been lost during the course of physical or mental illness, domestic violence, substance abuse, and homelessness are eligible. These services must be necessary to assist the program participant to function independently in the community. Component life skills training are the budgeting of resources and money management, household management, conflict management, shopping for food and other needed items, nutrition, the use of public transportation, and parent training.

Case management: Assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant(s). Component services and activities consist of:

- Providing emergency food/clothing/hygiene items;
- Counseling;
- Developing, securing, and coordinating services;
- Using the centralized or coordinated assessment system as required under § 578.23(c)(9).
- Obtaining federal, State, and local benefits;
- Monitoring and evaluating program participant progress;
- Providing information and referrals to other providers;
- Providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking; and
- Developing an individualized housing and service plan, including planning a path to permanent housing stability.

ATTACHMENT: L

Attachment L- Improvement of System Performance

Q12. Provide a narrative demonstrating how the project will improve two or more of the HUD System Performances for our Continuum in the future. This includes clear goals and outcomes for each measure it will address.

Measure : Returns to homelessness

Goal: Reduce returns from PH-RRH to homelessness

Outcome: No more than 10% of participants who exit the program will return to homelessness.

Measure 7: @ Permanent Housing

Goal: Ensure program participants remain in stable permanent housing

Outcome: At least 90% of RRH Participants will remain in or exit to other permanent housing.

ATTACHMENT: M

Attachment M- Project Outcomes

Q13. Provide a narrative demonstrating the proposed outcomes for the project, how the outcomes will be measured, tracked, and documented over the project period.

Rapid re-housing is an intervention, informed by a Housing First approach that is a critical part of effective homeless crisis response system. Rapid re-housing rapidly connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

Outcome 1: Provide at least 40 unsheltered homeless households, or 60 individuals, with rapid rehousing assistance resulting in permanent housing and provide follow up supportive services to assist them in maintaining housing and ultimately reducing returns to homelessness.

Measurable Indicators: We will use HMIS to track client progress and pull APR reporting to ensure we are on track to meet our program output goal. Will will conduct follow up every 3, 6, 9 & 12 months.

Outcome 2: Increase income of at least 8% of program participants.

Measurable Indicators: Our Outreach Coordinators will connect participants interested in career building to appropriate agencies. Participants will also be referred to our Benefits Specialist for any assistance with social security benefits. Any participants with income growth will be updated in HMIS and tracked via pulling APR reporting.

Our Outreach staff will coordinate efforts with the CoC to ensure high levels of data quality and documentation in HMIS. Staff shall participate in regular HMIS training of staff with the CoC's HMIS administrator to ensure proficiency among staff. In addition, the program shall request quarterly data quality reports from the CoC to use as a tool to regularly monitor to ensure high levels of data quality in HMIS. Additionally, we will use our agency wide documentation system, COMS, to track client progress.

This RRH Program will submit accurate Annual Performance Reports to HUD, no later than 90 days after the end of a contract reporting period without written permission from HUD. These APRs will be constructed using information pulled directly from HMIS by the Human Services Outreach Coordinator certified for accuracy by the Ability1st Deputy Director. The APR will be used to measure and track outcomes of the program.

ATTACHMENT: N

Attachment N- Project Budget

Q.14 Provide a detailed project budget describing how requested funding will be allocated including cost per person/ per household served and the breakdown of the amount and percent of costs to be spent on housing assistance, supportive services, HMIS and administration. The eSnaps Budget page for the project can be referenced but there should also be narrative including cost per person and household.

Our total request is \$242,055. This consists of \$80,000 (33% of total award) for housing assistance and \$135,006 (56% of total award) for supportive services, \$27,049 (11% of total award) for administrative costs, and \$0 HMIS related expenses.

Ability1st expects to serve at least 40 households, or 60 individuals in the 23-24 contract year, that is approximately \$2,000 per household and \$1,333.33 per person for rapid rehousing assistance. Rapid rehousing expenses include initial move in costs, such as, application fees, first/last months rent, security/utility deposits, utility arrears, short term motel assistance. We also expect that some individuals may need emergency food/clothing, which is also calculated into the budgeted costs per household and costs per person. $\$2,000 * 40 \text{ HH} = \$80,000$ - $\$1,333.33 * 60 \text{ individuals} = \$80,000$

Supportive Services includes salary, taxes and benefits for our (2) proposed FTE HUD funded Outreach Coordinators to run the program, totaling \$110,006. Additionally, this program's portion of indirect salaries, taxes and health benefits for the Executive Director, Deputy Director and Office Manager, totaling \$25,000. Supportive Services total = \$135,006

Administrative costs include this program's portion of allocated costs, including professional fees, occupancy/utilities/phones/networks, materials/supplies/postage, equipment, mileage costs, staff/board development and bonding/liability insurance totaling \$27,049.

OVERALL COSTS: These overall cost per household/person include housing assistance, supportive services, HMIS, administration = (\$242,055) plus our match amount (\$40,514) totaling \$282,569. Ability1st has projected to serve at least 40 households, or 60 individuals in the 23-24 contract year, we project this costing \$7,064.22 per household and \$4,709.48 per person.

ATTACHMENT: 0

Attachment O- Match Documentation

Q.15 Attach a letter from the source of match funds indicating the match funding is dedicated carrying out activities related to this project.

The total match requirement for the Unsheltered RRH-Leon application is \$40,514. Ability 1st will meet this match requirement with a combination of cash resources from:

The Florida Department of Education (VR):	\$20,257
Department of Health and Human Services:	\$20,257
Total:	\$40,514

Attachment: Contracts

**FLORIDA DEPARTMENT OF EDUCATION
CONTRACT NO. 22-102
AMENDMENT NO.: 2**

This **AMENDMENT** ("Amendment") to the Florida Department of Education Contract Number **22-102** ("Contract") is entered into by and between **Center for Independent Living of North Florida/Ability 1st**, (the "Contractor") authorized to do business in the State of Florida, with its principal office at 1823 Buford Court, Tallahassee, Florida 32308, and the **Florida Department of Education, Division of Vocational Rehabilitation** ("Department" DOE/DVR), an agency of the State of Florida with its principal offices in Tallahassee, Florida. Defined terms used herein shall have the meanings set forth in the Contract.

WHEREAS, on July 1, 2021, the Department entered into the Contract with the Contractor to provide requested services; and

WHEREAS, the expiration date of the Contract is June 30, 2023; and

WHEREAS, the Department desires to amend this Contract to reduce SSA/Part B by **2.18%**, a **reduction of \$1,564.00**.

NOW, THEREFORE, in consideration of the mutual covenants and conditions hereinafter stated, the Department and the Contractor covenant and agree as follows:

The recitals are true and correct and are incorporated herein by reference.

1. THEREFORE, Section III. Disbursements by Vocational Rehabilitation, subsections A. and B., are hereby amended and decreased accordingly:

SSA/ Part B	Adjusted Amount	New Amount	Adjusted Hours	New Hours	Adjusted Monthly Minimum	New Monthly Minimum
	-\$1,564.00	\$161,775.00	-7	735	0	37

2. THEREFORE, Section III: Disbursements by Vocational Rehabilitation, Paragraph A is hereby amended to read as follows:

A. Independent Living Program funds were appropriated in 2022-2023, under the General Appropriations Act (GAA) from Social Security Administration reimbursements; Title VII, Part B; and General Revenue funds providing that such funds and reimbursements are available, to provide for the delivery of Independent Living Services, including the five (5) Independent Living Core Services. These funds are allocated to individual Centers for Independent Living that are in compliance with the standards and assurances in Section 725(b) and (c) of the Rehabilitation Act of 1973, as amended, and 45 CFR Part 1329. The Center is eligible to receive payment monthly for such of its costs as would satisfy the terms of this agreement in an amount not to exceed **\$247,571.00** as broken down by funding source as follows:

Title VII, (SSA/Part B):	\$161,775.00
General Revenue:	\$85,796.00

The effective date of the Amendment shall be the date that it is signed by both parties.

All provisions in the contract and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform to this amendment.

All provisions not in conflict with this amendment are still in full force and effect and are to be performed at the level specified in the contract.

IN WITNESS WHEREOF, the parties hereto have caused this Amendment to be executed by their proper and duly authorized representatives.

**Center for Independent Living
of North Florida/Ability 1st**

**Florida Department of Education/Division of
Vocational Rehabilitation**

By: Mandy Bianchi
Authorized Signature

By: _____
Authorized Signature

Name: Mandy Bianchi
Typed

Name: Manny Diaz, Jr.
Typed

Title: Executive Director
Typed

Title: Commissioner of Education
Typed

Date: 9/14/22

Date: _____



Recipient Information

1. Recipient Name

CENTER FOR INDEPENDENT LIVING OF
NORTH FLORIDA INC
1823 Buford Ct
Tallahassee, FL 32308-4465

2. Congressional District of Recipient

02

3. Payment System Identifier (ID)

1592091522A1

4. Employer Identification Number (EIN)

592091522

5. Data Universal Numbering System (DUNS)

107552796

6. Recipient's Unique Entity Identifier

7. Project Director or Principal Investigator

Ms. Mandy Bianchi
Executive Director
mandybianchi@ability1st.info
850-575-9621

8. Authorized Official

Ms. Mandy Bianchi
Executive Director
mandybianchi@ability1st.info
850-575-9621

Federal Agency Information

Centers for Independent Living Program

9. Awarding Agency Contact Information

Mr. Vincent Woodard
Financial Operations Specialist
vincent.woodard@acl.hhs.gov
202 795-7448

10. Program Official Contact Information

Jennifer D. Martin
Program Analyst
jennifer.martin@acl.hhs.gov
2027957399

Federal Award Information

11. Award Number

2105FLILCL-00

12. Unique Federal Award Identification Number (FAIN)

2105FLILCL

13. Statutory Authority

29 U.S.C. § 796f-1; Section 722 of the Rehabilitation Act of 1973, as amended

14. Federal Award Project Title

2021 CILs

15. Assistance Listing Number

93.432

16. Assistance Listing Program Title

Centers for Independent Living

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	09/30/2021	- End Date	09/29/2022
20. Total Amount of Federal Funds Obligated by this Action			\$248,871.00
20a. Direct Cost Amount			
20b. Indirect Cost Amount			
21. Authorized Carryover			
22. Offset			
23. Total Amount of Federal Funds Obligated this budget period			\$0.00
24. Total Approved Cost Sharing or Matching, where applicable			\$0.00
25. Total Federal and Non-Federal Approved this Budget Period			\$248,871.00
26. Project Period Start Date	09/30/2021	- End Date	09/29/2022
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period			Not Available

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Emmanuel Ekwo
Deputy Administrator

30. Remarks

See Below.



Recipient Information
Recipient Name CENTER FOR INDEPENDENT LIVING OF NORTH FLORIDA INC 1823 Buford Ct Tallahassee, FL 32308-4465
Congressional District of Recipient 02
Payment Account Number and Type 1592091522A1
Employer Identification Number (EIN) Data 592091522
Universal Numbering System (DUNS) 107552796
Recipient's Unique Entity Identifier Not Available
31. Assistance Type Formula grant
32. Type of Award Mandatory

33. Approved Budget (Excludes Direct Assistance)	
I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$0.00
b. Fringe Benefits	\$0.00
c. Total Personnel Costs	\$0.00
d. Equipment	\$0.00
e. Supplies	\$0.00
f. Travel	\$0.00
g. Construction	\$0.00
h. Other	\$248,871.00
i. Contractual	\$0.00
j. TOTAL DIRECT COSTS	\$248,871.00
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$248,871.00
m. Federal Share	\$248,871.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes					
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-2994975	2105FLILCL	AoD	41.51	\$248,871.00	75-21-0142

AWARD ATTACHMENTS

CENTER FOR INDEPENDENT LIVING OF NORTH FLORIDA INC

2105FLILCL-00

1. FY21 Terms and Conditions for: Centers for Independent Living (CILs) Funding

FY21 Terms and Conditions for: Centers for Independent Living (CILs) Funding

General Grants Management

Payments – Funds for this award are available through the Payment Management System (PMS). Please go to <https://pms.psc.gov/> for access, payment, reporting and training information.

Award Acceptance - Initial withdrawal of funds by the recipient, constitutes acceptance of the terms and conditions of this award. Any future support is subject to the availability of funds and programmatic priorities. If an initial payment is not requested within 30 business days of the project start date, contact your Federal Project Officer or Grants Management Specialist to provide a reason(s) for the inactivity.

Grants Management Module - ACL grant recipients are required to use the Grants Management Module (GMM) for their grants management services (tracking and receiving various award actions, general correspondence, post-award amendments and requests etc.). The recipient authorizing official identified in box 10a., and recipient project director identified in box 9b., must ensure they are registered with GMM and have the appropriate role(s) assigned to them by their organization. If there is a change in key personnel, please refer to the Special Clause for Change in Key Personnel below.

Closeout Requirements – A final Federal Financial Report (SF-425), a Property Inventory and Disposition Statement if applicable, and a final Program Progress Report are due within 120 days after the expiration of the project period of the Notice of Award.

Overlapping Projects - Recipients with overlapping projects must be specifically cautious that approved costs on any budget, including match or cost share (if applicable), is not also included on any other federally financed program in either the current or a prior period.

Public Policy

The statutory authority for grants of this program is authorized under Title VII, Part C, Section 727 of the Rehabilitation Act of 1973, as amended. You must comply with all terms and conditions outlined in the grant award. This includes the Department of Health and Human Services (HHS) Grants Policy Statement (GPS). You must comply with HHS grants administration regulations, program statutes and regulations, and any applicable appropriation act requirements or limitations. The terms and conditions of this award include the provisions and requirements from the applicable notice of funding opportunity or other funding solicitation.

Terms and Conditions: Please visit ACL's website at <https://www.acl.gov/grants/managing-grant> to view the terms and conditions, including but not limited to:

- Prohibition on certain telecommunications and video surveillance services or equipment
- SAM.gov / DUNS Requirement
- Consolidated Appropriations Act
- National Policies including Trafficking Victims Protection Act, Whistleblower Protections, DOMA: Implementation of Same-Sex Spouses/Marriages, Stevens Amendment, and Antidiscrimination

Reporting Requirements

Reporting Requirements: Please visit ACL's website at <https://www.acl.gov/grants/managing-grant> to view the reporting requirements, including but not limited to:

- Federal Funding Accountability and Transparency Act (FFATA)
- Federal Awardee Performance and Integrity Information System (FAPIIS)

Program Progress Reports are due annually (within 120 days following the end of the project period), effective with the start date of the award. This report must be submitted through the Q90 reporting portal introduced in September of 2021.

Annual Federal Financial Reports are required. SF-425 Financial Reporting: For this grant award, the SF-425 shall be submitted using the HHS' Payment Management System (PMS). PMS website is located at: <https://pms.psc.gov>. An annual and final report is due within 120 days after 9/29/2022, which is 1/31/2023.

Federal Cash Reporting: On the SF-425 form, lines 10 a. through c. are reported on a quarterly calendar year basis (for the periods ending 12/31, 3/31, 6/30, 9/30) at the HHS' Payment Management System (PMS). PMS website is located at: <https://pms.psc.gov>. Reconciliation of advances and disbursements is required for each quarter and the report must be completed within 30 days of the end of each quarter (i.e., by 1/30, 4/30, 7/30, 10/30). This reporting requirement is separate from completing the entire SF-425 as denoted in the financial reporting term.

Special Clause for Change in Key Personnel

Per 2 CFR 200.308, recipients of federal funds must request approval from the grantor for a number of changes related to the grant, including a Change in Key Personnel identified in the application for federal funds or in the grant award. The regulation defines a Change in Key Personnel as the replacement or change in status (such as an absence for any continuous period of 3 months or more, or reduction of time devoted to the project by 25 percent or more from the level in the approved application) of the Principal Investigator/Project Director (PI/PD).

Please click on following link for ACL process to request Change in Key Personnel: [Mandatory/Formula Grants in the Non-Discretionary Grants Module of GrantSolutions](#).

Staff Contacts

Please go to the [Centers for Independent Living](#) page on ACL.gov then scroll down to the **Office of Independent Living Programs Contact List** and select to find Independent Living Administration Project Officer assigned to your state.