



**2022 HUD NOFO
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"/> New – Expansion of Existing Project <input type="checkbox"/> New		
Project Type	<input type="checkbox"/> CoC Bonus <input type="checkbox"/> HMIS <input type="checkbox"/> PH-PSH <input type="checkbox"/> DV Bonus; <input type="checkbox"/> SSO-CE <input type="checkbox"/> PH-RRH <input type="checkbox"/> Joint TH&PH-RRH		
Date Range of Current Grant	____/____/____ to ____/____/____		
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.

Attachment SAM

CESC, Inc.

Day Services at CESC, Inc. Project Application

C.1. SAM Registration



CESC, INC.

Unique Entity ID DN2BR6LVXM96	CAGE / NCAGE 89CC6	Purpose of Registration Federal Assistance Awards Only
Registration Status Active Registration	Expiration Date Jan 5, 2023	
Physical Address 2650 Municipal WAY Tallahassee, Florida 32304-3804 United States	Mailing Address PO Box 2194 Tallahassee, Florida 32316 United States	

Business Information

Doing Business as Kearney Center, The	Division Name (blank)	Division Number (blank)
Congressional District Florida 05	State / Country of Incorporation Florida / United States	URL http://cesctlh.org/

Registration Dates

Activation Date Dec 8, 2021	Submission Date Dec 6, 2021	Initial Registration Date Feb 28, 2019
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Entity Dates

Entity Start Date Aug 18, 2015	Fiscal Year End Close Date Dec 31
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Immediate Owner

CAGE (blank)	Legal Business Name (blank)
------------------------	---------------------------------------

Highest Level Owner

CAGE (blank)	Legal Business Name (blank)
------------------------	---------------------------------------

Executive Compensation

Registrants in the System for Award Management (SAM) respond to the Executive Compensation questions in accordance with Section 6202 of P.L. 110-252, amending the Federal Funding Accountability and Transparency Act (P.L. 109-282). This information is not displayed in SAM. It is sent to USAspending.gov for display in association with an eligible award. Maintaining an active registration in SAM demonstrates the registrant responded to the questions.

Proceedings Questions

Registrants in the System for Award Management (SAM) respond to proceedings questions in accordance with FAR 52.209-7, FAR 52.209-9, or 2.C.F.R. 200 Appendix XII. Their responses are not displayed in SAM. They are sent to FAPIIS.gov for display as applicable. Maintaining an active registration in SAM demonstrates the registrant responded to the proceedings questions.

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)	Entity Type Business or Organization	Organization Factors (blank)
Profit Structure Non-Profit Organization		

Socio-Economic Types

Check the registrant's Repts & 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.

Other Entity Qualifiers**Domestic Shelter****Financial Information**

Accepts Credit Card Payments
No

Debt Subject To Offset
No

EFT Indicator
0000

CAGE Code
89CC6

Points of Contact**Electronic Business**

♀
Doris Nawrocki, Administrative Assistance

2650 Municipal WAY
Tallahassee, Florida 32304
United States

Government Business

♀
Doris Nawrocki, Administrative Assistance

2650 Municipal WAY
Tallahassee, Florida 32304
United States

Service Classifications**NAICS Codes**

Primary	NAICS Codes	NAICS Title
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Disaster Response

This entity does not appear in the disaster response registry.

Attachment DUNS

CESC, Inc.

Day Services at CESC, Inc. Project Application

C.2. DUNS Number

065758382

Katherine Del Signore

From: Dun & Bradstreet <DandB@click.dandb.com>
Sent: Friday, September 16, 2022 7:19 PM
To: Katherine Del Signore
Subject: Your DUNS Lookup Request for Cesc, Inc.



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

\$FIRST_NAME\$ Del Signore,

The following is the Dun & Bradstreet D-U-N-S® Number for **Cesc, Inc.**

D-U-N-S number: **065758382**

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](#).

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101 JFK Parkway, Short Hills, NJ 07078

Attachment Code of Conduct

CESC, Inc.

Day Services at CESC, Inc. Project Application

C.3. Code of Conduct

Extraction from CESC, Inc. Employee Handbook

WORKPLACE POLICIES

STANDARDS OF CONDUCT

Each employee has an obligation to observe and follow our policies and to maintain proper standards of conduct at all times. If an individual's behavior interferes with orderly and efficient operations, corrective measures will be taken.

Disciplinary action for violation of any of our workplace policies, whether or not they are contained within this handbook, may include a verbal warning, a written warning, suspension with or without pay, or termination of employment. The appropriate disciplinary action imposed will be determined by the supervisor. One form of discipline does not necessarily precede another.

EMPLOYEE CONDUCT OUTSIDE OF WORK HOURS

Employees are expected to conduct themselves appropriately at all times. Conduct whether on or off the job, that adversely affects the employee's ability to continue to perform his or her current job, or that adversely affects the agency's reputation or ability to carry out its assigned mission is not allowed. Employees exhibiting such behavior will be disciplined appropriately or terminated.

ABSENTEEISM AND TARDINESS

Each of our employees plays an important role in getting the day's work done. Therefore, each employee is expected to be at his or her work station on time each day. Absenteeism or tardiness, even for good reasons, is disruptive to our operations and interferes with our ability to satisfy client needs. Excessive absenteeism or tardiness can result in discipline up to and including termination.

If you are going to be late or absent from work for any reason, you must personally notify your supervisor as far in advance as possible so that proper arrangements can be made to handle your work during your absence. Of course, some situations may arise in which prior notice cannot be given. In those cases, we expect you to notify your supervisor as soon as possible.

When absence is due to illness, the Company reserves the right to require appropriate medical documentation.

An employee who is absent from work for three days without providing notice to their supervisor will be assumed to have voluntarily resigned their position.

TIMEKEEPING PROCEDURES

Employees are expected to be on time daily and remain on the job throughout the regularly scheduled workday. Employees must accurately record their actual time worked for payroll and benefit purposes.

Non-exempt employees must record the time work begins and ends, as well as the beginning and ending time of breaks and any departure from work for any non-work-related reason, on the timesheet. Non-exempt employees may not start work until their scheduled starting time.

Exempt employees are required to report full days of absence from work for reasons such as leaves of absence, paid time off leave or personal business.

Attachment Audit

CESC, Inc.

Day Services at CESC, Inc. Project Application

C.4. Audit Management Letter

Provided by Thomas Howell Ferguson for 2020 Audit

Note: CESC, Inc. changed its fiscal year to July 1 – June 30. Currently in process of completing the audit for January 1, 2021 – June 30, 2022, to be available at the end of this calendar year.

Report of Independent Auditors

The Board of Directors
CESC, Inc.

Report on the Financial Statements

We have audited the accompanying consolidated financial statements of CESC, Inc. (the Center) which comprise the consolidated statements of financial position as of December 31, 2020 and 2019, the related consolidated statements of activities and changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

Management’s Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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.

Auditor’s Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the consolidated financial statements in order to design 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. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Page Two

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of CESC, Inc. as of December 31, 2020 and 2019, and the changes in its net assets, its functional expenses, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited the CESC, Inc.'s 2019 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated November 6, 2020. In our opinion, the summarized comparative information presented in the statement of activities and changes in net assets for the year ended December 31, 2019, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Thomas Howell Ferguson P.A.

Tallahassee, Florida
February 16, 2022

Attachment NONDISC

CESC, Inc.

Day Services at CESC, Inc. Project Application

C.5. Nondiscrimination Policy

Extraction from CESC, Inc. Employee Handbook

EQUAL EMPLOYMENT OPPORTUNITY

It is the Company's policy to provide equal employment opportunity for all applicants and employees. The Company does not unlawfully discriminate on the basis of race, color, religion, religious creed (including religious dress and religious grooming), sex (including pregnancy, perceived pregnancy, childbirth, breastfeeding, or related medical conditions), gender, gender identity (including transgender identity and transitioning), gender expression and sex stereotyping, national origin, ancestry, citizenship, age, physical or mental disability, legally protected medical condition or information (including genetic information), family care or medical leave status, military caregiver status, military status, veteran status, marital status, domestic partner status, sexual orientation, status as a victim of domestic violence, sexual assault or stalking, enrollment in a public assistance program, engaging in protected communications regarding employee wages, requesting a reasonable accommodation on the basis of disability or bona fide religious belief or practice, or any other basis protected by local, state, or federal laws. Consistent with the law, the Company also makes reasonable accommodations for disabled applicants and employees; for pregnant employees who request an accommodation with the advice of their health care providers, for pregnancy, childbirth, or related medical conditions; for employees who are victims of domestic violence, sexual assault, or stalking; and for applicants and employees based on their religious beliefs and practices.

This policy applies to all areas of employment including recruitment, hiring, training, promotion, compensation, benefits, transfer, disciplinary action, and social and recreational programs. It is the responsibility of every manager and employee to conscientiously follow this policy. Any employee having any questions regarding this policy should discuss them with the Human Resources Manager.

DIVERSITY AND INCLUSION POLICY

Company is committed to fostering, cultivating and preserving a culture of diversity, equity and inclusion. Our human capital is the most valuable asset we have. The collective sum of the individual differences, life experiences, knowledge, inventiveness, innovation, self-expression, unique capabilities and talent that our employees invest in their work represents a significant part of not only our culture, but our reputation and company's achievement as well.

We embrace and encourage our employees' differences in age, color, disability, ethnicity, family or marital status, gender identity or expression, language, national origin, physical and mental ability, political affiliation, race, religion, sexual orientation, socio-economic status, veteran status, and other characteristics that make our employees unique.

Company's diversity initiatives are applicable—but not limited—to our practices and policies on recruitment and selection; compensation and benefits; professional development and training; promotions; transfers; layoffs; terminations; and the ongoing development of a work environment built on the premise of gender and diversity equity that encourages and enforces:

- Respectful communication and cooperation between all employees.
- Teamwork and employee participation, permitting the representation of all groups and employee perspectives.
- Work/life balance through flexible work schedules to accommodate employees' varying needs.
- Employer and employee contributions to the communities we serve to promote a greater understanding and respect for the diversity.

All employees of Company have a responsibility to treat others with dignity and respect at all times. All employees are expected to exhibit conduct that reflects inclusion during work, at work functions on or off the work site, and at all other company-sponsored and participative events. All employees are also required to attend and complete Company's annual diversity awareness training to enhance their knowledge to fulfill this responsibility.

Any employee found to have exhibited any inappropriate conduct or behavior against others may be subject to disciplinary action.

Employees who believe they have been subjected to any kind of discrimination that conflicts with the company's diversity policy and initiatives should seek assistance from a supervisor or Human Resources.

ACCOMMODATIONS POLICY

It is the policy of this Company to afford equal opportunity to all employees, regardless of physical or mental disability. However, all employees with such disabilities are expected to perform the essential functions of their positions as both defined in their respective job descriptions or as performed on a regular basis as part of their normal responsibilities. All employees with disabilities are eligible for accommodations per the Americans with Disabilities Act. Such requests must be made to either the employee's direct supervisor or made to the Human Resource Department. While the Company cannot make all requested accommodations, it will work with the employees to define reasonable terms and supply such terms to the employee. If the employee cannot perform the essential functions of their position, with or without the requested accommodation, the employee may be separated from the Company.

POLICY AGAINST HARASSMENT, DISCRIMINATION AND RETALIATION

I. PURPOSE OF POLICY

The Company is committed to providing a workplace free of unlawful harassment and discrimination. This includes sexual harassment (which includes harassment based on pregnancy, perceived pregnancy, childbirth, breastfeeding, or related medical conditions) and harassment based on actual or perceived gender, gender identity (including transgender identity and transitioning), gender expression and sex stereotyping, as well as harassment based on such factors as race, color, religion, religious creed (including religious dress and religious grooming), national origin, ancestry, citizenship, age, physical or mental disability, legally-protected medical condition or information (including genetic information), family care or medical leave status, military caregiver status, military status, veteran status, marital status, domestic partner status, sexual orientation, status as a victim of domestic violence, sexual assault or stalking, enrollment in a public assistance program, engaging in protected communications regarding employee wages, requesting a reasonable accommodation on the basis of disability or bona fide religious belief or practice, or any other basis protected by federal, state, or local laws. The Company strongly disapproves of and will not tolerate harassment of or discrimination against applicants, employees, unpaid interns, or volunteers by managers, supervisors, co-workers or third parties with whom employees come into contact. Similarly, the Company will not tolerate harassment by its employees of non-employees with whom the Company employees have a business, service, or professional relationship.

II. HARASSMENT DEFINED

Harassment includes verbal, physical, and visual conduct that creates an intimidating, offensive, or hostile working environment or that interferes with an employee's work performance. Such conduct constitutes harassment when (1) submission to the conduct is made either an explicit or implicit condition of employment; (2) submission or rejection of the conduct is used as the basis for an employment decision; or (3) the harassment interferes with an employee's work performance or creates an intimidating, hostile, or offensive work environment.

Harassing conduct can take many forms and may include, but is not limited to, the following: slurs, jokes, insults, statements, gestures, teasing, assault, impeding or blocking another's movement or otherwise physically interfering with normal work, pictures, posters, symbols, drawings, or cartoons, violating someone's "personal space" (for example by blocking someone's way) foul or obscene language, leering, stalking, staring, unwanted or offensive letters or poems, offensive email or voicemail messages, or any

kind of verbal, visual or physical conduct that denigrates or shows hostility or aversion towards an individual because of any protected characteristic.

Sexually harassing conduct in particular may include all of these prohibited actions, as well as other unwelcome conduct, such as requests for sexual favors, conversation containing sexual comments, and other unwelcome sexual advances. Sexually harassing conduct can be by a person of either the same or opposite sex. Sexually harassing conduct need not be motivated by sexual desire to be violative of this policy.

III. REPORTING AND INVESTIGATING HARASSING, DISCRIMINATORY AND RETALIATORY CONDUCT

All employees, independent contractors, interns, and volunteers of the Company must promptly report any incidents of harassment, discrimination, and retaliation so that the Company can take appropriate action.

A. Complaint Reporting Process

It is the responsibility of all of us to contribute to a work environment that is free of unlawful bias, discrimination, harassment, and retaliation. Failure to bring forth a complaint prevents the Company from having the opportunity to correct the situation.

Any incidents of discrimination, harassment, or retaliation, including work-related harassment by any Company personnel or any other person, or any conduct believed to violate this policy, must be reported immediately to the Human Resources Manager, who is responsible for investigating harassment complaints. An individual is not required to bring a complaint to Human Resources Manager if the individual is uncomfortable doing so for any reason. In that case, complaints should be reported to the Director of Operations.

Managers and supervisors have a special responsibility under this policy. All levels of management and all supervisors are responsible for compliance with this Policy Against Harassment, Discrimination, and Retaliation AND for ensuring that everyone in their department is aware of, understands and adheres to this policy. Supervisors and managers who receive complaints or who observe or learn of discriminatory, harassing, or retaliatory conduct must immediately inform the Human Resources Manager or other appropriate company official so that an investigation may be initiated.

IV. CORRECTIVE ACTION

The Company prohibits conduct severe enough to be unlawful. Yet even more, the Company's workplace conduct standards also prohibit conduct and comments which are not severe enough to violate state or local or federal law—but which are still inappropriate in the workplace. For example, the Company prohibits abusive conduct in the workplace—whether or not it is based on a protected category.

As a result, the Company will take prompt, appropriate, and effective corrective action (e.g., remedial measures) any time it is established that discrimination, harassment, or retaliation in violation of this policy has occurred—whether or not such violation also violates the law.

Corrective action may include, for example: training, referral to counseling, or disciplinary action ranging from a verbal or written warning to termination of employment, depending on the circumstances. With regard to acts of harassment or discrimination by customers or vendors, corrective action will be taken after consultation with the appropriate management personnel.

The Company will not tolerate retaliation against any employee for making a good faith complaint of harassment, discrimination, or retaliation, or for cooperating in an investigation.

Attachment A

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.1. Administration - ESnap

Active eSnap profiles: Vicki Butler & Ashley Scott

[Home \(/\)](#) > [My HUD Exchange \(/hudexchange-portal/\)](#) > My Account

My Account

Login Information

Username [vicki.butler@cesctlh.org](#)

Password [Change password](#)

Personal Information

Vicki Butler

tallahassee, FLORIDA 32304

850-729-9000

[vicki.butler@cesctlh.org](#)

Organization

Organization Type: Non-profit or For-profit Organization

Organization Name: CESC, Inc.

[Update \(/hudexchange-portal/?display=editProfile\)](#)

HUD Program Experience

The HUD Program Experience information will populate your Learner Profile on HUD Exchange Learn. This information may be used by registrars for reviewing your training registration eligibility.

[Update \(/hudexchange-portal/my-account/hud-program-experience/\)](#)

Front Office Portal

Profile

My Account

Change Password

Workspace

Applicants

Contact Us

User Account

*** First Name:**

Middle Name:

*** Last Name:**

*** Email:**

*** Email Confirm:**

*** Default Application Language:**

*** User Name:** Vicki.butler@cesctlh.org



Save

Page Generation Time: < 0.1s

Front Office Portal

Profile

My Account

Change Password

Workspace

Applicants

Contact Us

User Account

*** First Name:**

Middle Name:

*** Last Name:**

*** Email:**

*** Email Confirm:**

*** Default Application Language:**

*** User Name:** ashley.scott@cesctlh.org



Save

Page Generation Time: < 0.1s

[Home \(/\)](#) > [My HUD Exchange \(/hudexchange-portal/\)](#) > My Account

My Account

Login Information

Username [ashley.scott@cesctlh.org](#)

Password [Change password](#)

Personal Information

ashley scott

tallahassee, FLORIDA 32304

850-729-9000

[ashley.scott@cesctlh.org](#)

Organization

Organization Type: Non-profit or For-profit Organization

Organization Name: CESC, Inc

[Update \(/hudexchange-portal/?display=editProfile\)](#)

HUD Program Experience

The HUD Program Experience information will populate your Learner Profile on HUD Exchange Learn. This information may be used by registrars for reviewing your training registration eligibility.

[Update \(/hudexchange-portal/my-account/hud-program-experience/\)](#)

Attachment D

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.2. Demonstrated Need

Narrative

BBCOC PIT Report

CESC Street Outreach HMIS Report

D.2. Demonstrated Need

Mission

The mission of CESC, Inc. is to offer help and hope by creating solutions that provide a path to self-sufficiency to those in poverty in the Big Bend region. In service to this mission, we are committed to providing a safe environment promoting dignity and respect.

CESC, Inc. has two major entities which supports our mission of ending homelessness and building a stronger healthier community. (1) The Kearney Center which is a 24-hour comprehensive emergency service center. It serves as a point of entry into assistance by coordinating services and responding to individuals in housing crisis for individuals until appropriate permanent housing can be arranged. The Kearney Center provides services to individuals experiencing homelessness who are 18 years of age or older and are not sex offenders.

(2) The Kearney Center's Health Services department which provides a holistic approach to healthcare for residents of the center's overnight program and the underserved members of our community. Our dental and health services programs provide free services to clients through volunteer dentist, nurses, and partnerships with local clinics and other medical institutions.

Project Need

This *Day Services* project at the Kearney Center will provide various supportive services to individuals experiencing homelessness, specifically those who report or are found to be unsheltered.

The Big Bend Continuum of Care identified 164 unique unsheltered individuals experiencing homelessness during the 2022 Point in Time count (PIT). The PIT count identified vulnerable populations in the unsheltered category such as, 6 of the 164 unique individuals are children or youth, 49 females, 1 who is non-binary, and 77 who met the criteria for being chronically homeless. These individuals are statistically at a much greater risk of experiencing violent crimes, being trafficked, and death while living in such conditions.

Over the last six months, 256 unique individuals have been identified by the new CESC, Inc. Street Outreach program, *Kearney on the Go*. The HMIS report shows 160, but there are 96 unsheltered individuals that opted out of being entered into the HMIS database. The 160 reported identified vulnerable populations in the unsheltered category as 45 being chronically homeless with 45% of them being ages 55 and up. They have been able to access some services with the team's assistance, but the environment alone restricts what can be completed on the street. Some of the struggles include limited transportation, relocating individuals due to their transit live style, and increased incarcerations due to property trespassing laws.

The objective of the *Day Services* project is to reduce the number of individuals experiencing unsheltered homelessness by providing them access to services in a single centralized location. The services within the program will address the following issues:

- Decrease length of an individual's homelessness episode by connecting them to the appropriate support services.
- Reduce missed appointments and opportunities as well as expensive transportation costs and limitations.
- Ensure supportive services are available that are essential to ending their homelessness episode without requiring a shelter bed.
- Address health concerns brought on by malnutrition, limited access, and inaccessible hygiene.
- Increase their stability and income with H3LP FL's assistance in providing job placement opportunities, obtaining vital documentation such as birth certificates and state identification cards.
- Connect individuals with housing opportunities.

2022 Point-in-Time Count FL-506 Tallahassee/Leon County CoC

Population: Sheltered and Unsheltered Count

Persons in Households with at least one Adult and one Child

	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total Number of Households	37	3	3	43
Total Number of persons (Adults & Children)	121	7	11	139
Number of Persons (under age 18)	76	3	3	82
Number of Persons (18 - 24)	6	0	2	8
Number of Persons (over age 24)	39	4	6	49

Gender (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Female	73	5	6	84
Male	48	2	5	55
Gender that is not singularly 'Female' or 'Male'	0	0	0	0
Questioning	0	0	0	0
Transgender	0	0	0	0

Ethnicity (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Non-Hispanic/Non-Latino	107	6	11	124
Hispanic/Latino	14	1	0	15

2022 Point-in-Time Count FL-506 Tallahassee/Leon County CoC

Race (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
American Indian, Alaska Native, or Indigenous	2	0	0	2
Asian or Asian American	0	0	0	0
Black, African American, or African	87	5	1	93
Native Hawaiian or Pacific Islander	4	0	0	4
White	21	2	8	31
Multiple Races	7	0	2	9

Chronically Homeless (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total number of households	1		0	1
Total number of persons	2		0	2

Population: Sheltered and Unsheltered Count

Persons in Households with only Children

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	13	0	0	0	13
Total Number of children (under age 18)	20	0	0	0	20

Gender (only children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	14	0	0	0	14
Male	6	0	0	0	6
Gender that is not singularly 'Female' or 'Male'	0	0	0	0	0
Questioning	0	0	0	0	0
Transgender	0	0	0	0	0

Ethnicity (only children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	19	0	0	0	19
Hispanic/Latino	1	0	0	0	1

Race (only children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
American Indian, Alaska Native, or Indigenous	2	0	0	0	2
Asian or Asian American	0	0	0	0	0
Black, African American, or African	16	0	0	0	16
Native Hawaiian or Pacific Islander	0	0	0	0	0
White	2	0	0	0	2
Multiple Races	0	0	0	0	0

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

2022 Point-in-Time Count FL-506 Tallahassee/Leon County CoC

Population: Sheltered and Unsheltered Count

Persons in Households without Children

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	239	70	0	141	450
Total Number of persons (Adults)	239	70	0	153	462
Number of Persons (18 - 24)	7	0	0	1	8
Number of Persons (over age 24)	232	70	0	152	454

Gender (adults)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	77	27	0	43	147
Male	162	43	0	109	314
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 (adults)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	226	68	0	139	433
Hispanic/Latino	13	2	0	14	29

2022 Point-in-Time Count FL-506 Tallahassee/Leon County CoC

Race (adults)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
American Indian, Alaska Native, or Indigenous	2	0	0	8	10
Asian or Asian American	2	1	0	0	3
Black, African American, or African	142	49	0	53	244
Native Hawaiian or Pacific Islander	3	1	0	2	6
White	82	18	0	75	175
Multiple Races	8	1	0	15	24

Chronically Homeless (adults)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total number of persons	74		0	77	151

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

Report Run History

Report ID	Date Ran (Run-time)	Report Type Name	User Creating	Running Provider	Running User	Report Status
258320	09/16/2022 08:35:27 PM (0.17 mins)	COCAPR	Megan Duncan	FL506 - BBCoC: CESC	Megan Duncan	Completed
258308	09/16/2022 02:29:22 PM (0.15 mins)	COCAPR	Megan Duncan	FL506 - BBCoC: CESC	Megan Duncan	Completed

Showing 1-2 of 2

Report Options

Name: Outreach Jan - Sep

Description:

Provider Type: Provider Reporting Group

Provider *: FL506 - BBCoC: CESC ARPA (SO) (9696)
 This provider AND its subordinates This provider ONLY

Program Date Range *: 01/01/2022 to 09/16/2022

Entry/Exit Types *: Basic HUD PATH Quick Call RHY Standard VA HPRP (Retired)

CoC-APR Report Results - Date Ran: 09/16/2022 08:35:27 PM - Report ID: 258320

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: CESC	9350	FL506 - BBCoC: CESC ARPA (SO)	9696	Street Outreach (HUD)				FL-506	129073	False																	

Showing 1-1 of 1

5a - Report Validations Table

Report Validations Table	
1. Total Number of Persons Served	160
2. Number of Adults (age 18 or over)	150
3. Number of Children (under age 18)	8
4. Number of Persons with Unknown Age	2
5. Number of Leavers	158
6. Number of Adult Leavers	150
7. Number of Adult and Head of Household Leavers	152
8. Number of Stayers	2
9. Number of Adult Stayers	0
10. Number of Veterans	14
11. Number of Chronically Homeless Persons	46
12. Number of Youth Under Age 25	2
13. Number of Parenting Youth Under Age 25 with Children	0
14. Number of Adult Heads of Household	134
15. Number of Child and Unknown-Age Heads of Household	2
16. Heads of Households and Adult Stayers in the Project 365 Days or More	0

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)	0	0	0	0	0%
SSN (3.2)	0	0	0	0	0%
Date of Birth (3.3)	0	0	0	0	0%
Race (3.4)	0	0		0	0%
Ethnicity (3.5)	0	0		0	0%
Gender (3.6)	0	0		0	0%
Overall Score				0	0%

6b - Data Quality: Universal Data Elements

Data Element	Error Count	% of Error Rate
Veteran Status (3.7)	0	0%
Project Start Date (3.10)	0	0%

Relationship to Head of Household (3.15)	0	0%
Client Location (3.16)	0	0%
Disabling Condition (3.8)	2	1%

6c - Data Quality: Income and Housing Data Quality

Data Element	Error Count	% of Error Rate
Destination (3.12)	0	0%
Income and Sources (4.2) at Start	2	1%
Income and Sources (4.2) at Annual Assessment	0	0%
Income and Sources (4.2) at Exit	2	1%

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	4			1	1	1	25%
TH	0	0	0	0	0	0	0%
PH(all)	0	0	0	0	0	0	0%
Total	4						25%

6e - Data Quality: Timeliness

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

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)	0	0	0%
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	150	147	3		0
Children	8		8	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	2	0	0	0	2
Total	160	147	11	0	2
For PSH and RRH - the total persons served who moved into housing	0	0	0	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	0	0	0	0	0
April	2	2	0	0	0
July	8	8	0	0	0
October	0	0	0	0	0

8a - Number of Households Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Total Households	136	132	2	0	2
For PSH and RRH - the total persons served who moved into housing	0	0	0	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	0	0	0	0	0
April	0	0	0	0	0
July	4	4	0	0	0
October	0	0	0	0	0

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	0	0	0	0
2-5 Times	0	0	0	0
6-9 Times	0	0	0	0

10+ Times	0	0	0	0	
Total Persons Contacted	0	0	0	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	0	0	0	0	
2-5 Times	0	0	0	0	
6-9 Times	0	0	0	0	
10+ Times	0	0	0	0	
Total Persons Engaged	0	0	0	0	
Rate of Engagement	0%	0%	0%	0%	
10a - Gender of Adults					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Male	108	106	2	0	
Female	42	41	1	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	150	147	3	0	
10b - Gender of Children					
	Total	With Children and Adults	With Only Children	Unknown Household Type	
Male	4	4	0	0	
Female	4	4	0	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	8	8	0	0	
10c - Gender of Persons Missing Age Information					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	2	0	0	0	2
Female	0	0	0	0	0
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	3		3	0	0
5 - 12	2		2	0	0
13 - 17	3		3	0	0
18 - 24	2	2	0		0
25 - 34	18	17	1		0
35 - 44	25	23	2		0
45 - 54	37	37	0		0
55 - 61	39	39	0		0
62 +	29	29	0		0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	2	0	0	0	2
Total	160	147	11	0	2
12a - Race					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
White	99	88	11	0	0
Black, African American, or African	42	41	0	0	1
Asian or Asian American	1	1	0	0	0
American Indian, Alaska Native, or Indigenous	5	5	0	0	0

Native Hawaiian or Pacific Islander	2	2	0	0	0
Multiple Races	5	5	0	0	0
Client Doesn't Know/Client Refused	4	4	0	0	0
Data Not Collected	2	1	0	0	1
Total	160	147	11	0	2

12b - Ethnicity

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Non-Hispanic/Non-Latin(a)(o)(x)	146	134	11	0	1
Hispanic/Latin(a)(o)(x)	5	5	0	0	0
Client Doesn't Know/Client Refused	1	1	0	0	0
Data Not Collected	8	7	0	0	1
Total	160	147	11	0	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	59	59	0	0	0	0
Alcohol Use Disorder	13	13	0	0	0	0
Drug Use Disorder	10	10	0	0	0	0
Both Alcohol and Drug Use Disorders	11	11	0	0	0	0
Chronic Health Condition	38	38	0	0	0	0
HIV/AIDS	2	2	0	0	0	0
Development Disability	9	8	1	0	0	0
Physical Disability	59	58	0	0	0	1

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	59	59	0	0	0	0
Alcohol Use Disorder	13	13	0	0	0	0
Drug Use Disorder	10	10	0	0	0	0
Both Alcohol and Drug Use Disorders	11	11	0	0	0	0
Chronic Health Condition	38	38	0	0	0	0
HIV/AIDS	2	2	0	0	0	0
Development Disability	9	8	1	0	0	0
Physical Disability	59	58	0	0	0	1

13c1 - Physical and Mental Health Conditions of Stayers

	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	0	0	0	0	0	0
Alcohol Use Disorder	0	0	0	0	0	0
Drug Use Disorder	0	0	0	0	0	0
Both Alcohol and Drug Use Disorders	0	0	0	0	0	0
Chronic Health Condition	0	0	0	0	0	0
HIV/AIDS	0	0	0	0	0	0
Development Disability	0	0	0	0	0	0
Physical Disability	0	0	0	0	0	0

13a2 - Number of 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
None	36	27	1	8	0	0
1 Condition	30	28	1	0	0	1
2 Conditions	28	28	0	0	0	0
3+ Conditions	34	34	0	0	0	0
Condition Unknown	3	3	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0
Data Not Collected	29	27	1	0	0	1
Total	160	147	3	8	0	2

13b2 - Number of 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
None	34	27	1	6	0	0
1 Condition	30	28	1	0	0	1
2 Conditions	28	28	0	0	0	0
3+ Conditions	34	34	0	0	0	0

Condition Unknown	3	3	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0
Data Not Collected	29	27	1	0	0	1
Total	158	147	3	6	0	2
13c2 - Number of Conditions for Stayers						
	Total Persons	Without Children	Adults in HH with Children and Adults	Children in HH with Children and Adults	With Only Children	Unknown Household Type
None	2	0	0	2	0	0
1 Condition	0	0	0	0	0	0
2 Conditions	0	0	0	0	0	0
3+ Conditions	0	0	0	0	0	0
Condition Unknown	0	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0
Data Not Collected	0	0	0	0	0	0
Total	2	0	0	2	0	0
14a - Domestic Violence History						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Yes	18	18	0	0	0	
No	89	86	2	0	1	
Client Doesn't Know/Client Refused	2	2	0	0	0	
Data Not Collected	43	41	1	0	1	
Total	152	147	3	0	2	
14b - Persons Fleeing Domestic Violence						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Yes	0	0	0	0	0	
No	15	15	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	0	
Data Not Collected	3	3	0	0	0	
Total	18	18	0	0	0	
15 - Living Situation						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Homeless Situations						
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	8	8	0	0	0	
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0	
Place not meant for habitation	86	84	1	0	1	
Safe Haven	0	0	0	0	0	
Host Home (non-crisis)	0	0	0	0	0	
Subtotal	94	92	1	0	1	
Institutional Settings						
Psychiatric hospital or other psychiatric facility	0	0	0	0	0	
Substance abuse treatment facility or detox center	0	0	0	0	0	
Hospital or other residential non-psychiatric medical facility	5	5	0	0	0	
Jail, prison, or juvenile detention facility	3	3	0	0	0	
Foster care home or foster care group home	0	0	0	0	0	
Long-term care facility or nursing home	0	0	0	0	0	
Residential project or halfway house with no homeless criteria	0	0	0	0	0	
Subtotal	8	8	0	0	0	
Other Locations						
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0	
Owned by client, no ongoing housing subsidy	2	2	0	0	0	
Owned by client, with ongoing housing subsidy	0	0	0	0	0	
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0	
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0	
Rental by client in a public housing unit	0	0	0	0	0	
Rental by client, no ongoing housing subsidy	8	7	1	0	0	
Rental by client, with VASH housing subsidy	0	0	0	0	0	
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0	
Rental by client, with other housing subsidy (including RRH)	0	0	0	0	0	
Hotel or motel paid for without emergency shelter voucher	2	2	0	0	0	
Staying or living in a friend's room, apartment or house	6	5	1	0	0	
Staying or living in a family member's room, apartment or house	6	6	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	0	
Data Not Collected	26	25	0	0	1	

Subtotal	50	47	2	0	1
Total	152	147	3	0	2

16 - Cash Income - Ranges

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
No Income	72	0	72
\$1 - 150	0	0	0
\$151 - \$250	2	0	2
\$251 - \$500	1	0	1
\$501 - \$1000	21	0	21
\$1001 - \$1500	11	0	11
\$1501 - \$2000	4	0	4
\$2001 +	1	0	1
Client Doesn't Know/Client Refused	1	0	1
Data Not Collected	37	0	37
Number of adult stayers not yet required to have an annual assessment		0	
Number of adult stayers without required annual assessment		0	
Total Adults	150	0	150

17 - Cash Income - Sources

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	8	0	8
Unemployment Insurance	2	0	2
Supplemental Security Income (SSI)	18	0	18
Social Security Disability Insurance (SSDI)	12	0	12
VA Service - Connected Disability Compensation	1	0	1
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	0	0	0
Retirement Income from Social Security	3	0	3
Pension or retirement income from a former job	0	0	0
Child Support	0	0	0
Alimony and other spousal support	0	0	0
Other Source	2	0	2
Adults with Income Information at Start and Annual Assessment/Exit		0	0

18 - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status

Number of Adults by Income Category	Number of Adults at Start	Number of Adults at Annual Assessment (Stayers)	Number of Adults at Exit (Leavers)
Adults with Only Earned Income (i.e., Employment Income)	8	0	8
Adults with Only Other Income	32	0	32
Adults with Both Earned and Other Income	0	0	0
Adults with No Income	79	0	79
Adults with Client Doesn't Know/Client Refused Income Information	1	0	1
Adults with Missing Income Information	29	0	29
Number of adult stayers not yet required to have an annual assessment		0	
Number of adult stayers without required annual assessment		0	
Total Adults	150	0	150
1 or More Source of Income	49	0	49
Adults with Income Information at Start and Annual Assessment/Exit		0	0

19a1 - Client Cash Income Change - Income Source - by Start and Latest Status

Income Change by Income Category (Universe: Adult Stayers with Income Information at Start and Annual Assessment)	Had Income Category at Start and Did Not Have It at Annual Assessment	Retained Income Category But Had Less \$ at Annual Assessment Than at Start	Retained Income Category and Same \$ at Annual Assessment as at Start	Retained Income Category and Increased \$ at Annual Assessment	Did Not Have the Income Category at Start and Gained the Income Category at Annual Assessment	Did Not Have the Income Category at Start or at Annual Assessment	Total Adults (including those with No Income)	Performance Measure: Adults who Gained or Increased Income from Start to Annual Assessment, Average Gain	Performance measure: Percent of Persons who Accomplished this Measure
Number of Adults with Earned Income (i.e., Employment Income)	0	0	0	0	0	0	0	0	0%

Average Change in Earned Income	0	0		0	0			0	
Number of Adults with Other Income	0	0	0	0	0	0	0	0	0%
Average Change in Other Income	0	0		0	0			0	
Number of Adults with Any Income (i.e., Total Income)	0	0	0	0	0	0	0	0	0%
Average Change in Overall Income	0	0		0	0			0	

19a2 - Client Cash Income Change - Income Source - by Start and Exit

Income Change by Income Category (Universe: Adult Leavers with Income Information at Start and Exit)	Had Income Category at Start and Did Not Have It at Exit	Retained Income Category But Had Less \$ at Exit Than at Start	Retained Income Category and Same \$ at Exit as at Start	Retained Income Category and Increased \$ at Exit	Did Not Have the Income Category at Start and Gained the Income Category at Exit	Did Not Have the Income Category at Start or at Exit	Total Adults (including those with No Income)	Performance Measure: Adults who Gained or Increased Income from Start to Exit, Average Gain	Performance measure: Percent of Persons who Accomplished this Measure
Number of Adults with Earned Income (i.e., Employment Income)	0	0	8	0	0	107	119	0	0%
Average Change in Earned Income	0	0		0	0			0	
Number of Adults with Other Income	0	0	32	0	0	83	119	0	0%
Average Change in Other Income	0	0		0	0			0	
Number of Adults with Any Income (i.e., Total Income)	0	0	40	0	0	71	119	0	0%
Average Change in Overall Income	0	0		0	0			0	

19b - Disabling Conditions and Income for Adults at Exit

	AO: Adult with Disabling Condition	AO: Adult without Disabling Condition	AO: Total Adults	AO: percent with Disabling Condition by Source	AC: Adult with Disabling Condition	AC: Adult without Disabling Condition	AC: Total Adults	AC: percent with Disabling Condition by Source	UK: Adult with Disabling Condition	UK: Adult without Disabling Condition	UK: Total Adults	UK: percent with Disabling Condition by Source
Earned Income	0	7	7	0%	1	0	1	100%	0	0	0	0%
Supplemental Security Income (SSI)	17	1	18	94%	0	0	0	0%	0	0	0	0%
Social Security Disability Insurance (SSDI)	11	0	11	100%	0	0	0	0%	0	0	0	0%
VA Service - Connected Disability Compensation	1	0	1	100%	0	0	0	0%	0	0	0	0%
Private Disability Insurance	0	0	0	0%	0	0	0	0%	0	0	0	0%
Worker's Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%
Temporary Assistance for Needy Families (TANF)	0	0	0	0%	0	0	0	0%	0	0	0	0%
Retirement Income from Social Security	1	2	3	33%	0	0	0	0%	0	0	0	0%
Pension or retirement income from a former job	0	0	0	0%	0	0	0	0%	0	0	0	0%
Child Support	0	0	0	0%	0	0	0	0%	0	0	0	0%
Other Source	1	2	3	33%	0	0	0	0%	0	0	0	0%
No Sources	34	29	63	54%	0	1	1	0%	0	0	0	0%
Unduplicated Total Adults	61	40	101		1	1	2		0	0	0	

20a - Type of Non-Cash Benefit Source

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
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Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	35	0	35
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	0	0	0
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	1	0	1

20b - Number of Non-Cash Benefit Sources

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
No Sources	60	0	60
1 + Source(s)	35	0	35
Client Doesn't Know/Client Refused	1	0	1
Data Not Collected/Not stayed long enough for Annual Assessment	54	0	54
Total	150	0	150

21 - Health Insurance

	At Start	At Annual Assessment for Stayers	At Exit for Leavers
MEDICAID	28	0	26
MEDICARE	10	0	10
State Children's Health Insurance Program	0	0	0
Veteran's Administration (VA) Medical Services	3	0	3
Employer-Provided Health Insurance	0	0	0
Health Insurance obtained through COBRA	0	0	0
Private Pay Health Insurance	1	0	1
State Health Insurance for Adults	3	0	3
Indian Health Services Program	0	0	0
Other	1	0	1
No Health Insurance	83	0	83
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	53	0	53
Number of stayers not yet required to have an annual assessment		2	
1 Source of Health Insurance	27	0	25
More than 1 Source of Health Insurance	8	0	8

22a1 - Length of Participation - CoC Projects

	Total	Leavers	Stayers
30 days or less	159	157	2
31 to 60 days	0	0	0
61 to 90 days	1	1	0
91 to 180 days	0	0	0
181 to 365 days	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0
731 to 1,095 Days (2-3 Yrs)	0	0	0
1,096 to 1,460 Days (3-4 Yrs)	0	0	0
1,461 to 1,825 Days (4-5 Yrs)	0	0	0
More than 1,825 Days (>5 Yrs)	0	0	0
Data Not Collected	0	0	0
Total	160	158	2

22b - Average and Median Length of Participation in Days

	Leavers	Stayers
Average Length	0	25
Median Length	0	25

22c - Length of Time between Project Start Date and Housing Move-in Date

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
Total (persons moved into housing)	0	0	0	0	0
Average length of time to housing	0	0	0	0	0

Persons who were exited without move-in	0	0	0	0	0
Total	0	0	0	0	0
22e - Length of Time Prior to Housing - based on 3.917 Date Homelessness Started					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
731 days or more	0	0	0	0	0
Total (persons moved into housing)	0	0	0	0	0
Not yet moved into housing	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total Persons	0	0	0	0	0
23c - Exit Destination - All persons					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing subsidy	0	0	0	0	0
Owned by client, with ongoing subsidy	0	0	0	0	0
Rental by client, no ongoing subsidy	0	0	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, other ongoing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	1	1	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	135	125	9	0	1
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	136	126	9	0	1
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	20	19	0	0	1
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	2	2	0	0	0
Subtotal	22	21	0	0	1
Total	158	147	9	0	2
Total persons exiting to positive housing destinations	1	1	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage					

	1%	1%	0%	0%	0%
25a - Number of Veterans					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Chronically Homeless Veteran	2	2	0	0	
Non-Chronically Homeless Veteran	12	12	0	0	
Not a veteran	134	131	3	0	
Client Doesn't Know/Client Refused	0	0	0	0	
Data Not Collected	2	2	0	0	
Total	150	147	3	0	
25b - Number of Veteran Households					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Chronically Homeless Veteran	2	2	0	0	
Non-Chronically Homeless Veteran	11	11	0	0	
Not a veteran	119	117	2	0	
Client Doesn't Know/Client Refused	0	0	0	0	
Data Not Collected	2	2	0	0	
Total	134	132	2	0	
25c - Gender - Veterans					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Male	14	14	0	0	
Female	0	0	0	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	
Total	14	14	0	0	
25d - Age - Veterans					
	Total	Without Children	With Children and Adults	Unknown Household Type	
18 - 24	0	0	0	0	
25 - 34	1	1	0	0	
35 - 44	1	1	0	0	
45 - 54	3	3	0	0	
55 - 61	5	5	0	0	
62 +	4	4	0	0	
Client Doesn't Know/Client Refused					
Data Not Collected					
Total	14	14	0	0	
25e - Physical and Mental Health Conditions - Veterans					
	Conditions at Start	Conditions at Latest Assessment for Stayers	Conditions at Exit for Leavers		
Mental Health Disorder	4	0	4		
Alcohol Use Disorder	2	0	2		
Drug Use Disorder	1	0	1		
Both Alcohol and Drug Use Disorders	0	0	0		
Chronic Health Condition	2	0	2		
HIV/AIDS	2	0	2		
Development Disability	1	0	1		
Physical Disability	5	0	5		
25f - Cash Income Category - Income Category - by Start and Annual/Exit Status - Veterans					
Number of Veterans by Income Category	Number of Veterans at Start	Number of Veterans at Annual Assessment (Stayers)	Number of Veterans at Exit (Leavers)		
Veterans with Only Earned Income (i.e., Employment Income)	2	0	2		
Veterans with Only Other Income	4	0	4		
Veterans with Both Earned and Other Income	0	0	0		
Veterans with No Income	7	0	7		
Veterans with Client Doesn't Know/Client Refused Income Information	0	0	0		
Veterans with Missing Income Information	1	0	1		
Number of veterans not yet required to have an annual assessment		0			

Number of veterans without required annual assessment		0	
Total Veterans	14	0	14

25g - Type of Cash Income Sources - Veterans

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	2	0	2
Unemployment Insurance	0	0	0
Supplemental Security Income (SSI)	3	0	3
Social Security Disability Insurance (SSDI)	2	0	2
VA Service - Connected Disability Compensation	1	0	1
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	0	0	0
Retirement Income from Social Security	0	0	0
Pension or retirement income from a former job	0	0	0
Child Support	0	0	0
Alimony and other spousal support	0	0	0
Other Source	0	0	0
Veterans with Income Information at Start and Annual Assessment/Exit		0	0

25h - Type of Non-Cash Benefit Sources - Veterans

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	0	0	0
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	0	0	0
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	0	0	0

25i - Exit Destination - Veterans

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	12	12	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	12	12	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0

Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	1	1	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	1	1	0	0	0
Subtotal	2	2	0	0	0
Total	14	14	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%

26a - Chronic Homeless Status - Number of Households w/at least one or more CH person					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	45	44	0	0	1
Not Chronically Homeless	33	33	0	0	0
Client Doesn't Know/Client Refused	3	3	0	0	0
Data Not Collected	55	52	2	0	1
Total	136	132	2	0	2

26b - Number of Chronically Homeless Persons by Household					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	46	45	0	0	1
Not Chronically Homeless	43	34	9	0	0
Client Doesn't Know/Client Refused	3	3	0	0	0
Data Not Collected	68	65	2	0	1
Total	160	147	11	0	2

26c - Gender of Chronically Homeless Persons					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	36	35	0	0	1
Female	10	10	0	0	0
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
Total	46	45	0	0	1

26d - Age of Chronically Homeless Persons					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
0 - 17	0		0	0	0
18 - 24	0	0	0		0
25 - 34	5	5	0		0
35 - 44	5	5	0		0
45 - 54	12	12	0		0
55 - 61	14	14	0		0
62 +	9	9	0		0
Client Doesn't Know/Client Refused	0	0	0		0
Data Not Collected	1	0	0		1
Total	46	45	0	0	1

26e - Physical and Mental Health Conditions - Chronically Homeless Persons				
	Conditions at Start	Conditions at Latest Assessment for Stayers	Conditions at Exit for Leavers	
Mental Health Disorder	33	0	33	
Alcohol Use Disorder	9	0	9	
Drug Use Disorder	0	0	0	
Both Alcohol and Drug Use Disorders	7	0	7	
Chronic Health Condition	23	0	23	
HIV/AIDS	0	0	0	
Development Disability	4	0	4	

Physical Disability	33	0	33		
26f - Client Cash Income - Chronically Homeless Persons					
	Number of Chronically Homeless Persons at Start	Number of Chronically Homeless Persons at Annual Assessment (Stayers)	Number of Chronically Homeless Persons at Exit (Leavers)		
Number of Chronically Homeless Persons by Income Category					
Chronically Homeless Persons with Only Earned Income (i.e., Employment Income)	0	0	0		
Chronically Homeless Persons with Only Other Income	15	0	15		
Chronically Homeless Persons with Both Earned and Other Income	0	0	0		
Chronically Homeless Persons with No Income	30	0	30		
Chronically Homeless Persons with Client Doesn't Know/Client Refused Income Information	0	0	0		
Chronically Homeless Persons with Missing Income Information	0	0	0		
Number of Chronically Homeless Persons not yet required to have an annual assessment		0			
Number of Chronically Homeless Persons without required annual assessment		0			
Total Chronically Homeless Persons	45	0	45		
26g - Type of Cash Income Sources - Chronically Homeless Persons					
	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers		
Earned Income	0	0	0		
Unemployment Insurance	1	0	1		
Supplemental Security Income (SSI)	9	0	9		
Social Security Disability Insurance (SSDI)	6	0	6		
VA Service - Connected Disability Compensation	0	0	0		
VA Non-Service Connected Disability Pension	0	0	0		
Private Disability Insurance	0	0	0		
Worker's Compensation	0	0	0		
Temporary Assistance for Needy Families (TANF)	0	0	0		
General Assistance (GA)	0	0	0		
Retirement Income from Social Security	0	0	0		
Pension or retirement income from a former job	0	0	0		
Child Support	0	0	0		
Alimony and other spousal support	0	0	0		
Other Source	0	0	0		
Chronically Homeless Persons with Income Information at Start and Annual Assessment/Exit		0	0		
26h - Type of Non-Cash Income Sources - Chronically Homeless Persons					
	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers		
Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	15	0	15		
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	0	0	0		
TANF Child Care Services	0	0	0		
TANF Transportation Services	0	0	0		
Other TANF-Funded Services	0	0	0		
Other Source	1	0	1		
27a - Age of Youth					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
12 - 17	0		0	0	0
18 - 24	2	2	0		
Client Doesn't Know/Client Refused					
Data Not Collected					
Total	2	2	0	0	
27b - Parenting Youth					
	Total Parenting Youth	Total Children of Parenting Youth	Total Persons	Total Households	
Parenting youth < 18	0	0	0	0	
Parenting youth 18 to 24	0	0	0	0	
27c - Gender - Youth					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	1	1	0	0	0
Female	1	1	0	0	0
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
Total	2	2	0	0	0
27d - Living Situation - Youth					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Place not meant for habitation	2	2	0	0	0
Safe Haven	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	2	2	0	0	0
Institutional Settings					
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Foster care home or foster care group home	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Locations					
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Staying or living in a friend's room, apartment or house	0	0	0	0	0
Staying or living in a family member's room, apartment or house	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	0	0	0	0	0
Total	2	2	0	0	0
27e - Length of Participation - Youth					
	Total	Leavers	Stayers		
30 days or less	2	2	0		
31 to 60 days	0	0	0		
61 to 90 days	0	0	0		
91 to 180 days	0	0	0		
181 to 365 days	0	0	0		
366 to 730 Days (1-2 Yrs)	0	0	0		
731 to 1,095 Days (2-3 Yrs)	0	0	0		
1,096 to 1,460 Days (3-4 Yrs)	0	0	0		
1,461 to 1,825 Days (4-5 Yrs)	0	0	0		
More than 1,825 Days (>5 Yrs)	0	0	0		
Data Not Collected	0	0	0		
Total	2	2	0		
27f - Exit Destination - Youth					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0

Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	2	2	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	2	2	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	2	2	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%

27g - Cash Income - Sources - Youth

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	0	0	0
Unemployment Insurance	0	0	0
Supplemental Security Income (SSI)	0	0	0
Social Security Disability Insurance (SSDI)	0	0	0
VA Service - Connected Disability Compensation	0	0	0
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	0	0	0
Retirement Income from Social Security	0	0	0
Pension or retirement income from a former job	0	0	0
Child Support	0	0	0
Alimony and other spousal support	0	0	0
Other Source	0	0	0
Adults with Income Information at Start and Annual Assessment/Exit		0	0

27h - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status - Youth

Number of Youth by Income Category	Number of Youth at Start	Number of Youth at Annual Assessment (Stayers)	Number of Youth at Exit (Leavers)
Youth with Only Earned Income (i.e., Employment Income)	0	0	0
Youth with Only Other Income	0	0	0
Youth with Both Earned and Other Income	0	0	0
Youth with No Income	1	0	1

Youth with Client Doesn't Know/Client Refused Income Information	0	0	0
Youth with Missing Income Information	1	0	1
Number of youth stayers not yet required to have an annual assessment		0	
Number of youth stayers without required annual assessment		0	
Total Youth	2	0	2
1 or More Source of Income	1	0	1
Youth with Income Information at Start and Annual Assessment/Exit		0	0

27i - Disabling Conditions and Income for Youth at Exit																
	AO: Youth with Disabling Condition	AO: Youth without Disabling Condition	AO: Total Youth	AO: percent with Disabling Condition by Source	AC: Youth with Disabling Condition	AC: Youth without Disabling Condition	AC: Total Youth	AC: percent with Disabling Condition by Source	CO: Youth with Disabling Condition	CO: Youth without Disabling Condition	CO: Total Youth	CO: percent with Disabling Condition by Source	UK: Youth with Disabling Condition	UK: Youth without Disabling Condition	UK: Total Youth	UK: percent with Disabling Condition by Source
Earned Income	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Supplemental Security Income (SSI)	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Social Security Disability Insurance (SSDI)	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
VA Service - Connected Disability Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Private Disability Insurance	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Worker's Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Temporary Assistance for Needy Families (TANF)	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Retirement Income from Social Security	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Pension or retirement income from a former job	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Child Support	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Other Source	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
No Sources	0	1	1	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Unduplicated Total Youth	0	1	1		0	0	0		0	0	0		0	0	0	

Attachment E

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.3. Goals of the Homelessness Assistance Plan

D.3. Goals of Homelessness Assistance Program

The Big Bend Continuum of Care Homelessness Assistance Plan (HAP) 2021-2025 has identified seven system performance measures in which our community will show improvement in. The *Day Services* project will assist the Big Bend community in reaching our goals in three areas:

- Decreasing the number of homeless persons in the annual and PIT count.
- Increase or maintain income for persons in housing programs.
- Decrease the length of time a person remains homeless.

CESC, Inc.'s *Day Services* program will be able to assist its participants in these specific areas by creating easy access to local social service providers. The Kearney Center already has established partnerships with Ability 1st, Well Care, The Apalachee Center, Humana Health Insurance, Department of Children and Families, Veterans Affairs, Supportive Services for Veterans, Big Bend Cares, and Legal Services of North Florida. These community partners utilize office and meeting spaces at the Kearney Center on a weekly basis. These services include case management and housing services to clients with disabilities, providing mobility or accessibility equipment to disabled persons, health insurance, mental health services, help to apply and provide resources for the Food Stamps program, share information regarding Veteran's program benefits, conduct HIV testing and provide sex education, and legal services. Each service provides essential services to not only ending homelessness but in maintaining housing once it is achieved.

CESC, Inc. has a long-standing partnership with H3LP FL, by Chuck White. He works tirelessly to provide job opportunities to all clients. He also helps provide birth certificates, state identification cards, and bus passes for job interviews and medical appointments. He recently developed a partnership with a local law enforcement agency to help promote homeless persons as a preferred candidate for their job vacancies.

Additionally, *Day Service* program clients will have access to classes held in the Kearney Center's Enrichment Center. The Enrichment Center holds weekly classes designed to assist individuals to develop life skills and healthier habits in an effort to increase their stability once housed. These partnerships include Big Bend Cares, Bright Futures, Disc Village, Tobacco Free Florida, Hancock and Whitney Bank, Voting Rights Project, Don Adams Cutz, Full Restoration Ministries, and St. John's AME Church. These providers host classes for financial literacy, voting rights information, art therapy, drug safety, becoming tobacco free, free haircuts, bible study, worship, and more.

Attachment CE

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.4. Coordinated Entry

D.4. Coordinated Entry (CE)

CESC, Inc. currently participates in the BBCoC Coordinated Entry Assessment and Referral process. We serve people experiencing homelessness regardless of race, color, national origin, religion, sex, age, familial status, disability, sexual orientation, gender identity, or marital status.

We are committed to completing BBCoC efforts listed below.

1. Coordinated Entry is completed during the initial intake.
2. The VI-SPDAT is the screening tool used for this process.
3. Referrals, based on the results of the assessment, to homelessness assistance programs and other related programs when appropriate are then made.
4. The Homeless Management Information System (HMIS) is utilized in capturing and managing data related to assessment.
5. Only accept referrals through the Coordinated Entry process.
6. Prioritization of consumers with the most barriers to returning to housing for more strategic uses of limited resources.

Attachment F

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.5. Racial Equity

D.5. Racial Equity

HMIS Reports

Included is our HMIS report for clients total served from January – August 2022. Additionally, we are including an HMIS report that reflects the Street Outreach unsheltered individuals that we have connected with.

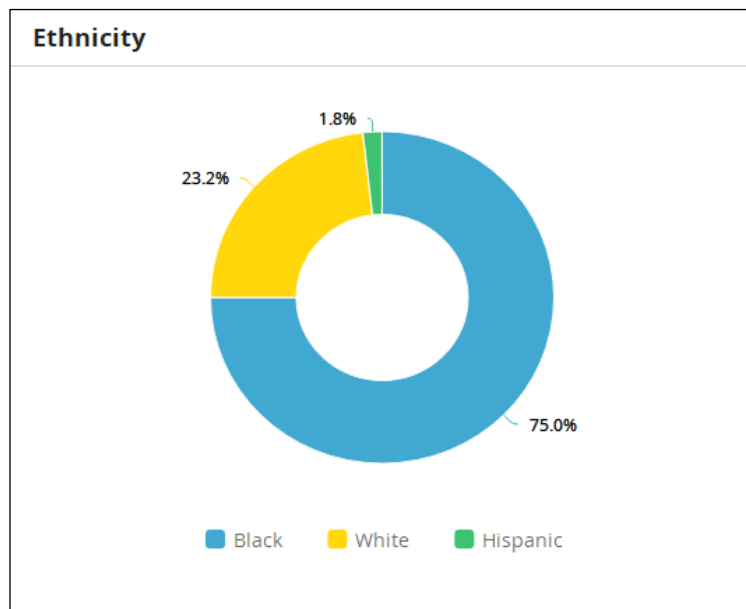
Ethnicity	Totals	Percentage	Outreach Totals	Percentage
White	300	36%	99	62%
Black, African American, or African	465	56%	42	26%
Asian or Asian American	7	0.8%	1	0.6%
American Indian, Alaska Native, or Indigenous	7	0.8%	5	3%
Native Hawaiian or Pacific Islander	7	0.8%	2	1%
Multiple Races	26	3%	5	3%
Client Doesn't Know/Refused	17	2%	4	3%
Not Collected	9	1%	2	1%
Total	838		160	

CESC, Inc. Staffing

CESC, Inc.'s executive and direct service staff racial and ethnic makeup is reflected below as employed during January – August 2022. Executive staff includes the Chief Executive Officer, Director of Finance, Senior Grant Writer, Director of Marketing and Communications, Director of Shelter Operations, and Director of Health Services.

Direct service staff includes Direct Care, Intake and Diversion, Case Management, Food Service, Medical Clinic, and Dental staff.

Ethnicity	Totals	Percentage
White	13	23.2%
Black, African American, or African	42	75%
Hispanic or Latina/o/x	1	1.8%
Total	56	



Summary

CESC, Inc. is working towards a more diverse staffing plan in this fiscal year's hires to better reflect the racial and ethnic makeup of clients served. This Diversity, Equity and Inclusion strategy will focus on revamping the recruitment and hiring processes to focus on examination of interview bias, engage all staff in DE&I training, network and recruit from community focused diversity groups, and review job postings to focus on opportunity and skillset.

Report Run History

Report ID	Date Ran (Run-time)	Report Type	Name	User Creating	Running Provider	Running User	Report Status
256409	08/26/2022 04:11:28 PM (0.30 mins)	EsgCaper	RRH, Number Served, and Demographics (1 year from today)	Chloe Bare	FL506 - BBCoC: CESC	Chloe Bare	Completed
256408	08/26/2022 04:11:15 PM (0.46 mins)	EsgCaper	RRH, Number Served, and Demographics	Chloe Bare	FL506 - BBCoC: CESC	Chloe Bare	Completed
256167	08/22/2022 02:03:35 PM (0.08 mins)	EsgCaper	April ARPA	Chloe Bare	FL506 - BBCoC: CESC	Chloe Bare	Completed
255996	08/18/2022 10:45:32 AM (0.27 mins)	EsgCaper	Jan. - Dec. 2021	Chloe Bare	FL506 - BBCoC: CESC	Chloe Bare	Completed
255995	08/18/2022 10:45:08 AM (0.53 mins)	EsgCaper	Jan. 2022 - Present	Chloe Bare	FL506 - BBCoC: CESC	Chloe Bare	Completed

Showing 1-5 of 15

Report Options

Name	RRH, Number Served, and Demographics
Description	
Provider Type	<input checked="" type="radio"/> Provider <input type="radio"/> Reporting Group
Provider *	FL506 - BBCoC: CESC - Emergency Shelter (singles) (ES) (6536) <input type="radio"/> This provider AND its subordinates <input checked="" type="radio"/> This provider ONLY
Program Date Range *	01/01/2022 to 08/26/2022
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)

ESG Report Results - Date Ran: 08/26/2022 04:11:15 PM - Report ID: 256408

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: CESC - Emergency Shelter (singles) (ES)	6536	FL506 - BBCoC: CESC - Emergency Shelter (singles) (ES)	6536	Emergency Shelter (HUD)	Night-by-Night			FL-506	129073	False																	

Showing 1-1 of 1

5a - Report Validation Table

Report Validation Table	
1. Total Number of Persons Served	838
2. Number of Adults (age 18 or over)	817
3. Number of Children (under age 18)	1
4. Number of Persons with Unknown Age	20
5. Number of Leavers	526
6. Number of Adult Leavers	509
7. Number of Adult and Head of Household Leavers	524
8. Number of Stayers	312
9. Number of Adult Stayers	308
10. Number of Veterans	62
11. Number of Chronically Homeless Persons	194
12. Number of Youth Under Age 25	44
13. Number of Parenting Youth Under Age 25 with Children	0
14. Number of Adult Heads of Household	798
15. Number of Child And Unknown-Age Heads of Household	19
16. Heads of Households and Adult Stayers in the Project 365 Days or More	40

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)	0	0	3	3	0%
SSN (3.2)	16	6	33	55	7%
Date of Birth (3.3)	11	15	3	29	3%
Race (3.4)	14	9		23	3%
Ethnicity (3.5)	6	26		32	4%
Gender (3.6)	3	5		8	1%
Overall Score				87	10%

6b - Data Quality: Universal Data Elements

Data Element	Error Count	% of Error Rate
Veteran Status (3.7)	25	3%
Project Start Date (3.10)	0	0%
Relationship to Head of Household (3.15)	21	3%
Client Location (3.16)	0	0%
Disabling Condition (3.8)	117	14%

6c - Data Quality: Income and Housing Data Quality

Data Element	Error Count	% of Error Rate
Destination (3.12)	333	63%
Income and Sources (4.2) at Start	213	25%
Income and Sources (4.2) at Annual Assessment	40	100%
Income and Sources (4.2) at Exit	122	23%

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	836			87	116	118	17%
TH	0	0	0	0	0	0	0%
PH (all)	0	0	0	0	0	0	0%
Total	836						17%

6e - Data Quality: Timeliness

Time For Record Entry	Number of Project Start Records	Number of Project Exit Records
0 days	642	500
1 - 3 days	36	19
4 - 6 days	13	2
7 - 10 days	4	1
11+ days	14	4

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)	118	118	100%
Bed Night (All clients in ES - NBN)	118	118	100%

7a - Number of Persons Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Adults	817	817	0		0
Children	1		0	1	0
Client Doesn't Know/Client Refused	11	0	0	0	11
Data not collected	9	0	0	0	9
Total	838	817	0	1	20
For PSH and RRH - the total persons served who moved into housing	0	0	0	0	0

7b - Point-in-Time Count of Households on the Last Wednesday

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	234	233	0	0	1
April	245	242	0	0	3
July	323	317	0	0	6
October	0	0	0	0	0

8a - Number of Households Served					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Total Households	817	798	0	0	19
For PSH and RRH - the total persons served who moved into housing	0	0	0	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	229	228	0	0	1
April	234	231	0	0	3
July	312	306	0	0	6
October	0	0	0	0	0
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	1	0	0	0	
2-5 Times	0	0	0	0	
6-9 Times	0	0	0	0	
10+ Times	0	0	0	0	
Total Persons Contacted	1	0	0	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	0	0	0	0	
2-5 Times	0	0	0	0	
6-9 Times	0	0	0	0	
10+ Times	0	0	0	0	
Total Persons Engaged	0	0	0	0	
Rate of Engagement	0.00	0.00	0.00	0.00	
10a - Gender of Adults					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Male	566	566	0	0	
Female	242	242	0	0	
No Single Gender	1	1	0	0	
Questioning	1	1	0	0	
Transgender	5	5	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	
Data not collected	2	2	0	0	
Subtotal	817	817	0	0	
10b - Gender of Children					
	Total	With Children and Adults	With Only Children	Unknown Household Type	
Male	1	0	1	0	
Female	0	0	0	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	1	0	1	0	
10c - Gender of Persons Missing Age Information					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	8	0	0	0	8
Female	6	0	0	0	6
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	3	0	0	0	3
Data not collected	3	0	0	0	3
Subtotal	20	0	0	0	20

10d - Gender by Age Ranges

	Total	Under Age 18	Age 18-24	Age 25-61	Age 62 and over	Client Doesn't Know/Client Refused	Data not collected
Male	575	1	26	447	93	4	4
Female	248	0	14	201	27	4	2
No Single Gender	1	0	0	1	0	0	0
Questioning	1	0	0	1	0	0	0
Transgender	5	0	3	2	0	0	0
Client Doesn't Know/Client Refused	3	0	0	0	0	3	0
Data not collected	5	0	0	2	0	0	3
Subtotal	838	1	43	654	120	11	9

11 - Age

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Under 5	0		0	0	0
5 - 12	0		0	0	0
13 - 17	1		0	1	0
18 - 24	43	43	0		0
25 - 34	150	150	0		0
35 - 44	167	167	0		0
45 - 54	193	193	0		0
55 - 61	144	144	0		0
62 +	120	120	0		0
Client Doesn't Know/Client Refused	11	0	0	0	11
Data not collected	9	0	0	0	9
Total	838	817	0	1	20

12a - Race

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
White	300	297	0	1	2
Black, African American, or African	465	463	0	0	2
Asian or Asian American	7	7	0	0	0
American Indian, Alaska Native, or Indigenous	7	7	0	0	0
Native Hawaiian or Pacific Islander	7	7	0	0	0
Multiple Races	26	26	0	0	0
Client Doesn't Know/Client Refused	17	9	0	0	8
Data not collected	9	1	0	0	8
Total	838	817	0	1	20

12b - Ethnicity

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Non-Hispanic/Non-Latin(a)(o)(x)	751	748	0	1	2
Hispanic/Latin(a)(o)(x)	55	54	0	0	1
Client Doesn't Know/Client Refused	6	0	0	0	6
Data not collected	26	15	0	0	11
Total	838	817	0	1	20

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	293	293	0	0	0	0
Alcohol Use Disorder	44	44	0	0	0	0
Drug Use Disorder	27	27	0	0	0	0
Both Alcohol and Drug Use Disorders	50	50	0	0	0	0
Chronic Health Condition	182	181	0	0	0	1
HIV/AIDS	16	15	0	0	0	1
Development Disability	39	39	0	0	0	0

Physical Disability	210	209	0	0	0	1
13b1 - Physical and Mental Health Conditions of Leavers						
	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	199	199	0	0	0	0
Alcohol Use Disorder	30	30	0	0	0	0
Drug Use Disorder	17	17	0	0	0	0
Both Alcohol and Drug Use Disorders	37	37	0	0	0	0
Chronic Health Condition	122	122	0	0	0	0
HIV/AIDS	11	10	0	0	0	1
Development Disability	28	28	0	0	0	0
Physical Disability	131	131	0	0	0	0
13c1 - Physical and Mental Health Conditions of Stayers						
	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	98	98	0	0	0	0
Alcohol Use Disorder	15	15	0	0	0	0
Drug Use Disorder	10	10	0	0	0	0
Both Alcohol and Drug Use Disorders	13	13	0	0	0	0
Chronic Health Condition	63	62	0	0	0	1
HIV/AIDS	6	6	0	0	0	0
Development Disability	11	11	0	0	0	0
Physical Disability	85	84	0	0	0	1
14a - Domestic Violence History						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Yes	133	133	0	0	0	
No	665	661	0	0	4	
Client Doesn't Know/Client Refused	19	9	0	0	10	
Data not collected	19	14	0	0	5	
Total	836	817	0	0	19	
14b - Persons Fleeing Domestic Violence						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Yes	27	27	0	0	0	
No	89	89	0	0	0	
Client Doesn't Know/Client Refused	2	2	0	0	0	
Data not collected	15	15	0	0	0	
Total	133	133	0	0	0	
15 - Living Situation						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Homeless Situations						
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	47	47	0	0	0	
Transitional housing for homeless persons (including homeless youth)	8	8	0	0	0	
Place not meant for habitation	442	441	0	0	1	
Safe Haven	6	6	0	0	0	
Host Home (non-crisis)	0	0	0	0	0	
Subtotal	503	502	0	0	1	
Institutional Settings						
Psychiatric hospital or other psychiatric facility	14	14	0	0	0	
Substance abuse treatment facility or detox center	3	3	0	0	0	
Hospital or other residential non-psychiatric medical facility	32	32	0	0	0	
Jail, prison, or juvenile detention facility	52	52	0	0	0	
Foster care home or foster care group home	0	0	0	0	0	
Long-term care facility or nursing home	0	0	0	0	0	
Residential project or halfway house with no homeless criteria	2	2	0	0	0	
Subtotal	103	103	0	0	0	
Other Locations						
Permanent Housing (other than RRH) for formerly homeless persons	3	3	0	0	0	

Owned by client, no ongoing housing subsidy	2	2	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	1	1	0	0	0
Rental by client, no ongoing housing subsidy	17	17	0	0	0
Rental by client, with VASH housing subsidy	2	2	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	2	2	0	0	0
Hotel or motel paid for without emergency shelter voucher	34	32	0	0	2
Staying or living in a friend's room, apartment or house	65	65	0	0	0
Staying or living in a family member's room, apartment or house	50	50	0	0	0
Client Doesn't Know/Client Refused	35	25	0	0	10
Data Not Collected	19	13	0	0	6
Subtotal	230	212	0	0	18
Total	836	817	0	0	19

16 - Cash Income - Ranges

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
No Income	458	0	275
\$1 - 150	5	0	1
\$151 - \$250	6	0	4
\$251 - \$500	10	0	6
\$501 - \$1000	145	0	99
\$1001 - \$1500	43	0	34
\$1501 - \$2000	24	0	17
\$2001 +	21	0	17
Client Doesn't Know/Client Refused	17	0	9
Data Not Collected	88	0	47
Number of adult stayers not yet required to have an annual assessment		268	
Number of adult stayers without required annual assessment		40	
Total Adults	817	308	509

17 - Cash Income - Sources

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	58	0	43
Unemployment Insurance	3	0	2
Supplemental Security Income (SSI)	117	0	78
Social Security Disability Insurance (SSDI)	76	0	52
VA Service - Connected Disability Compensation	5	0	4
VA Non-Service Connected Disability Pension	4	0	5
Private Disability Insurance	0	0	0
Worker's Compensation	2	0	1
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	1	0	0
Retirement Income from Social Security	14	0	11
Pension or retirement income from a former job	3	0	1
Child Support	3	0	3
Alimony and other spousal support	1	0	0
Other Source	15	0	12
Adults with Income Information at Start and Annual Assessment/Exit		0	0

19b - Disabling Conditions and Income for Adults at Exit

	AO: Adult with Disabling Condition	AO: Adult without Disabling Condition	AO: Total Adults	AO: percent with Disabling Condition by Source	AC: Adult with Disabling Condition	AC: Adult without Disabling Condition	AC: Total Adults	AC: percent with Disabling Condition by Source	UK: Adult with Disabling Condition	UK: Adult without Disabling Condition	UK: Total Adults	UK: percent with Disabling Condition by Source
Earned Income	9	29	38	24%	0	0	0	0%	0	0	0	0%
Supplemental Security Income (SSI)	58	11	69	84%	0	0	0	0%	0	0	0	0%

Social Security Disability Insurance (SSDI)	42	4	46	91%	0	0	0	0%	0	0	0	0%
VA Service - Connected Disability Compensation	2	0	2	100%	0	0	0	0%	0	0	0	0%
Private Disability Insurance	0	0	0	0%	0	0	0	0%	0	0	0	0%
Worker's Compensation	0	1	1	0%	0	0	0	0%	0	0	0	0%
Temporary Assistance for Needy Families (TANF)	0	0	0	0%	0	0	0	0%	0	0	0	0%
Retirement Income from Social Security	6	3	9	67%	0	0	0	0%	0	0	0	0%
Pension or retirement income from a former job	1	0	1	100%	0	0	0	0%	0	0	0	0%
Child Support	1	1	2	50%	0	0	0	0%	0	0	0	0%
Other Source	4	11	15	27%	0	0	0	0%	0	0	0	0%
No Sources	111	147	258	43%	0	0	0	0%	0	0	0	0%
Unduplicated Total Adults	214	200	414		0	0	0		0	0	0	

20a - Type of Non-Cash Benefit Source

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	222	0	132
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	1	0	1
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	6	0	6

21 - Health Insurance

	At Start	At Annual Assessment for Stayers	At Exit for Leavers
MEDICAID	159	0	109
MEDICARE	78	0	53
State Children's Health Insurance Program	0	0	0
Veteran's Administration (VA) Medical Services	19	0	19
Employer-Provided Health Insurance	6	0	5
Health Insurance obtained through COBRA	0	0	0
Private Pay Health Insurance	8	0	5
State Health Insurance for Adults	6	0	6
Indian Health Services Program	0	0	0
Other	10	0	6
No Health Insurance	536	0	317
Client doesn't know/Client refused	34	0	23
Data not collected	72	40	42
Number of stayers not yet required to have an annual assessment		272	
1 Source of Health Insurance	182	0	130
More than 1 Source of Health Insurance	50	0	35

22a2 - Length of Participation - ESG Projects

	Total	Leavers	Stayers
0-7 days	174	143	31
8 to 14 days	119	92	27
15 to 21 days	64	47	17
22 to 30 days	77	48	29
31 to 60 days	167	109	58
61 to 90 days	57	25	32

91 to 180 days	73	28	45
181 to 365 days	57	24	33
366 to 730 Days (1-2 Yrs)	50	10	40
731 to 1,095 Days (2-3 Yrs)	0	0	0
1,096 to 1,460 Days (3-4 Yrs)	0	0	0
1,461 to 1,825 Days (4-5 Yrs)	0	0	0
More than 1,825 Days (>5 Yrs)	0	0	0
Data not collected	0	0	0
Total	838	526	312

22c - Length of Time between Project Start Date and Housing Move-in Date

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
Total (persons moved into housing)	0	0	0	0	0
Average length of time to housing	0	0	0	0	0
Persons who were exited without move-in	0	0	0	0	0
Total	0	0	0	0	0

22d - Length of Participation by Household Type

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	174	167	0	0	7
8 to 14 days	119	115	0	1	3
15 to 21 days	64	62	0	0	2
22 to 30 days	77	74	0	0	3
31 to 60 days	167	162	0	0	5
61 to 90 days	57	57	0	0	0
91 to 180 days	73	73	0	0	0
181 to 365 days	57	57	0	0	0
366 to 730 Days (1-2 Yrs)	50	50	0	0	0
731 to 1,095 Days (2-3 Yrs)	0	0	0	0	0
1,096 to 1,460 Days (3-4 Yrs)	0	0	0	0	0
1,461 to 1,825 Days (4-5 Yrs)	0	0	0	0	0
More than 1,825 Days (>5 Yrs)	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	838	817	0	1	20

22e - Length of Time Prior to Housing - based on 3.917 Date Homelessness Started

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	105	104	0	0	1
8 to 14 days	51	50	0	1	0
15 to 21 days	21	21	0	0	0
22 to 30 days	33	33	0	0	0
31 to 60 days	66	66	0	0	0
61 to 180 days	133	133	0	0	0
181 to 365 days	76	76	0	0	0
366 to 730 Days (1-2 Yrs)	93	93	0	0	0
731 days or more	165	163	0	0	2
Total (persons moved into housing)	743	739	0	1	3
Not yet moved into housing	0	0	0	0	0
Data Not Collected	95	78	0	0	17
Total Persons	838	817	0	1	20

23c - Exit Destination - All persons

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household
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					Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing subsidy	0	0	0	0	0
Owned by client, with ongoing subsidy	0	0	0	0	0
Rental by client, no ongoing subsidy	14	14	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	1	1	0	0	0
Rental by client, other ongoing subsidy	4	4	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	32	31	0	0	1
Staying or living with friends, permanent tenure	6	6	0	0	0
Rental by client, with RRH or equivalent subsidy	6	6	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	63	62	0	0	1
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	6	6	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	3	3	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	80	79	0	0	1
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	2	2	0	0	0
Host Home (non-crisis)	1	1	0	0	0
Subtotal	92	91	0	0	1
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	1	1	0	0	0
Substance abuse treatment facility or detox center	2	2	0	0	0
Hospital or other residential non-psychiatric medical facility	6	6	0	0	0
Jail, prison, or juvenile detention facility	9	8	0	0	1
Long-term care facility or nursing home	2	2	0	0	0
Subtotal	20	19	0	0	1
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	2	2	0	0	0
Other	16	14	0	0	2
Client Doesn't Know/Client Refused	1	1	0	0	0
Data Not Collected (no exit interview completed)	332	320	0	1	11
Subtotal	351	337	0	1	13
Total	526	509	0	1	16
Total persons exiting to positive housing destinations	64	63	0	0	1
Total persons whose destinations excluded them from the calculation	10	10	0	0	0
Percentage	12%	13%	0%	0%	6%

24 - Homeless Prevention Housing Assessment at Exit

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Able to maintain the housing they had at project start--Without a subsidy	0	0	0	0	0
Able to maintain the housing they had at project start--With the subsidy they had at project entry	0	0	0	0	0
Able to maintain the housing they had at project start--With an on-going subsidy acquired since project entry	0	0	0	0	0
Able to maintain the housing they had at project start--Only with financial assistance other than a subsidy	0	0	0	0	0
Moved to new housing unit--With on-going subsidy	0	0	0	0	0
Moved to new housing unit--Without an on-going subsidy	0	0	0	0	0
Moved in with family/friends on a temporary basis	0	0	0	0	0
Moved in with family/friends on a permanent basis	0	0	0	0	0
Moved to a transitional or temporary housing facility or program	0	0	0	0	0
Client became homeless - moving to a shelter or other place unfit for human habitation	0	0	0	0	0

Client went to jail/prison	0	0	0	0	0
Client died	0	0	0	0	0
Client doesn't know/Client refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Total	0	0	0	0	0

25a - Number of Veterans

	Total	Without Children	With Children and Adults	Unknown Household Type
Chronically Homeless Veteran	20	20	0	0
Non-Chronically Homeless Veteran	42	42	0	0
Not a veteran	730	730	0	0
Client doesn't know/Client refused	11	11	0	0
Data not collected	14	14	0	0
Total	817	817	0	0

26b - Number of Chronically Homeless Persons by Household

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	194	193	0	0	1
Not Chronically Homeless	463	461	0	1	1
Client Doesn't Know/Client Refused	37	36	0	0	1
Data not collected	144	127	0	0	17
Total	838	817	0	1	20

Report Run History

Report ID	Date Ran (Run-time)	Report Type Name	User Creating	Running Provider	Running User	Report Status
258320	09/16/2022 08:35:27 PM (0.17 mins)	COCAPR	Megan Duncan	FL506 - BBCoC: CESC	Megan Duncan	Completed
258308	09/16/2022 02:29:22 PM (0.15 mins)	COCAPR	Megan Duncan	FL506 - BBCoC: CESC	Megan Duncan	Completed

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Report Options

Name: Outreach Jan - Sep

Description:

Provider Type: Provider Reporting Group

Provider *: FL506 - BBCoC: CESC ARPA (SO) (9696)
 This provider AND its subordinates This provider ONLY

Program Date Range *: 01/01/2022 to 09/16/2022

Entry/Exit Types *: Basic HUD PATH Quick Call RHY Standard VA HPRP (Retired)

CoC-APR Report Results - Date Ran: 09/16/2022 08:35:27 PM - Report ID: 258320

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: CESC	9350	FL506 - BBCoC: CESC ARPA (SO)	9696	Street Outreach (HUD)				FL-506	129073	False																	

Showing 1-1 of 1

5a - Report Validations Table

Report Validations Table	
1. Total Number of Persons Served	160
2. Number of Adults (age 18 or over)	150
3. Number of Children (under age 18)	8
4. Number of Persons with Unknown Age	2
5. Number of Leavers	158
6. Number of Adult Leavers	150
7. Number of Adult and Head of Household Leavers	152
8. Number of Stayers	2
9. Number of Adult Stayers	0
10. Number of Veterans	14
11. Number of Chronically Homeless Persons	46
12. Number of Youth Under Age 25	2
13. Number of Parenting Youth Under Age 25 with Children	0
14. Number of Adult Heads of Household	134
15. Number of Child and Unknown-Age Heads of Household	2
16. Heads of Households and Adult Stayers in the Project 365 Days or More	0

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)	0	0	0	0	0%
SSN (3.2)	0	0	0	0	0%
Date of Birth (3.3)	0	0	0	0	0%
Race (3.4)	0	0		0	0%
Ethnicity (3.5)	0	0		0	0%
Gender (3.6)	0	0		0	0%
Overall Score				0	0%

6b - Data Quality: Universal Data Elements

Data Element	Error Count	% of Error Rate
Veteran Status (3.7)	0	0%
Project Start Date (3.10)	0	0%

Relationship to Head of Household (3.15)	0	0%
Client Location (3.16)	0	0%
Disabling Condition (3.8)	2	1%

6c - Data Quality: Income and Housing Data Quality

Data Element	Error Count	% of Error Rate
Destination (3.12)	0	0%
Income and Sources (4.2) at Start	2	1%
Income and Sources (4.2) at Annual Assessment	0	0%
Income and Sources (4.2) at Exit	2	1%

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	4			1	1	1	25%
TH	0	0	0	0	0	0	0%
PH(all)	0	0	0	0	0	0	0%
Total	4						25%

6e - Data Quality: Timeliness

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

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)	0	0	0%
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	150	147	3		0
Children	8		8	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	2	0	0	0	2
Total	160	147	11	0	2
For PSH and RRH - the total persons served who moved into housing	0	0	0	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	0	0	0	0	0
April	2	2	0	0	0
July	8	8	0	0	0
October	0	0	0	0	0

8a - Number of Households Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Total Households	136	132	2	0	2
For PSH and RRH - the total persons served who moved into housing	0	0	0	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	0	0	0	0	0
April	0	0	0	0	0
July	4	4	0	0	0
October	0	0	0	0	0

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	0	0	0	0
2-5 Times	0	0	0	0
6-9 Times	0	0	0	0

10+ Times	0	0	0	0	
Total Persons Contacted	0	0	0	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	0	0	0	0	
2-5 Times	0	0	0	0	
6-9 Times	0	0	0	0	
10+ Times	0	0	0	0	
Total Persons Engaged	0	0	0	0	
Rate of Engagement	0%	0%	0%	0%	
10a - Gender of Adults					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Male	108	106	2	0	
Female	42	41	1	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	150	147	3	0	
10b - Gender of Children					
	Total	With Children and Adults	With Only Children	Unknown Household Type	
Male	4	4	0	0	
Female	4	4	0	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	8	8	0	0	
10c - Gender of Persons Missing Age Information					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	2	0	0	0	2
Female	0	0	0	0	0
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	3		3	0	0
5 - 12	2		2	0	0
13 - 17	3		3	0	0
18 - 24	2	2	0		0
25 - 34	18	17	1		0
35 - 44	25	23	2		0
45 - 54	37	37	0		0
55 - 61	39	39	0		0
62 +	29	29	0		0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	2	0	0	0	2
Total	160	147	11	0	2
12a - Race					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
White	99	88	11	0	0
Black, African American, or African	42	41	0	0	1
Asian or Asian American	1	1	0	0	0
American Indian, Alaska Native, or Indigenous	5	5	0	0	0

Native Hawaiian or Pacific Islander	2	2	0	0	0
Multiple Races	5	5	0	0	0
Client Doesn't Know/Client Refused	4	4	0	0	0
Data Not Collected	2	1	0	0	1
Total	160	147	11	0	2

12b - Ethnicity

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Non-Hispanic/Non-Latin(a)(o)(x)	146	134	11	0	1
Hispanic/Latin(a)(o)(x)	5	5	0	0	0
Client Doesn't Know/Client Refused	1	1	0	0	0
Data Not Collected	8	7	0	0	1
Total	160	147	11	0	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	59	59	0	0	0	0
Alcohol Use Disorder	13	13	0	0	0	0
Drug Use Disorder	10	10	0	0	0	0
Both Alcohol and Drug Use Disorders	11	11	0	0	0	0
Chronic Health Condition	38	38	0	0	0	0
HIV/AIDS	2	2	0	0	0	0
Development Disability	9	8	1	0	0	0
Physical Disability	59	58	0	0	0	1

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	59	59	0	0	0	0
Alcohol Use Disorder	13	13	0	0	0	0
Drug Use Disorder	10	10	0	0	0	0
Both Alcohol and Drug Use Disorders	11	11	0	0	0	0
Chronic Health Condition	38	38	0	0	0	0
HIV/AIDS	2	2	0	0	0	0
Development Disability	9	8	1	0	0	0
Physical Disability	59	58	0	0	0	1

13c1 - Physical and Mental Health Conditions of Stayers

	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	0	0	0	0	0	0
Alcohol Use Disorder	0	0	0	0	0	0
Drug Use Disorder	0	0	0	0	0	0
Both Alcohol and Drug Use Disorders	0	0	0	0	0	0
Chronic Health Condition	0	0	0	0	0	0
HIV/AIDS	0	0	0	0	0	0
Development Disability	0	0	0	0	0	0
Physical Disability	0	0	0	0	0	0

13a2 - Number of 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
None	36	27	1	8	0	0
1 Condition	30	28	1	0	0	1
2 Conditions	28	28	0	0	0	0
3+ Conditions	34	34	0	0	0	0
Condition Unknown	3	3	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0
Data Not Collected	29	27	1	0	0	1
Total	160	147	3	8	0	2

13b2 - Number of 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
None	34	27	1	6	0	0
1 Condition	30	28	1	0	0	1
2 Conditions	28	28	0	0	0	0
3+ Conditions	34	34	0	0	0	0

Condition Unknown	3	3	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0
Data Not Collected	29	27	1	0	0	1
Total	158	147	3	6	0	2
13c2 - Number of Conditions for Stayers						
	Total Persons	Without Children	Adults in HH with Children and Adults	Children in HH with Children and Adults	With Only Children	Unknown Household Type
None	2	0	0	2	0	0
1 Condition	0	0	0	0	0	0
2 Conditions	0	0	0	0	0	0
3+ Conditions	0	0	0	0	0	0
Condition Unknown	0	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0
Data Not Collected	0	0	0	0	0	0
Total	2	0	0	2	0	0
14a - Domestic Violence History						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Yes	18	18	0	0	0	
No	89	86	2	0	1	
Client Doesn't Know/Client Refused	2	2	0	0	0	
Data Not Collected	43	41	1	0	1	
Total	152	147	3	0	2	
14b - Persons Fleeing Domestic Violence						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Yes	0	0	0	0	0	
No	15	15	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	0	
Data Not Collected	3	3	0	0	0	
Total	18	18	0	0	0	
15 - Living Situation						
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type	
Homeless Situations						
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	8	8	0	0	0	
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0	
Place not meant for habitation	86	84	1	0	1	
Safe Haven	0	0	0	0	0	
Host Home (non-crisis)	0	0	0	0	0	
Subtotal	94	92	1	0	1	
Institutional Settings						
Psychiatric hospital or other psychiatric facility	0	0	0	0	0	
Substance abuse treatment facility or detox center	0	0	0	0	0	
Hospital or other residential non-psychiatric medical facility	5	5	0	0	0	
Jail, prison, or juvenile detention facility	3	3	0	0	0	
Foster care home or foster care group home	0	0	0	0	0	
Long-term care facility or nursing home	0	0	0	0	0	
Residential project or halfway house with no homeless criteria	0	0	0	0	0	
Subtotal	8	8	0	0	0	
Other Locations						
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0	
Owned by client, no ongoing housing subsidy	2	2	0	0	0	
Owned by client, with ongoing housing subsidy	0	0	0	0	0	
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0	
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0	
Rental by client in a public housing unit	0	0	0	0	0	
Rental by client, no ongoing housing subsidy	8	7	1	0	0	
Rental by client, with VASH housing subsidy	0	0	0	0	0	
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0	
Rental by client, with other housing subsidy (including RRH)	0	0	0	0	0	
Hotel or motel paid for without emergency shelter voucher	2	2	0	0	0	
Staying or living in a friend's room, apartment or house	6	5	1	0	0	
Staying or living in a family member's room, apartment or house	6	6	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	0	
Data Not Collected	26	25	0	0	1	

Subtotal	50	47	2	0	1
Total	152	147	3	0	2

16 - Cash Income - Ranges

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
No Income	72	0	72
\$1 - 150	0	0	0
\$151 - \$250	2	0	2
\$251 - \$500	1	0	1
\$501 - \$1000	21	0	21
\$1001 - \$1500	11	0	11
\$1501 - \$2000	4	0	4
\$2001 +	1	0	1
Client Doesn't Know/Client Refused	1	0	1
Data Not Collected	37	0	37
Number of adult stayers not yet required to have an annual assessment		0	
Number of adult stayers without required annual assessment		0	
Total Adults	150	0	150

17 - Cash Income - Sources

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	8	0	8
Unemployment Insurance	2	0	2
Supplemental Security Income (SSI)	18	0	18
Social Security Disability Insurance (SSDI)	12	0	12
VA Service - Connected Disability Compensation	1	0	1
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	0	0	0
Retirement Income from Social Security	3	0	3
Pension or retirement income from a former job	0	0	0
Child Support	0	0	0
Alimony and other spousal support	0	0	0
Other Source	2	0	2
Adults with Income Information at Start and Annual Assessment/Exit		0	0

18 - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status

Number of Adults by Income Category	Number of Adults at Start	Number of Adults at Annual Assessment (Stayers)	Number of Adults at Exit (Leavers)
Adults with Only Earned Income (i.e., Employment Income)	8	0	8
Adults with Only Other Income	32	0	32
Adults with Both Earned and Other Income	0	0	0
Adults with No Income	79	0	79
Adults with Client Doesn't Know/Client Refused Income Information	1	0	1
Adults with Missing Income Information	29	0	29
Number of adult stayers not yet required to have an annual assessment		0	
Number of adult stayers without required annual assessment		0	
Total Adults	150	0	150
1 or More Source of Income	49	0	49
Adults with Income Information at Start and Annual Assessment/Exit		0	0

19a1 - Client Cash Income Change - Income Source - by Start and Latest Status

Income Change by Income Category (Universe: Adult Stayers with Income Information at Start and Annual Assessment)	Had Income Category at Start and Did Not Have It at Annual Assessment	Retained Income Category But Had Less \$ at Annual Assessment Than at Start	Retained Income Category and Same \$ at Annual Assessment as at Start	Retained Income Category and Increased \$ at Annual Assessment	Did Not Have the Income Category at Start and Gained the Income Category at Annual Assessment	Did Not Have the Income Category at Start or at Annual Assessment	Total Adults (including those with No Income)	Performance Measure: Adults who Gained or Increased Income from Start to Annual Assessment, Average Gain	Performance measure: Percent of Persons who Accomplished this Measure
Number of Adults with Earned Income (i.e., Employment Income)	0	0	0	0	0	0	0	0	0%

Average Change in Earned Income	0	0		0	0			0	
Number of Adults with Other Income	0	0	0	0	0	0	0	0	0%
Average Change in Other Income	0	0		0	0			0	
Number of Adults with Any Income (i.e., Total Income)	0	0	0	0	0	0	0	0	0%
Average Change in Overall Income	0	0		0	0			0	

19a2 - Client Cash Income Change - Income Source - by Start and Exit

Income Change by Income Category (Universe: Adult Leavers with Income Information at Start and Exit)	Had Income Category at Start and Did Not Have It at Exit	Retained Income Category But Had Less \$ at Exit Than at Start	Retained Income Category and Same \$ at Exit as at Start	Retained Income Category and Increased \$ at Exit	Did Not Have the Income Category at Start and Gained the Income Category at Exit	Did Not Have the Income Category at Start or at Exit	Total Adults (including those with No Income)	Performance Measure: Adults who Gained or Increased Income from Start to Exit, Average Gain	Performance measure: Percent of Persons who Accomplished this Measure
Number of Adults with Earned Income (i.e., Employment Income)	0	0	8	0	0	107	119	0	0%
Average Change in Earned Income	0	0		0	0			0	
Number of Adults with Other Income	0	0	32	0	0	83	119	0	0%
Average Change in Other Income	0	0		0	0			0	
Number of Adults with Any Income (i.e., Total Income)	0	0	40	0	0	71	119	0	0%
Average Change in Overall Income	0	0		0	0			0	

19b - Disabling Conditions and Income for Adults at Exit

	AO: Adult with Disabling Condition	AO: Adult without Disabling Condition	AO: Total Adults	AO: percent with Disabling Condition by Source	AC: Adult with Disabling Condition	AC: Adult without Disabling Condition	AC: Total Adults	AC: percent with Disabling Condition by Source	UK: Adult with Disabling Condition	UK: Adult without Disabling Condition	UK: Total Adults	UK: percent with Disabling Condition by Source
Earned Income	0	7	7	0%	1	0	1	100%	0	0	0	0%
Supplemental Security Income (SSI)	17	1	18	94%	0	0	0	0%	0	0	0	0%
Social Security Disability Insurance (SSDI)	11	0	11	100%	0	0	0	0%	0	0	0	0%
VA Service - Connected Disability Compensation	1	0	1	100%	0	0	0	0%	0	0	0	0%
Private Disability Insurance	0	0	0	0%	0	0	0	0%	0	0	0	0%
Worker's Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%
Temporary Assistance for Needy Families (TANF)	0	0	0	0%	0	0	0	0%	0	0	0	0%
Retirement Income from Social Security	1	2	3	33%	0	0	0	0%	0	0	0	0%
Pension or retirement income from a former job	0	0	0	0%	0	0	0	0%	0	0	0	0%
Child Support	0	0	0	0%	0	0	0	0%	0	0	0	0%
Other Source	1	2	3	33%	0	0	0	0%	0	0	0	0%
No Sources	34	29	63	54%	0	1	1	0%	0	0	0	0%
Unduplicated Total Adults	61	40	101		1	1	2		0	0	0	

20a - Type of Non-Cash Benefit Source

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
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Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	35	0	35
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	0	0	0
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	1	0	1

20b - Number of Non-Cash Benefit Sources

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
No Sources	60	0	60
1 + Source(s)	35	0	35
Client Doesn't Know/Client Refused	1	0	1
Data Not Collected/Not stayed long enough for Annual Assessment	54	0	54
Total	150	0	150

21 - Health Insurance

	At Start	At Annual Assessment for Stayers	At Exit for Leavers
MEDICAID	28	0	26
MEDICARE	10	0	10
State Children's Health Insurance Program	0	0	0
Veteran's Administration (VA) Medical Services	3	0	3
Employer-Provided Health Insurance	0	0	0
Health Insurance obtained through COBRA	0	0	0
Private Pay Health Insurance	1	0	1
State Health Insurance for Adults	3	0	3
Indian Health Services Program	0	0	0
Other	1	0	1
No Health Insurance	83	0	83
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	53	0	53
Number of stayers not yet required to have an annual assessment		2	
1 Source of Health Insurance	27	0	25
More than 1 Source of Health Insurance	8	0	8

22a1 - Length of Participation - CoC Projects

	Total	Leavers	Stayers
30 days or less	159	157	2
31 to 60 days	0	0	0
61 to 90 days	1	1	0
91 to 180 days	0	0	0
181 to 365 days	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0
731 to 1,095 Days (2-3 Yrs)	0	0	0
1,096 to 1,460 Days (3-4 Yrs)	0	0	0
1,461 to 1,825 Days (4-5 Yrs)	0	0	0
More than 1,825 Days (>5 Yrs)	0	0	0
Data Not Collected	0	0	0
Total	160	158	2

22b - Average and Median Length of Participation in Days

	Leavers	Stayers
Average Length	0	25
Median Length	0	25

22c - Length of Time between Project Start Date and Housing Move-in Date

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
Total (persons moved into housing)	0	0	0	0	0
Average length of time to housing	0	0	0	0	0

Persons who were exited without move-in	0	0	0	0	0
Total	0	0	0	0	0
22e - Length of Time Prior to Housing - based on 3.917 Date Homelessness Started					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
731 days or more	0	0	0	0	0
Total (persons moved into housing)	0	0	0	0	0
Not yet moved into housing	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total Persons	0	0	0	0	0
23c - Exit Destination - All persons					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing subsidy	0	0	0	0	0
Owned by client, with ongoing subsidy	0	0	0	0	0
Rental by client, no ongoing subsidy	0	0	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, other ongoing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	1	1	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	135	125	9	0	1
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	136	126	9	0	1
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	20	19	0	0	1
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	2	2	0	0	0
Subtotal	22	21	0	0	1
Total	158	147	9	0	2
Total persons exiting to positive housing destinations	1	1	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage					

1% 1% 0% 0% 0%

25a - Number of Veterans				
	Total	Without Children	With Children and Adults	Unknown Household Type
Chronically Homeless Veteran	2	2	0	0
Non-Chronically Homeless Veteran	12	12	0	0
Not a veteran	134	131	3	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	2	2	0	0
Total	150	147	3	0

25b - Number of Veteran Households				
	Total	Without Children	With Children and Adults	Unknown Household Type
Chronically Homeless Veteran	2	2	0	0
Non-Chronically Homeless Veteran	11	11	0	0
Not a veteran	119	117	2	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	2	2	0	0
Total	134	132	2	0

25c - Gender - Veterans				
	Total	Without Children	With Children and Adults	Unknown Household Type
Male	14	14	0	0
Female	0	0	0	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
Total	14	14	0	0

25d - Age - Veterans				
	Total	Without Children	With Children and Adults	Unknown Household Type
18 - 24	0	0	0	0
25 - 34	1	1	0	0
35 - 44	1	1	0	0
45 - 54	3	3	0	0
55 - 61	5	5	0	0
62 +	4	4	0	0
Client Doesn't Know/Client Refused				
Data Not Collected				
Total	14	14	0	0

25e - Physical and Mental Health Conditions - Veterans				
	Conditions at Start	Conditions at Latest Assessment for Stayers	Conditions at Exit for Leavers	
Mental Health Disorder	4	0	4	
Alcohol Use Disorder	2	0	2	
Drug Use Disorder	1	0	1	
Both Alcohol and Drug Use Disorders	0	0	0	
Chronic Health Condition	2	0	2	
HIV/AIDS	2	0	2	
Development Disability	1	0	1	
Physical Disability	5	0	5	

25f - Cash Income Category - Income Category - by Start and Annual/Exit Status - Veterans			
Number of Veterans by Income Category	Number of Veterans at Start	Number of Veterans at Annual Assessment (Stayers)	Number of Veterans at Exit (Leavers)
Veterans with Only Earned Income (i.e., Employment Income)	2	0	2
Veterans with Only Other Income	4	0	4
Veterans with Both Earned and Other Income	0	0	0
Veterans with No Income	7	0	7
Veterans with Client Doesn't Know/Client Refused Income Information	0	0	0
Veterans with Missing Income Information	1	0	1
Number of veterans not yet required to have an annual assessment		0	

Number of veterans without required annual assessment		0	
Total Veterans	14	0	14

25g - Type of Cash Income Sources - Veterans

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	2	0	2
Unemployment Insurance	0	0	0
Supplemental Security Income (SSI)	3	0	3
Social Security Disability Insurance (SSDI)	2	0	2
VA Service - Connected Disability Compensation	1	0	1
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	0	0	0
Retirement Income from Social Security	0	0	0
Pension or retirement income from a former job	0	0	0
Child Support	0	0	0
Alimony and other spousal support	0	0	0
Other Source	0	0	0
Veterans with Income Information at Start and Annual Assessment/Exit		0	0

25h - Type of Non-Cash Benefit Sources - Veterans

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	0	0	0
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	0	0	0
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	0	0	0

25i - Exit Destination - Veterans

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	12	12	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	12	12	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0

Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	1	1	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	1	1	0	0	0
Subtotal	2	2	0	0	0
Total	14	14	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%

26a - Chronic Homeless Status - Number of Households w/at least one or more CH person					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	45	44	0	0	1
Not Chronically Homeless	33	33	0	0	0
Client Doesn't Know/Client Refused	3	3	0	0	0
Data Not Collected	55	52	2	0	1
Total	136	132	2	0	2

26b - Number of Chronically Homeless Persons by Household					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	46	45	0	0	1
Not Chronically Homeless	43	34	9	0	0
Client Doesn't Know/Client Refused	3	3	0	0	0
Data Not Collected	68	65	2	0	1
Total	160	147	11	0	2

26c - Gender of Chronically Homeless Persons					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	36	35	0	0	1
Female	10	10	0	0	0
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
Total	46	45	0	0	1

26d - Age of Chronically Homeless Persons					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
0 - 17	0		0	0	0
18 - 24	0	0	0		0
25 - 34	5	5	0		0
35 - 44	5	5	0		0
45 - 54	12	12	0		0
55 - 61	14	14	0		0
62 +	9	9	0		0
Client Doesn't Know/Client Refused	0	0	0		0
Data Not Collected	1	0	0		1
Total	46	45	0	0	1

26e - Physical and Mental Health Conditions - Chronically Homeless Persons					
		Conditions at Start	Conditions at Latest Assessment for Stayers	Conditions at Exit for Leavers	
Mental Health Disorder		33	0	33	
Alcohol Use Disorder		9	0	9	
Drug Use Disorder		0	0	0	
Both Alcohol and Drug Use Disorders		7	0	7	
Chronic Health Condition		23	0	23	
HIV/AIDS		0	0	0	
Development Disability		4	0	4	

Physical Disability		33	0	33	
26f - Client Cash Income - Chronically Homeless Persons					
		Number of Chronically Homeless Persons at Start	Number of Chronically Homeless Persons at Annual Assessment (Stayers)	Number of Chronically Homeless Persons at Exit (Leavers)	
Number of Chronically Homeless Persons by Income Category					
Chronically Homeless Persons with Only Earned Income (i.e., Employment Income)		0	0	0	
Chronically Homeless Persons with Only Other Income		15	0	15	
Chronically Homeless Persons with Both Earned and Other Income		0	0	0	
Chronically Homeless Persons with No Income		30	0	30	
Chronically Homeless Persons with Client Doesn't Know/Client Refused Income Information		0	0	0	
Chronically Homeless Persons with Missing Income Information		0	0	0	
Number of Chronically Homeless Persons not yet required to have an annual assessment			0		
Number of Chronically Homeless Persons without required annual assessment			0		
Total Chronically Homeless Persons		45	0	45	
26g - Type of Cash Income Sources - Chronically Homeless Persons					
		Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers	
Earned Income		0	0	0	
Unemployment Insurance		1	0	1	
Supplemental Security Income (SSI)		9	0	9	
Social Security Disability Insurance (SSDI)		6	0	6	
VA Service - Connected Disability Compensation		0	0	0	
VA Non-Service Connected Disability Pension		0	0	0	
Private Disability Insurance		0	0	0	
Worker's Compensation		0	0	0	
Temporary Assistance for Needy Families (TANF)		0	0	0	
General Assistance (GA)		0	0	0	
Retirement Income from Social Security		0	0	0	
Pension or retirement income from a former job		0	0	0	
Child Support		0	0	0	
Alimony and other spousal support		0	0	0	
Other Source		0	0	0	
Chronically Homeless Persons with Income Information at Start and Annual Assessment/Exit			0	0	
26h - Type of Non-Cash Income Sources - Chronically Homeless Persons					
		Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers	
Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)		15	0	15	
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)		0	0	0	
TANF Child Care Services		0	0	0	
TANF Transportation Services		0	0	0	
Other TANF-Funded Services		0	0	0	
Other Source		1	0	1	
27a - Age of Youth					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
12 - 17	0		0	0	0
18 - 24	2	2	0		
Client Doesn't Know/Client Refused					
Data Not Collected					
Total	2	2	0	0	
27b - Parenting Youth					
		Total Parenting Youth	Total Children of Parenting Youth	Total Persons	Total Households
Parenting youth < 18		0	0	0	0
Parenting youth 18 to 24		0	0	0	0
27c - Gender - Youth					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	1	1	0	0	0
Female	1	1	0	0	0
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
Total	2	2	0	0	0

27d - Living Situation - Youth

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Place not meant for habitation	2	2	0	0	0
Safe Haven	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	2	2	0	0	0
Institutional Settings					
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Foster care home or foster care group home	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Locations					
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Staying or living in a friend's room, apartment or house	0	0	0	0	0
Staying or living in a family member's room, apartment or house	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	0	0	0	0	0
Total	2	2	0	0	0

27e - Length of Participation - Youth

	Total	Leavers	Stayers
30 days or less	2	2	0
31 to 60 days	0	0	0
61 to 90 days	0	0	0
91 to 180 days	0	0	0
181 to 365 days	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0
731 to 1,095 Days (2-3 Yrs)	0	0	0
1,096 to 1,460 Days (3-4 Yrs)	0	0	0
1,461 to 1,825 Days (4-5 Yrs)	0	0	0
More than 1,825 Days (>5 Yrs)	0	0	0
Data Not Collected	0	0	0
Total	2	2	0

27f - Exit Destination - Youth

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0

Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	2	2	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	2	2	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	2	2	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%

27g - Cash Income - Sources - Youth

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	0	0	0
Unemployment Insurance	0	0	0
Supplemental Security Income (SSI)	0	0	0
Social Security Disability Insurance (SSDI)	0	0	0
VA Service - Connected Disability Compensation	0	0	0
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	0	0	0
Retirement Income from Social Security	0	0	0
Pension or retirement income from a former job	0	0	0
Child Support	0	0	0
Alimony and other spousal support	0	0	0
Other Source	0	0	0
Adults with Income Information at Start and Annual Assessment/Exit		0	0

27h - Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status - Youth

Number of Youth by Income Category	Number of Youth at Start	Number of Youth at Annual Assessment (Stayers)	Number of Youth at Exit (Leavers)
Youth with Only Earned Income (i.e., Employment Income)	0	0	0
Youth with Only Other Income	0	0	0
Youth with Both Earned and Other Income	0	0	0
Youth with No Income	1	0	1

Youth with Client Doesn't Know/Client Refused Income Information	0	0	0
Youth with Missing Income Information	1	0	1
Number of youth stayers not yet required to have an annual assessment		0	
Number of youth stayers without required annual assessment		0	
Total Youth	2	0	2
1 or More Source of Income	1	0	1
Youth with Income Information at Start and Annual Assessment/Exit		0	0

27i - Disabling Conditions and Income for Youth at Exit																
	AO: Youth with Disabling Condition	AO: Youth without Disabling Condition	AO: Total Youth	AO: percent with Disabling Condition by Source	AC: Youth with Disabling Condition	AC: Youth without Disabling Condition	AC: Total Youth	AC: percent with Disabling Condition by Source	CO: Youth with Disabling Condition	CO: Youth without Disabling Condition	CO: Total Youth	CO: percent with Disabling Condition by Source	UK: Youth with Disabling Condition	UK: Youth without Disabling Condition	UK: Total Youth	UK: percent with Disabling Condition by Source
Earned Income	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Supplemental Security Income (SSI)	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Social Security Disability Insurance (SSDI)	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
VA Service - Connected Disability Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Private Disability Insurance	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Worker's Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Temporary Assistance for Needy Families (TANF)	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Retirement Income from Social Security	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Pension or retirement income from a former job	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Child Support	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Other Source	0	0	0	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
No Sources	0	1	1	0%	0	0	0	0%	0	0	0	0%	0	0	0	0%
Unduplicated Total Youth	0	1	1		0	0	0		0	0	0		0	0	0	

Attachment G

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.6. Commitment to Housing First

D.6. Commitment to Housing First

Housing First Commitment

The Kearney Center case management team provides services using the Housing First model. People experiencing homelessness will be offered permanent housing opportunities with no programmatic preconditions such as demonstration of sobriety, completion of alcohol and/or drug treatment, or agreeing to comply with a treatment regimen upon entry into the program. We are a low barrier shelter; therefore, we do not deny applicants with large barriers to housing such as having very low to no income, poor rental history, and/or criminal histories.

We prioritize people who have been homeless the longest and/or who have the highest service needs as evidenced by the vulnerability assessment. We utilize Rapid Rehousing and Diversion funds to quickly place individuals into housing. Supportive services are readily available, and clients can work with their case managers to access all services available.

Our clients are not required to utilize our resources to access housing opportunities. Supportive services are proactively offered to help tenants achieve and maintain housing stability, but tenants are not required to participate in services as a condition of tenancy.

Techniques such as harm reduction and motivational interviewing are utilized to support and assist clients to achieve their housing goals. We educate our clients on their full rights, responsibilities, and legal protections regarding their housing process.



Kearney Center Case Management Procedures

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Intro

Welcome to the Housing Case Management Team! As a Housing Case Manager or Housing Navigator, your role is to assist clients in navigating the processes necessary to obtain and retain stable housing. You will refer clients to local resources for housing needs such as income, employment, and mental health regulation as well as conduct assessments and create a housing case plan to fit each clients' strengths and unique housing needs.

Purpose

At the Kearney Center our case management team provides services using the Housing First model. People experiencing homelessness will be offered permanent housing opportunities with no programmatic preconditions such as demonstration of sobriety, completion of alcohol and/or drug treatment, or agreeing to comply with a treatment regimen upon entry into the program. We are a low barrier shelter; therefore, we do not deny applicants with large barriers to housing such as having very low to no income, poor rental history, and/or criminal histories. We prioritize people who have been homeless the longest and/or who have the highest service needs as evidenced by the vulnerability assessment. We utilize Rapid Rehousing funds and Diversion funds to quickly place individuals into housing. Supportive services are readily available, and clients can work with their case managers to access any and all services available. Our clients are not required to utilize our resources to access housing opportunities. Supportive services are proactively offered to help tenants achieve and maintain housing stability, but tenants are not required to participate in services as a condition of tenancy. Techniques such as harm reduction and motivational interviewing are utilized to support and assist clients to achieve their housing goals. We educate our clients on their full rights, responsibilities, and legal protections regarding their housing process.

Homelessness Management Information System (HMIS)

What is it?

HMIS is a data entry system that is used across the nation to input information concerning services accessed by someone experiencing homelessness. HMIS is meant to streamline services, provide historical information, track client data, and compile data for grant reporting purposes.

Important Components to Know

Release of Information (ROI)

A release of information (ROI) is completed by each client to provide permission to the Housing Case Manager to discuss client information as it relates to the Client's housing plans and achieving stable housing. Approval of the ROI allows the Housing Case Manager to discuss client information with landlords and other service providers, make referrals, and other activities that involve sharing client information.

ROI's must be uploaded and documented in HMIS by completing the following:

1. Ensure you're under the "FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)" EDA
2. Click on the "ROI" tab in the Client's HMIS profile
3. Click "Add Release of Information"
4. Fill out the fields
 - a. Select 'yes' or 'no' based upon the Client's decision
 - b. The end date will be five years after the date of signing
 - c. Documentation will always be "Signed Statement from Client"
 - d. The Witness is the assigned Housing Case Manager
5. Click "Save Release of Information"
6. Click the paperclip icon on the newly created ROI entry
7. Click "Add New File Attachment"
8. Click "Choose File" and upload the ROI
9. Click "Upload"

Add Case Manager

This feature is used to track case manager assignment, connect with case managers with other providers and resources, and provide a point of contact if additional client information is needed.

Once a client is added to a Housing Case Manager's caseload, the Housing Case Manager should add themselves as the Client's Case Manager in HMIS.

To add a case manager, you must:

- Ensure your EDA is "FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)"
- Click the "Case Managers" tab in the HMIS profile
- Click "Add Case Manager"
- "Type" will always be "Me"
- Input data for Name, Title, Phone Number, Email Address, and start date
 - o Note: The start date should be the date of the first Outreach attempt
- Click "Add Case Manager"

Enter Data As (EDA)

Enter Data As (EDA), is a mechanism in HMIS which allows the user to capture data for specific programs and providers and limits the visibility of case notes and other data to specific providers to ensure confidentiality is upheld.

Commonly used EDAs by CESC Case Management include the following:

- FL506 - BBCoC: Coordinated Entry (9272)
- FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)
- Grant EDA as assigned (if applicable)

EDA policies are subject to change according to grant requirements and agency policies.

Entry/Exit

Entry/Exit is a function within HMIS that tracks programs accessed by clients. This helps providers track shelter stays and review funding and programs previously utilized by clients.

Entry/Exits should be entered for the following programs/providers:

- Coordinated Entry
- Shelter Case Management
- Assigned grants (if applicable)
- Grant funding accessed (if applicable)

To add an Entry/Exit, you must:

- Ensure you're under the correct EDA for the program
- Click "Entry/Exit" in the Client's HMIS profile
- Click "Add Entry/Exit"
- "Type" will always be "HUD"
- Click "Save & Continue"
- Complete all bolded fields at minimum and provide additional information if obtained
- Click "Save & Exit"

Coordinated Entry Assessment

A Coordinated Entry Assessment provides detailed information about the client's background, experience with homelessness, income, medical information, and benefit information.

Coordinated Entry data is processed by the CoC to influence policy and initiatives to combat homelessness in the Big Bend Region.

A client must agree to the PromisSE Release of Information before the Housing Case Manager completes a Coordinated Entry assessment. If not agreed to, the Coordinated Entry should not be completed.

To complete a Coordinated Entry Assessment, you must:

1. Ensure you're under the "FL506 - BBCoC: Coordinated Entry (9272)" EDA
2. Click "Entry/Exit" in the Client's HMIS profile
3. Click "Add Entry/Exit"

4. "Type" will always be "HUD"
5. Click "Save & Continue"
6. Complete all bolded fields at minimum and provide additional information if obtained
7. Complete the "VI-SPDAT for Individuals"
8. Click "Save & Exit"

VI-SPDAT

The VI-SPDAT is part of the Coordinated Entry Assessment. It is a 34-question vulnerability survey utilized to determine the most appropriate form of housing assistance. The VI-SPDAT assesses history of homelessness, risks as it relates to health and criminal history, socialization patterns, and wellness. Once the assessment is completed, it will compute a score which is associated with the type of assistance the is most recommended.

VI-SPDAT scores and recommended resources:

- 0 - 3: No resources recommended
- 4 – 7: Rapid Rehousing recommended
- 8+: Permanent Supportive Housing recommended

*Note: Only "VI-SPDAT for Individuals" should be completed by a Housing Case Manager since Kearney Center only serves single adults.

An additional VI-SPDAT should be completed if:

- The previous VI-SPDAT is over 6 months old
- If there has been a significant life change (i.e change in income, household, or health)

Service Transactions

Service transactions are recorded to capture data about the number and types of services provided and tracks the amount of funding utilized by each client and grant.

A service transaction should be recorded for each appointment and/or interaction with a client using the "FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)" EDA.

Service transactions can be completed by using the following steps:

1. Ensure your EDA is "FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)"
2. Click the "Service Transactions" tab within the Client's HMIS profile
3. Click "Add Service"
4. Enter the end date as the next following day
5. "Service Type" will always be "Case/Care Management (PH-1000)"
6. Click Continue
7. Complete the following fields

- a. Service Notes: This should be a copy of the corresponding case note
 - b. Service Costs: Number of units should always be 1 and cost is always \$0
 - c. Need Information: Need status is always “Identified” and Outcome of Need is always “Fully Met”
8. Click “Save & Exit”

Case Notes

Entering case notes in HMIS is a critical part of case management as it documents the housing process and holds the Housing Case Manager and the Client accountable. Case notes should be written in 3rd person referring to clients as “the Client” or “CL” and referring to yourself as “Housing Case Manager” or “HCM”. Case notes should provide an overview of your appointment with a client, highlighting important topics discussed and outlining actions that should be taken prior to the next appointment. See below for an example of a first appointment case note:

“The CL met with the CM to discuss housing and the CL stated interest in housing. The CM completed a VISPDAT, and the CL scored a 4. The CM told the Client that they qualify for RRH and explained the process. CM stated that the CL will need to obtain an ID and SSC to complete an application. CM referred the Client to H3LP Florida to obtain an ID card. CM scheduled another appointment with the CL for May 12th, 2022 at 3:00pm.”

Case notes can be found in each Clients’ HMIS profile under the “Case Plans” tab. If there is an existing goal added within one year to date, continue to create notes under that Goal. To add a case note, you must:

1. Ensure your EDA is “FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)”
2. Click the “Case Plans” tab
3. Click the notepad icon under the “Notes” column
4. Click “Add Case Note”
5. Click your name in the “Case Manager” drop-down box
 - a. Note: If you don’t see your name in the drop-down selection, you did not add yourself as a case manager
6. Create Note
7. Click “Save Case Note”

*Note: All case notes should be entered within 48 hours of client engagement.

If there are no existing goal(s) or if the existing goal(s) are more than one year’s old. You must create a new goal. See below instructions on how to create a goal.

How to Create a Goal in Case Plans

1. Ensure your EDA is “FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)”
2. Click the “Case Plans” tab in the Client Profile

3. Click “Add Goal”
4. Add yourself as a Case Manager in the drop-down box
 - a. Note: If you don’t see your name in the drop-down selection, you did not add yourself as a case manager
5. Classification is always “Housing”
6. Type is always “Achieve Housing Stability”
7. Overall Status is always “In Progress”
8. Click “Add Goal”

Back Date

Back dating is a tool used to input historical data in HMIS. If needed, Housing Case Managers and Housing Navigator(s) should back date data entries for case notes, program entry/exits, service transactions, and other data inputs.

To Back Date, you must:

1. Ensure you’re in the appropriate EDA
2. Click “Back Date”
3. Enter the desired date and time
4. Click “Set Back Date”
5. Enter desired data inputs

Supervision & Caseload Management

Supervision

The Case Management Supervisor will conduct weekly supervision meetings with each Housing Case Manager and Housing Navigator to discuss and manage caseloads. Discussion topics during supervision include updates for each client case, issues in workflow, resource gaps, issues in the workplace, self-care, and other topics as it relates to client cases and work effectiveness. All information discussed during supervision is confidential.

Caseload Management

All clients within the facility will be assigned a Housing Case Manager within the first two weeks of entry. The Case Management Supervisor will **update caseloads twice a week** according to the facility roster and discussion in supervision.

Housing Case Managers are allowed to “swap” or transfer clients to another Housing Case Manager’s caseload if deemed appropriate and is agreed upon by both parties. Upon client swapping, the Case Management Supervisor must be notified to update caseloads appropriately. Clients must also be properly notified of the change according to the Outreach policy by their new case manager.

Client Case Removal

Clients who are not actively working on their housing plan will be removed from the Housing Case Manager's caseload. Criteria for actively working on a housing plan is decided on a case-by-case basis and it is the responsibility of the Housing Case Manager and Case Management Supervisor to determine if a client is active. Common reasons for caseload removal include non-response to Outreaches, not obtaining required documents in a timely manner, no effort in employment/income obtainment, and/or missing 3 appointments.

If a client has left or is restricted from the facility, they will be subsequently removed from their Housing Case Manager's caseload. Once a client is removed from a caseload, the case manager should:

- Exit the client out of all programs under the Entry/Exit tab **except** for "FL506 - BBCoC: CESC - Emergency Shelter (singles) (ES) (6536)"
- Add an end date to the "Case Managers" entry

If a client returns to the facility, they will be assigned the same Housing Case Manager to ensure continuity of services and rapport building.

*Note: Exit dates should match the date the client left or was restricted from the facility.

*Note: Exits should be made under the EDA that matches the Entry/Exit. For example, the Coordinated Entry Entry/Exit should be exited using the Coordinated Entry EDA.

Outreach

Once a client has been added to a Housing Case Manager's caseload, the Housing Case Manager must conduct an Outreach with a scheduled appointment to the client within two weeks time. Outreach consists of the following:

- Contacting a client via phone and leaving a voicemail
- Leaving an Outreach Note with a Direct Care Specialist in the men's and/or women's wing control booths to give to clients.

Each outreach attempt must be documented in HMIS with the date and time provided to the client in the case notes. After three outreach attempts with no response from the client, the Case Management Supervisor will remove the client from the case manager's caseload.

At time of Outreach, the following should be completed in HMIS:

- **Added the following Entry/Exits:**
 - o Assigned Grant EDA (if applicable)
 - o Shelter Case Management
- **Add yourself as their Case Manager**

*Note: At least one outreach attempt should be conducted using the Outreach Note

Initial Engagement/1st Appointment

Upon initial engagement with a client, the Housing Case Manager is expected to explore the Client's background, begin building rapport, and collaborate with the Client to create a housing plan. In addition, the Housing Case Manager should explore the Client's housing goals, assess for any housing barriers (i.e. evictions, income, criminal history, credit score, etc.), and provide the Client with the next steps in their housing plan.

During the first appointment, a Housing Case Manager should complete the following:

- PromisSE ROI
- Coordinated Entry Assessment
- VI-SPDAT

Additional Appointments

Housing Case Managers are expected to follow up with their clients to obtain updates about their housing plan progress. Additional appointments should be made at the time of the previous appointment and should be scheduled **according to the clients' needs unless otherwise specified by the supervisor.**

Requests for Payment

Requests for payment include documents necessary for financial processing. Requests must be submitted to the Case Management Supervisor with all required documents included. Upon signature, the CMS will submit the documentation to the finance department via email, cc'ing the Director and appropriate Case Management staff member. The Case Management Supervisor will return the documents to the respective Case Management staff member to record in the client's file and to issue the Promise to Pay to the entity receiving payment.

Requests for Payment Submissions

When submitting requests for payment, Housing Case Managers and Housing Navigators should submit the following documentation to the Case Management Supervisor:

For Application Fees:

- W9
- Request for Payment
- Promise to Pay

*Upon approval, the Case Management Supervisor will provide the credit card needed for online applications.

For Rent/Deposit Fees:

- W9
- Request for Payment
- Cost Agreement
- Promise to Pay
- Lease

For Rent/Utility Arrears:

- W9
- Request for Payment
- Promise to Pay
- Lease
- Utility bill or rental arrears ledger
- Cost Agreement (For rent only)

Checks/Payments will not be issued without a current W9 included in the submission for the entity receiving payment.

Housing Navigator Transition

Once a client has obtained at least one approved rental application and/or solidified a housing unit, the Housing Case Manager will transition the Client to the Housing Navigator. The transition consists of:

- Notifying the Housing Navigator that a client is ready to transition into permanent housing via email and including the following:
 - o Client name, HMIS number, property contact information, rent cost, deposit cost, and most effective mode of communication for the client
 - o **The supervisor must be copied on this email**
- Providing the Housing Navigator with the physical or electronic client file
- Adding an end date to the corresponding "Case Managers" tab entry
- Uploading the Rapid Rehousing Application portion **only** to HMIS under the corresponding Rapid Rehousing EDA (if applicable)

The Housing Navigator will outreach the client notifying them of their transition via note or electronically by phone or email; whichever is most effective for active client communication.

Note: Clients on PSH will not transition to the Housing Navigator. Housing Case Manager's are expected to support their client through the PSH housing process.

Housing Navigator

The Housing Navigator acts as a guide and support system to the Client throughout the transition to permanent housing. The Housing Navigator will coordinate preparations for move-in such as transportation, move-in kits and supplies, lease education, and unit inspections. The Housing Navigator will also work to identify properties that will accept program funding and accommodate for clients' unique needs. In addition, Housing Navigators strengthen relationships among the community as it relates to housing to build an inventory of housing units available for our clients.

Exit Assessment

Exit interviews are completed to capture updated information such as income, health insurance, benefits, and more at time of exit. An exit interview must be completed on each client who transitions to the Housing Navigator within a week of their move-out date.

The Housing Navigator must complete exit interviews for all EDAs open for CESC except for FL506 - BBCoC: CESC - Emergency Shelter (singles) (ES) (6536).

Exit interviews must be completed under the same EDA as the program being exited. For example, the exit interview for the program "FL506 - BBCoC: Coordinated Entry (9272)" must be completed under the "FL506 - BBCoC: Coordinated Entry (9272)" EDA or the program "FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)" must be completed under the "FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)" EDA.

Conducting Unit Inspection

Once the Client has an approved rental application, the Housing Navigator will connect with the property to schedule a unit inspection.

Unit inspections consist of ensuring the housing unit is free of containments, includes equipment for the client to sustain themselves (stove, refrigerator, etc..), has working utilities, and is equipped with proper fire safety measures.

If the unit does not pass inspection, violations should be documented in HMIS under the appropriate EDA, and an additional inspection should be conducted prior to issuing payment and prior to the Client moving in. The Housing Navigator should continue to conduct inspections until the unit passes. If the property is unable to satisfy inspection requirements within three attempts, they are not eligible to receive funding. **All housing units must pass inspection before assistance is provided.**

*Note: Unit inspections requirements are subject to change

Lease Education

Lease education is provided to Clients to ensure they are aware and understand the expectations of their permanent housing unit. Our goal is for all clients to understand the provisions of their lease before signing to increase housing knowledge and retainment.

The Housing Navigator should review and complete the lease education form with each client before they move out of the facility. The Housing Navigator should review rent cost, rent due date, rent payment method(s), included/excluded costs, maintenance contact, landlord contact, and any major rules of the property with the Client.

Resource Education

Upon Exit, the Housing Navigator should identify any needs the Client may have regarding housing. Clients should be provided resources for food, social services, transportation, and other services as needed. The Housing Navigator will also provide information about the on-going case management services they will provide if applicable to the Client's housing program or agency policy.

Follow Up Visits

Once the Client is housed, the Housing Navigator must conduct monthly follow-up visits for up to 3 months then again at one year to ensure the Client has remained housed. Regarded as "light touch" case management, follow up visits are conducted to ensure housing retainment by linking clients with to needed resources and additional assistance if necessary.

The Housing Navigator should attempt to schedule and conduct an in-person follow up visit for each of the 30-day, 60-day, and 90-day follow ups. After two attempts to schedule a visit, the Housing Navigator should mail a "We missed you" letter to the client. The Housing Navigator will then attempt to complete the follow-up visit via phone.

During follow-up visits, the Housing Navigator should complete the associated follow-up forms and place completed forms in the Client's physical file.

*Note: Follow up visit requirements are subject to change based upon grant and agency policy

For Rapid Re-housing Monitoring: After the 90 day follow up is completed, the Housing Navigator should upload the housing paperwork portion of the Rapid Rehousing file to HMIS under the corresponding Rapid Rehousing EDA.

Each follow up should be documented as a case note in HMIS under the EDA "FL506 - BBCoC: CESC - Shelter-Case Management (SSO) (6569)".

Attachment Health

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.7. Coordination with Healthcare Organization

D.7. Coordination with Healthcare Organization

Located in the Kearney Center is CESC Health Services department provides a holistic approach to healthcare for residents of the center's overnight program and the underserved members of our community. The dental and health services programs provide free services to clients through volunteer dentist, nurses, and partnerships with local clinics and other medical institutions. CESC Health Services has an established partnership with Tallahassee Memorial Healthcare Transition Center. Services provided include telehealth, screenings and first aid, vital assessments, diabetic monitoring, glucose testing, over-the-counter medication, health education, medical assistance, oral hygiene, oral cancer screenings, fillings, dentures, mental health and substance support, specialty consults, and more.

Additionally, the Kearney Center has an established partnership with Well Care, The Apalachee Center, Humana Health Insurance, Veterans Affairs, and Big Bend Cares. These providers offer services to clients at the Kearney Center which includes providing mobility or accessibility equipment to disabled persons, health insurance, mental health services, Veteran's benefits, and conduct HIV testing and provide sex education.

TMH Transition Center/Kearney Center Health Clinic
Revised Model 8.3.22

Goal:

The TMH Transition Center (TC) will work in collaboration with the Kearney Center (KC) Health Services to provide transitional care services to clients with the goal of preventing hospital readmissions and unnecessary visits to the emergency room.

Initial Model:

Beginning the week of 7.25.22, the TC will be available via scheduled appointments to see patients at the KC via telemedicine to triage client's health needs after discharge from the hospital, or those that cannot wait to see their primary care provider.

**The KC staff will make every effort to have clients follow up with their own PCP first, but when they cannot be seen per their discharge instructions, is when the patient may be scheduled at the TC for urgent needs. The TC is NOT a substitute for primary care, it is a stop gap for high risk patients who are at risk for readmission to the hospital.*

1. When a client is identified to be in need of transitional care services, the KC Health Services staff (primarily Whitney) will contact Jasmine or Angela at the TC and schedule an appointment.
2. KC will complete the TC initial paperwork with the client, and fax to the TC at least 24 hours prior to the appointment.
3. The KC staff will "present" the patient virtually via telemedicine at the time of the scheduled appointment and remain in the room with the patient to assist with the physical exam.
4. Upon conclusion of the telemedicine visit, the TC will determine the appropriate follow up with the patient which could include the following:
 - a. Scheduling an in person visit to the TC
 - b. Referring the client for additional services by another clinic and/or provider
 - c. Recommending the patient go to urgent care or the ER
 - d. Scheduling a follow up visit
 - e. Prescribing medications as appropriate
 - f. Providing patient education/follow-up of a chronic illness

Metrics:

Several metrics will be tracked during the initial phase of the collaboration including the following:

1. Number of a patients seen
2. Conditions
3. Follow-up needed
4. Medications prescribed/sampled
5. Partnership opportunities/identified services needed onsite.

The TC and KC teams will meet every two weeks to discuss progress, challenges, opportunities, etc.

Attachment H

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.8. Program – Staffing Plan

D.8. Program – Staffing Plan

The *Day Services* project will be implemented on January 1st, 2023. The team will be comprised of the following seven positions: Day Services Manager, Day Services Intake Specialist (The Kearney Center Campus), Day Services Intake Specialist (CCYS Campus), Day Services Direct Care Specialist, Day Services Laundry Attendant, Day Services Meal Coordinator, and a part-time Day Service Food Service Specialist.

The team will be able to ensure quality HMIS data entry due to dedicated Intake only specialized training. The Day Services Manager will ensure the team is fully trained in each position and that all service providers scheduled for the day are present and available. They will maintain the flow of the day and address and respond to issues as they arise. Intake for Day Services will provide special designation stickers for Day Service only clients to keep them distinguishable from the residents who live in the building. This will provide greater safety for everyone. They will also make sure the clients are assigned to the proper que's when services are being rendered.

Service providers will be provided either an office or a space they deem most appropriate for their services to be rendered.

The Day Services Direct Care Specialist will assist with maintaining the showers and supplies necessary for all guests. They will provide clothing upon request if available. They will monitor and maintain the separation of client spaces to keep Day Service clients from entering the "out of bounds" areas such as the dorm rooms of the wings. They will provide trauma informed de-escalation services when the need arises. Additionally, they will provide exceptional customer service by making the guests feel welcome and safe.

The Day Services Laundry Attendant will provide laundry service for individuals who request their clothing to be washed. They will also replenish towels and wash cloths through out the shift. The attendant will assist in replacing full trash and linen receptacles and monitoring the facility for safety issues and conducting light cleaning when necessary.

The Day Services Meal Coordinator will plan and execute all meals (lunch and dinner). These meals will be balanced and portable. The coordinator will have a part-time assistant who will follow the coordinator's meal plans, assist with preparation and serving. Meals will be served at the back gate.

Staff will be hired two weeks prior to beginning the operations. Training for all staff will include Orientation (PowerPoint), Harassment, Diversity and Inclusion, De-escalation, Trauma Informed Care, HMIS, and Emotional Intelligence training.



Day Services Manager

Position Description

Interested in working in a fast-paced environment with a dynamic team? We are looking for motivated individuals with a client-first mentality and passion for community service to join our team!

The Kearney Center provides temporary emergency shelter and housing focused services to people experiencing homelessness, in a safe environment that promotes dignity and respect.

Position Type: Full Time
Hours per week: 40
Supervisor: Supportive Programs Supervisor
FLSA: Non-Exempt

Position Responsibilities:

- To coordinate the partner agency and community program services available at the Kearney Center
- Schedule meetings, programs, services providers and ensure this coordinates smoothly with daily operations
- Organize office and meeting rooms master calander and distribute to multiple physical and virtual locations
- Administer contracts for use of space with partner agencies, including rent collection and attendance schedules
- Coordinate and orient new service providers
- Coordinate weekly network meetings
- Keep service fliers up-to-date and post them in appropriate locations
- Plan and implement donation drives, talent shows, service provider fairs, etc
- Announce agency happenings to the community through email and website updates
- Assist with daily operations
- Assist with information technology

Education and Experience:

- Bachelor's Degree
- 2+ years' experience in social services

Skills and Qualifications:

- Excellent organizational and time management skills
- Ability to remain focused and calm in a dynamic, fast-paced environment

ADDRESS: Post Office Box 2194
Tallahassee, FL 32316

EMAIL: info@kearneycenter.org

WEB: www.KearneyCenter.org

- Strong verbal and written communication skills
- Demonstrated professional and appropriate behavior in the workplace
- Commitment to practicing the values of dignity and respect with clients, coworkers and community partners
- Cooperative and flexible with people systems
- Proficiency with Windows, MS Office, email, and database use

Work Environment: Fast-paced, walking, sitting, minimal driving. Ability to supervise others while maintaining an efficient and effective workflow. This position requires the working ability to carry 50lbs. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Pay rate is based on skills and experience.

Position will remain open until filled.

CESC, Inc. is an EOE.

By signing below, I agree and understand that I must be able to perform each responsibility set forth above to continue my employment with the Organization.

Employee Signature: _____ **Date:** _____



Day Services Intake Specialist

Position Description

Interested in working in a fast-paced environment with a dynamic team? We are looking for motivated individuals with a client-first mentality and passion for community service to join our team!

The Kearney Center provides temporary emergency shelter and housing focused services to people experiencing homelessness, in a safe environment that promotes dignity and respect.

Position Type: Full Time
Hours per week: 40
Supervisor: Intake and Diversion Supervisor
FLSA: Non-Exempt

Position Responsibilities:

- Provide compassionate, client-centered services assisting with identifying and accessing more stable housing options.
- Providing trauma-informed, housing focused case management, focusing on identifying safe and appropriate alternatives to emergency shelter.
- Utilize a collaborative process with team members and community partners to provide service linkages and support systems to effectively serve clients.
- Ensure timely and thorough documentation of all services, including in-person meetings and collateral contacts.
- Honor and maintain strict confidentiality in all areas: written, spoken and observed communication.
- Demonstrate knowledge of Kearney Center and community resources for which people experiencing homelessness qualify and connect clients with these services.
- Demonstrate understanding of the needs of people experiencing homelessness.
- Possess knowledge of programs and policies that impact people experiencing homelessness.
- Participate in weekly supervision and team meetings.
- Assess clients requesting emergency shelter services with attention to exploring immediately available alternatives to entering emergency shelter system.
- Determine eligibility for services.
- Provide crisis intervention when needed.
- Track eligible client information to provide for entry into shelter database via HMIS.
- Track, log, summarize and report activities daily.
- Other assigned activities that build the capacities of guests and staff to fulfill the mission of The Kearney Center.
- Some evening hours may be required.

ADDRESS: Post Office Box 2194
Tallahassee, FL 32316

EMAIL: info@kearneycenter.org

WEB: www.KearneyCenter.org

Education and Experience:

- Experience with case management and homelessness services preferred
- Bachelor's Degree in Social Work or related human services preferred

Skills and Qualifications:

- Strong verbal and written communication skills
- Good working knowledge of local resources
- Compassionate and open-minded
- Commitment to practicing the values of dignity and respect with clients, coworkers, and community partners
- Ability to remain focused and calm in dynamic, fast-paced environment
- Cooperative and flexible with people and systems
- Basic familiarity with computers: Windows, MS Office, email, and database use
- Must be able to pass background check to access and utilize the Homeless Management Information System

Work Environment: General office environment with standard accessible office equipment. This position does not require unusual physical ability. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Submit cover letter, resume, and three professional references.

Position will remain open until filled.



**DAY SERVICES DIRECT CARE SPECIALIST
JOB DESCRIPTION**

Location: The Kearney Center
Department: Direct Care
Supervisor's Title: Direct Care Supervisor
FLSA Classification: Non-exempt

I. Summary of the main function/purpose of the position:

This position directly supports the mission of providing a safe emergency service center environment that promotes dignity and respect.

II. Principal duties/responsibilities:

- Provide compassionate, client-centered customer service
 - Attend to the needs of people experiencing homelessness in a non-congregate shelter environment (motel or apartment) where an average of 100 per site access services and sleep overnight, with special attention to clients' safety and well-being
 - Contribute to care and cleanliness of the facility
 - Assist clients in understanding the processes and following the guidelines of the facility
 - Utilize trauma-informed care and de-escalation principles with clients in a busy, high-volume shelter environment
 - Document incidents and updates for smooth flow of information between shifts
 - Perform routine facility walk-about to be aware of activities throughout the building, ensuring client safety and comfort.
-

III. Occasional duties or projects which may be performed at irregular intervals:

The Direct Care Specialist may be assigned additional duties in support of the organization's mission.

IV. Accountability: Areas in which the position is accountable/responsible:

- Records: Responsible for providing and maintaining accurate records being careful to meet audit and grant requirements.
- Safety: Ensures client records and organizational information remains confidential. Operates equipment in accordance with safety regulations. Notify security personnel, as needed.

Customer Service: Maintains excellent rapport with clients, staff, management and the community

V. Supervisory Responsibility: None

VI. Business-Related Contacts:

External: Clients, Volunteers, Board Members, Contractors, Security Personnel,
Law Enforcement, State Officials

Internal: All staff, Management

VII. Educational and/or experience requirements:

High school or equivalent

Crisis intervention: 1 year

Customer service: 1 year

Experience working with marginalized populations including people experiencing homelessness, low income, and/or physical/mental disability and/or addiction. 1 year

VIII. Certification or licensing requirements:

Valid Driver's License or dependable transportation when and where public transportation is not available.

IX. Specialized equipment or machines used in the course of the duties of the position.

Personal Computer, printer, copier, business telephone system, intercom system, and other standard office equipment as required.

X. Mental factors:

COMPARING - Judging the readily observable functional, structural, or compositional characteristics (whether similar to or divergent from obvious standards) of data, people, or things.

COPYING - Transcribing, entering, or posting data.

COMPUTING - Performing arithmetic operations and reporting on and/or carrying out a prescribed action in relation to them.

COMPILING - Gathering, collating, or classifying information about data, people, or things. Reporting and/or carrying out a prescribed action in relation to the evaluation is frequently involved.

ANALYZING - Examining and evaluating data. Presenting alternative actions in relation to the evaluation is frequently involved.

COORDINATING - Determining time, place, and sequence of operations or action to be taken on the basis of analysis of data. May include prioritizing multiple responsibilities and/or accomplishing them simultaneously.

SYNTHESIZING - To combine or integrate data to discover facts and/or develop knowledge or creative concepts and/or interpretations.

SUPERVISION (received) - Independence of actions; authority to determine methods of operation.

NEGOTIATING - Exchanging ideas, information, and opinions with others to formulate policies and programs and/or jointly arrive at decisions, conclusions, solutions, or solve disputes.

COMMUNICATING - Talking with and/or listening to and/or signaling people to convey or exchange information; includes giving/receiving assignments and/or directions.

INTERPERSONAL SKILLS/BEHAVIORS - Dealing with individuals with a range of moods and behaviors in a tactful, congenial, personal manner so as not to alienate or antagonize them.

XI. Physical factors

STRENGTH (LIGHT) - Exert up to 20 lbs. of force occasionally, and/or up to 10 lbs. of force frequently, and/or a negligible amount of force constantly to move objects. Light work usually requires walking or standing to a significant degree.

CLIMBING - Ascending or descending using feet and legs and/or hands and arms. Body agility is emphasized.

BALANCING - Maintaining body equilibrium to prevent falling on narrow, slippery, or erratically moving surfaces; or maintaining body equilibrium when performing feats of agility.

STOOPING - Bending body downward and forward. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.

CROUCHING - Bending body downward and forward by bending legs and spine.

REACHING - Extending hand(s) and arm(s) in any direction.

HANDLING - Seizing, holding, grasping, turning, or otherwise working with hand or hands. Fingers are involved only to the extent that they are an extension of the hand.

FINGERING - Picking, pinching, or otherwise working primarily with fingers rather than with the whole hand or arm as in handling.

TALKING - Expressing or exchanging ideas by means of the spoken word. Talking is important for those activities in which workers must impart oral information to clients or to the public, and in those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.

HEARING - perceiving the nature of sounds. Used for those activities which require ability to receive detailed information through oral communication, and to make fine discriminations in

sounds, such as when making fine adjustments on running engines.

NEAR ACUITY - Clarity of vision at 20 inches or less. Use this factor when special and minute accuracy is demanded.

FAR ACUITY - Clarity of vision at 20 feet or more. Use this factor when visual efficiency in terms of far acuity is required in day and night/dark conditions.

DEPTH PERCEPTION - Three-dimensional vision. Ability to judge distances and spatial relationships so as to see objects where and as they actually are.

ACCOMMODATION - Adjustment of lens of eye to bring an object into sharp focus. Use this factor when requiring near point work at varying distances.

FIELD OF VISION - Observing an area that can be seen up and down or to right or left while eyes are fixed on a given point. Use this factor when job performance requires seeing a large area while keeping the eyes fixed.

XII. Environmental factors:

General office environment

Lighting is adequate

Temperature is regulated and moderate

Standard office equipment accessible

By signing below, I agree and understand that I must be able to perform each responsibility set forth above to continue my employment with the Organization.

Employee Signature: _____ **Date:** _____

Day Services Laundry Facility Attendant

Pay: Minimum Wage

At least 20 hours per week

Shift hours: 8:00 AM - 5:00 PM

Responsibilities:

Provide laundry services for clients

Respond to basic client requests

Record all activity and work in logbook

Provide compassionate, client-centered customer service

Process incoming and outgoing laundry cleaning request

Work with other direct care team members

Attend to the needs of people experiencing homelessness in a shelter environment where an average of 375 people access services and sleep overnight, with special attention to clients' safety and well-being

Recommend modifications to procedures to improve workflow

Document incidents and updates for smooth flow of information between shifts.

Utilize trauma-informed care and de-escalation principles with clients in a busy, high-volume shelter environment

Qualifications:

Must be 55 years old or older

Must live in Florida

Customer service experience preferred

Familiar with laundry room equipment preferred

Strong verbal and written communication skills

Ability to work independently

Ability to follow oral and written instructions

Physical Demands:

Lift a minimum of 25 pounds

Day Services Meal Coordinator

SUMMARY

This position serves in the Kearney Center Food Services Department. The position supports the Food Service department by overseeing the prep and meal service delivery functions in the Food Services Department. Work is generally performed on-site. This position verifies that kitchen procedures are followed and completed accurately and timely, with particular attention food safety. In the case of an emergency or difficult situation, this position is responsible for contacting the Food Service Director. This position oversees that supervision and support of food service volunteers and client food service volunteers, and coordinates with the Volunteer and Program Coordinator.

SCOPE

Reports to: Food Service Director

Supervises: Food service volunteers and client food service volunteers

ESSENTIAL FUNCTIONS:

- Prepare meals and coordinate food service delivery of meal to clients at Kearney Center
- Oversee the supervision and support for food service community volunteers so that they are supported and trained on kitchen protocols and meals are prepared and served properly
- Oversee that the food service client volunteers are supervised, supported and trained on kitchen protocols, meals are prepared and served properly, and assistance is provided to client volunteers to obtain a food handler certification or in finding employment
- Contributes to the center by participating in the staff meetings
- Demonstrates leadership and support to team members at the center
- Provide reports on food service meal counts and number of meal providers/volunteers

JOB REQUIREMENTS:

- Excellent organizational skills
- Excellent interpersonal skills

- Flexibility in work schedule
- Supervision experience
- Food Service experience



**FOOD SERVICES SPECIALIST
JOB DESCRIPTION**

Location: The Kearney Center
Department: Day Services Food Services
Supervisor's Title: Food Services Director
FLSA Classification: Non-exempt

I. Summary of the main function/purpose of the position:

The role of the Day Services Food Services Specialist is to help the Kearney Center Kitchen achieve the goal of providing a wide variety of high- quality nutritious food, including three meals a day, 365 days a year. The objectives of the Food Service program are to maximize use of donated, low-cost, and budgeted food sources. The Food Service program also seeks to accommodate dietary restrictions as approved by resident case managers as well as resident work and school schedules. The Food Service program should satisfy family shelter food service and nutritional standards and best practices, incorporate fresh fruits and vegetables, be served in an appealing manner, and be responsive to the residents' preferences.

II. Principal duties/responsibilities:

Actively participate in the preparation and service of menu items in the Kearney Center Cafeteria

Review menu plans and meal counts to determine the type and quantity of menu items to be prepared.

Cook and otherwise prepare menu selections

Comply with local health department Standards of Operation for food handling and storage.

Prepare menu selections according to assignments and recipes.

Prepare service line and serve when needed.

Secure kitchen and cafeteria at end of service period.

Wrap, label, date and properly store all food ingredients in accordance to safe food handling techniques, practices and guidelines.

Complete and submit food requisition, production, temperature log forms, inventory and other assigned paperwork to the Food Service Director.

Clean and sanitize all work and service areas and equipment.

Confirm with Food Service Director prior to departure, production and day end closing requirements.

Dependable and timely attendance

Build cohesive relationships with coworkers and volunteers

Meet sanitation, food handling, and quality presentation standards

Coordinate multiple tasks and meet production and service time schedules

Work independently with minimal supervision

Demonstration of consistent professionalism in the execution of daily assignments

Ability to work with diverse groups of people, including people experiencing homelessness

Excellent customer service skills

Excellent communication skills and strong organizational skills

Ability to accurately record and compile collected data

III. Occasional duties or projects which may be performed at irregular intervals:

Performs other assignments as may be required from time-to-time.

IV. Accountability: Areas in which the position is accountable/responsible:

Records: Responsible for providing and maintaining accurate records being careful to meet audit and grant requirements.

Safety: Ensures client records and organizational information remains confidential. Operates equipment in accordance with safety regulations.

Customer Service: Maintains excellent rapport with clients, staff, management and the community

Food Safety: Handles food and food preparation equipment and tools in accordance with safe food handling techniques, practices and guidelines.

V. Supervisory Responsibility: None

VI. Business-Related Contacts:

External: Clients, Volunteers, Board Members, Contractors, Vendors, Delivery Personnel
Internal: All staff, Management

VII. Educational and/or experience requirements:

Some kitchen experience.

VIII. Certification or licensing requirements:

Valid Driver's License or dependable transportation when and where public transportation is not available.

Florida Food Manager's Certification

Serve Safe Certification

IX. Specialized equipment or machines used in the course of the duties of the position.

Kitchen hand tools, including knives

Electric Kitchen equipment such as mixers, blenders

Stove, Oven, Dishwasher

Personal Computer, printer, copier, business telephone system, intercom system, and other standard office equipment

X. Mental factors:

COMPARING - Judging the readily observable functional, structural, or compositional characteristics (whether similar to or divergent from obvious standards) of data, people, or things.

COPYING - Transcribing, entering, or posting data.

COMPUTING - Performing arithmetic operations and reporting on and/or carrying out a prescribed action in relation to them.

COMPILING - Gathering, collating, or classifying information about data, people, or things. Reporting and/or carrying out a prescribed action in relation to the evaluation is frequently involved.

ANALYZING - Examining and evaluating data. Presenting alternative actions in relation to the evaluation is frequently involved.

COORDINATING - Determining time, place, and sequence of operations or action to be taken on the basis of analysis of data. May include prioritizing multiple responsibilities and/or accomplishing them simultaneously.

SYNTHESIZING - To combine or integrate data to discover facts and/or develop knowledge or creative concepts and/or interpretations.

SUPERVISION (received) - Independence of actions; authority to determine methods of operation.

NEGOTIATING - Exchanging ideas, information, and opinions with others to formulate policies and programs and/or jointly arrive at decisions, conclusions, solutions, or solve disputes.

COMMUNICATING - Talking with and/or listening to and/or signaling people to convey or exchange information; includes giving/receiving assignments and/or directions.

INSTRUCTING - Teaching subject matter to others, or training others through explanation, demonstration, and supervised practice; or making recommendations on the basis of technical disciplines.

INTERPERSONAL SKILLS/BEHAVIORS - Dealing with individuals with a range of moods and behaviors in a tactful, congenial, personal manner so as not to alienate or antagonize them.

XI. Physical factors

VERY HEAVY - Exert in excess of 100 lbs. of force occasionally, and/or in excess of 50 lbs. of force frequently, and/or in excess of 20 lbs. of force constantly to move objects.

STANDING – Maintaining body stature erect and in vertical position for 8 hours per day.

CLIMBING - Ascending or descending using feet and legs and/or hands and arms. Body agility is emphasized.

BALANCING - Maintaining body equilibrium to prevent falling on narrow, slippery, or erratically moving surfaces; or maintaining body equilibrium when performing feats of agility.

STOOPING - Bending body downward and forward. This factor is important if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.

CROUCHING - Bending body downward and forward by bending legs and spine.

REACHING - Extending hand(s) and arm(s) in any direction.

HANDLING - Seizing, holding, grasping, turning, or otherwise working with hand or hands. Fingers are involved only to the extent that they are an extension of the hand.

FINGERING - Picking, pinching, or otherwise working primarily with fingers rather than with the whole hand or arm as in handling.

TALKING - Expressing or exchanging ideas by means of the spoken word. Talking is important for those activities in which workers must impart oral information to clients or to the public, and in those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.

HEARING - perceiving the nature of sounds. Used for those activities which require ability to receive detailed information through oral communication, and to make fine discriminations in sounds, such as when making fine adjustments on running engines.

TASTING/SMELLING - Distinguishing, with a degree of accuracy, differences or similarities in intensity or quality of flavors and/or odors, or recognizing particular flavors and/or odors, using tongue and/or nose.

NEAR ACUITY - Clarity of vision at 20 inches or less. Use this factor when special and minute accuracy is demanded.

FAR ACUITY - Clarity of vision at 20 feet or more. Use this factor when visual efficiency in terms of far acuity is required in day and night/dark conditions.

DEPTH PERCEPTION - Three-dimensional vision. Ability to judge distances and spatial relationships so as to see objects where and as they actually are.

ACCOMMODATION - Adjustment of lens of eye to bring an object into sharp focus. Use this factor when requiring near point work at varying distances.

FIELD OF VISION - Observing an area that can be seen up and down or to right or left while eyes are fixed on a given point. Use this factor when job performance requires seeing a large area while keeping the eyes fixed.

XII. Environmental factors:

Standard commercial/institutional kitchen environment

Lighting is adequate

Temperature is regulated and moderate

Moderate noise

By signing below, I agree and understand that I must be able to perform each responsibility set forth above to continue my employment with the Organization.

Employee Signature: _____ **Date:** _____

Attachment I

CESC, Inc.

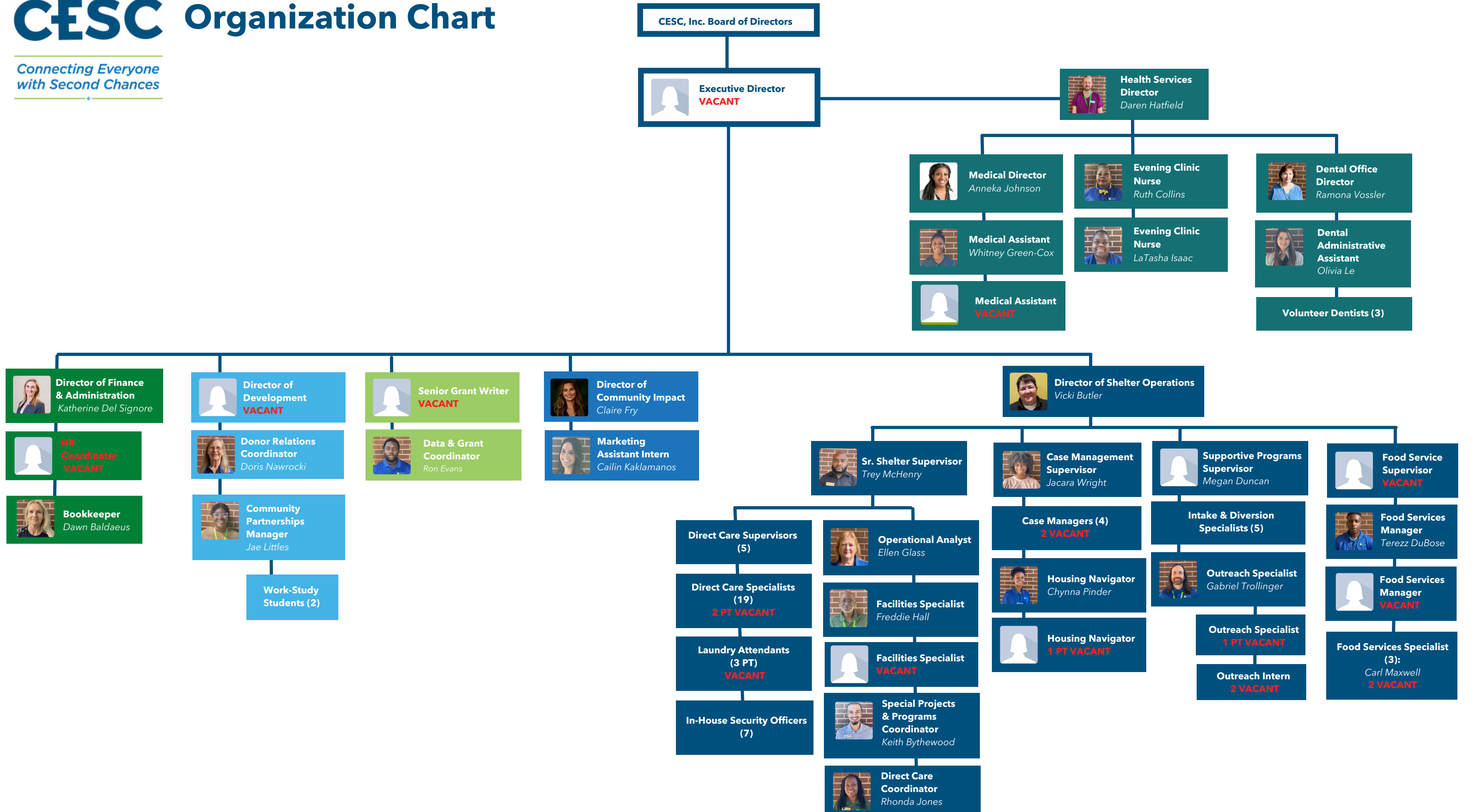
Day Services at CESC, Inc. Project Application

D.9. Program – Org Charts

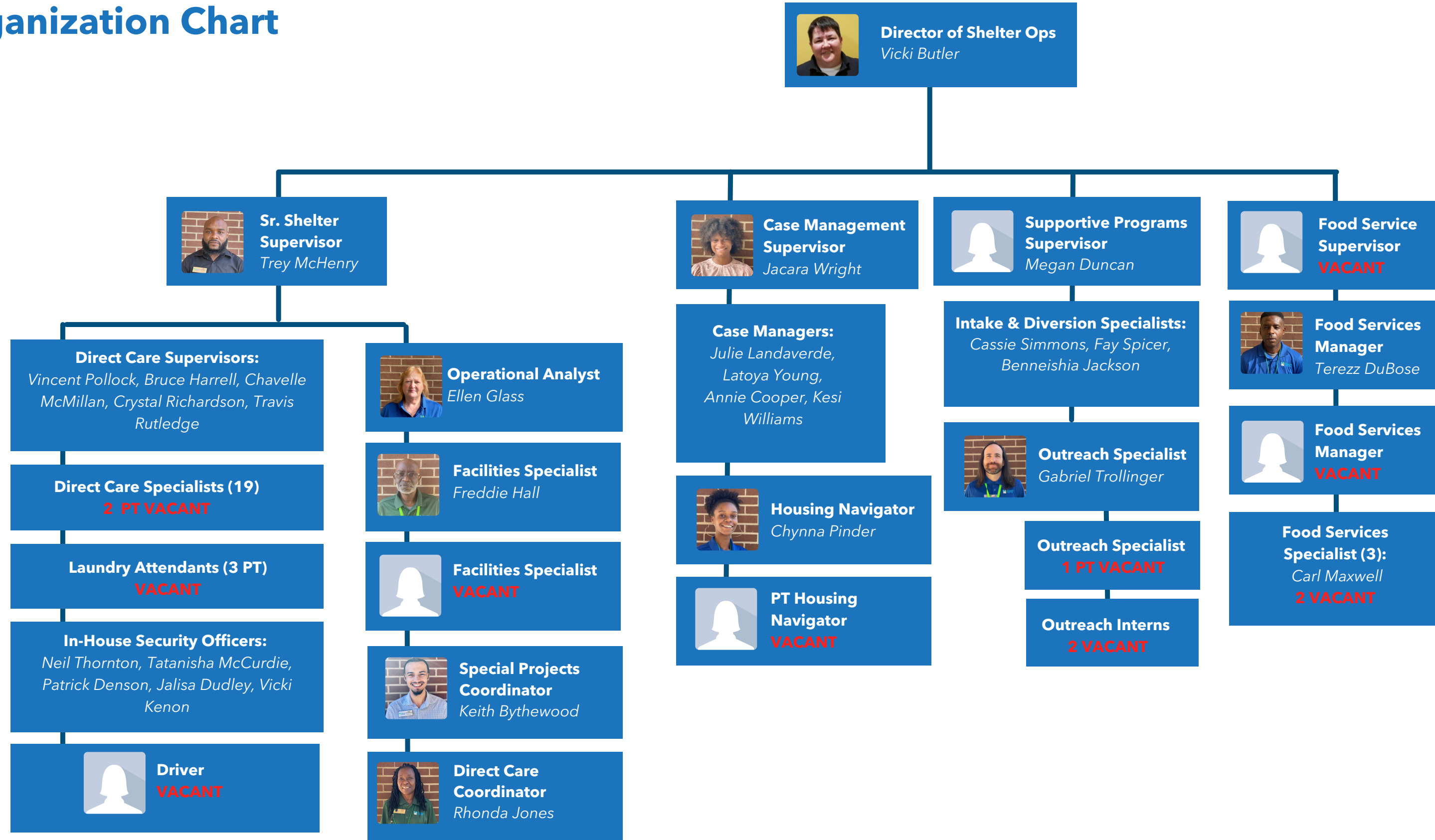


Organization Chart

Connecting Everyone
with Second Chances



Organization Chart



Attachment J

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.9. Program – Operational Plan

D.10. Program – Operational Plan

Operational Plan

Individuals seeking services will enter the front door of the Kearney Center and be greeted by Day Services Intake staff. They will sit with the specialist and provide their information for HMIS, VI-SPDAT, and explain what services they are requesting. They will then be provided with the identification sticker to be able to move through the building. The client will be shown where they are in the cue for services and given an orientation of the building lay out and what activities and services are being offered that day and where.

At 11:30 the Day Services guest will proceed to the back gate to receive their prepacked lunch and asked to not loiter in the area and use the trash cans. At 12:30 the can reenter the building and resume utilizing the various services they requested. At 4:00pm the guests will be asked to leave the property for the day. They will be invited to take a prepacked dinner with them.

Staff will be hired two weeks prior to beginning the operations. Training for all staff will include Orientation (Power point), De-escalation, Trauma Informed Care, HMIS, Confidentiality, Safety, Grievance policy and procedures, and Emotional Intelligence training.

The staff search will be conducted through social media, Indeed, and staffing agencies. All staff will be hired two weeks prior to operations and conduct all trainings within the two weeks of hire date.

Attachment K

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.11. Program – Client Eligibility

D.11. Client Eligibility

Prospective clients enter The Kearney Center through multiple streams. All Coordinated Entry referrals are managed through our HMIS.

Once clients arrive at The Kearney Center, staff utilize an intake form within our HMIS to determine their eligibility for shelter services. This form collects basic demographic information, income, benefits, emergency contact and medical information, as well as a diversion assessment.

If a client is eligible for services and cannot be immediately diverted from shelter, they will sign a Release of Information, Waiver, and Program Agreement. From here, clients will be assigned to an in-house housing case manager and will have regular access to service providers which work out of our shelter facility.

These service providers include agencies which connect clients with employment opportunities, benefits assistance, health insurance, etc. to promote economic self-sufficiency.

STAFF MEMBER NAME (Please print): _____

Please place a check mark next to each task that you have completed. An intake is not finished until all requirements have been met. The individual who administers the intake is responsible for all tasks.

_____ Administer the intake, make sure to retrieve all necessary signatures (both CL and staff)

_____ Create an ID for the CL

_____ Upload the CL photo to HMIS

_____ Input the intake into HMIS

_____ Upload the intake form into HMIS

Thank you!!

FOR DATA COLLECTION PURPOSES ONLY:

Today's date _____

Does the client have income? (Please circle)

Yes or No

If yes, amount _____

Was the client diverted? (Please circle)

Yes or No

If yes, to where _____

*Please note that a client is only diverted if a staff member assists them with identifying an immediate alternative to emergency shelter. Diversions are rarely possible outside of normal business hours, however at times family or friends may be a suitable option. If a diversion is pursued please inquire with the client about whether or not the identified option is safe. If you have any questions please email chloe.bare@cesctlh.org.



PromisSE Release of Information (ROI)

Continuum of Care (CoC) Program Management Information System of the Southeast (PromisSE)

Client's Last Name _____ First Name _____ MI _____

Date of Birth _____ Social Security Number _____

*** The Federal Privacy Act of 1974 requires that you be notified that disclosure of your Social Security number is voluntary under this record-keeping System. This System was authorized pursuant to directives from Congress and the Department of Housing and Urban Development (HUD). The Social Security number is used to verify identity, assure timely delivery of services, prevent duplication of services, and generate accurate required reports to HUD.**

PromisSE is a shared, electronic record keeping System that captures information about people experiencing homelessness or near homelessness, including their service needs. Our Agency is participating in PromisSE, a database that collects information on clients served by its member agencies and the services they provide.

I understand that all information gathered about me is personal and private and that I do not have to share information collected in PromisSE. It has been explained to me that all information collected will serve for reporting purposes and as a precaution to prevent duplication of services to ineligible individuals and families. I have had an opportunity to ask questions about PromisSE and to review the identifying information, which is authorized by this release for the PromisSE Member Agencies to share. I also understand that information about non-confidential services provided to me by human service agencies in the CoC may be shared with other participating in PromisSE agencies. This Release of Information will remain in effect for **5 (five) years** and will expire on _____ unless I make a formal request to this Agency that I no longer wish to participate in PromisSE.

Upon a life-threatening emergency or death, my System information will be used for identification purposes.

Upon written consent, a community partner that is a non-System participating agency, including many state or local service agencies can utilize your System information to provide additional services. **This is dependent upon the receipt of a signed document verifying your consent to release your information to a Community Partner.**

_____ I authorize sharing my data.

_____ I do not authorize sharing my data,

The CoC, as PromisSE Member Agency, to share my information between all participating PromisSE agencies. I authorize the use of a copy of this original document to serve as a verification for the purposes stated above.

Client's (Head of Household) Printed Name

Other Adult in HH Printed Name

Client's (Head of Household) Signature

Other Adult in HH Signature

Date (mm/dd/yy)

Date (mm/dd/yy)

Based on the information on the previous page:

____ I authorize sharing my dependent's data.

____ I do not authorize sharing my dependent's data.

The CoC, as PromisSE Member Agency, to share my information between all participating PromisSE agencies. I authorize the use of a copy of this original document to serve as a verification for the purposes stated above.

_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB

_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB
_____ Dependent's Name	_____ DOB

Legal Guardian's Authorizing Signature

Date (mm/dd/yy)

Agency Representative's Authorizing Signature

Agency Representative's Printed Name

Date (mm/dd/yy)

FOR STAFF USE ONLY	
_____	Staff obtained telephonic consent from client and dependents under 18 as listed above
_____	Staff did not obtain telephonic consent from client and dependents under 18 as listed above.

General Waiver

In exchange for being allowed access to services at The Kearney Center, I release from liability and waive my right to sue Beatitude Partners, LLC, the Shelter, CESC, Inc., their employees, officers, volunteers and agents from any and all claims, including claims of negligence, resulting in any physical injury, illness (including death) or economic loss I may suffer or which may result while at the Kearney Center. Further, I agree and understand that I am solely responsible for my own personal belongings and Center staff reserves the right to search your belongings for contraband at any time.

General Waiver- Client Initials _____

Non-Discrimination Policy: This institution is an equal opportunity provider.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

1. Mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410;
2. Fax: (202) 690-7442; or
3. Email: program.intake@usda.gov.

Non-Discrimination Policy- Client Initials _____

Kearney Center Confidentiality Protocol

We will not disclose information about you without your written consent unless:

- a. There is a suspected abuse of a child and/or elderly or disabled person.
- b. There is reasonable cause to believe that you pose a risk to yourself or others.
- c. There is reason to believe that you have committed or are in the process of committing at a crime.
- d. Law enforcement is serving an arrest warrant.
- e. If you are being investigated by the Department of Children and Families.
- f. Verification of residence needed by your probation officer.
- g. Verification of residence when required by funding sources.

Confidentiality Protocol - Client Initials _____

My signature below indicates that I have read and understand the General Waiver, Non-Discrimination Policy, and Confidentiality Protocol.

Name: _____

Signature: _____

Date: _____

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. (* indicates required field)

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

		/			/					
Month			Day			Year				

***NAME (First, Middle, Last Name, Suffix (e.g. Jr, Sr, III) [All Clients]**

NAME DATA QUALITY [all clients]

First Name																					<input type="checkbox"/> Full name reported	
Middle Name																						<input type="checkbox"/> Partial, Street name, or code name reported
Last Name																						<input type="checkbox"/> Client doesn't know
Suffix																						<input type="checkbox"/> Client refused

***SOCIAL SECURITY NUMBER [All clients]**

***DATE OF BIRTH (e.g., 05/21/1991) [All clients]**

***Sexual Orientation [All clients]**

			-							/			/									<input type="checkbox"/> Full SSN reported	<input type="checkbox"/> Full date of birth reported	<input type="checkbox"/> Heterosexual	<input type="checkbox"/> Questioning/unsure
<input type="checkbox"/> Approximate or partial SSN reported										<input type="checkbox"/> Approximate or partial DOB reported										<input type="checkbox"/> Gay	<input type="checkbox"/> Other				
<input type="checkbox"/> Client doesn't know										<input type="checkbox"/> Client doesn't know										<input type="checkbox"/> Lesbian	<input type="checkbox"/> Client doesn't know				
<input type="checkbox"/> Client Refused										<input type="checkbox"/> Client refused										<input type="checkbox"/> Bisexual	<input type="checkbox"/> Client refused				

***VETERAN STATUS? [All clients]** Yes No Client doesn't know Client refused

***ETHNICITY [All clients]**

<input type="checkbox"/> Non-Hispanic/Non-Latin(a)(o)(x)	<input type="checkbox"/> Hispanic/Latin(a)(o)(x)	<input type="checkbox"/> Client doesn't know	<input type="checkbox"/> Client refused
--	--	--	---

***RACE More than one race is permitted. Client doesn't know and Client refused should only be selected if no other response is selected. [All clients]**

<input type="checkbox"/> American Indian, Alaska Native, or Indigenous	<input type="checkbox"/> Asian or Asian American	<input type="checkbox"/> Black, African American, or African	<input type="checkbox"/> Native Hawaiian or Pacific Islander
<input type="checkbox"/> White	<input type="checkbox"/> Client doesn't know	Client refused	

***GENDER [All clients]**

<input type="checkbox"/> Female	<input type="checkbox"/> A gender other than singularly male or female	<input type="checkbox"/> Questioning	<input type="checkbox"/> Client refused
<input type="checkbox"/> Male	<input type="checkbox"/> Transgender	<input type="checkbox"/> Client doesn't know	<input type="checkbox"/> Data Not Collected

***RELATIONSHIP TO HEAD OF HOUSEHOLD [All clients]**

<input type="checkbox"/> Self (head of the household)	<input type="checkbox"/> Head of household's other relation member (other relation to head of household)
<input type="checkbox"/> Head of household's child	<input type="checkbox"/> Other: non-relation member
<input type="checkbox"/> Head of household's spouse or partner	

***COUNTY OF LAST PERMANENT ADDRESS [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: _____	

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

Total number of months continuously homeless immediately prior to project entry (round up): _____

*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 (other than RRH) for formerly homeless persons
<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

Approximate Date Homelessness Started _____/_____/_____

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 violence 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 Data Not Collected

If yes for "domestic violence victim/survivor": **Are you currently fleeing?**

- Yes No Client doesn't know Refused

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):		

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):		

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

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

Disability Type	Disability Determination						
	Yes	No	Client doesn't know	Client refused	If Yes, expected to be of long-continued and indefinite duration and substantially impairs ability to live independently?	Long term condition? (Y/N)	Approximate Start Date of condition(s)
Alcohol Use (only)							
Both Alcohol and Drug Use							
Chronic Health Condition							
Developmental Condition							
Drug Use (only)							
HIV or AIDS							
Mental Health Problem							
Physical Condition							

Housing Move-in Date (for PSH & RRH Projects Only): _____/_____/_____

Client's Emergency Contact Information

(for Emergency Shelter use only)

Emergency Contact Name:	
Emergency Contact Address:	
Emergency Contact Phone:	
Emergency Contact Relationship to Client:	
Emergency Medical Information:	
Primary Care Physician:	
What led to homelessness?	
License / ID Number:	
Valid State ID?	
Client Car: Year, Make, Model, Color, Tag#:	
Convicted Sex Offender?	
When are you available to meet with a Case Manager?	

Participant File Checklist

Client Name: _____ HMIS # _____

Address: _____ Phone: _____

Date Application Approved: _____ Date Housed: _____

Date Exit: _____ VI-SPDAT Score _____ (should be between 4-7)

ELIGIBILITY and INTAKE PAPERWORK

- Prescreening Application
- Coordinated Entry Assessment including completed VISPDAT (verify that there is no Diversion funding that has been provided within the last 3 months)
- Homeless Verification (self-certification of housing status used a last resort only)
- Income Verification (proof of income sources from last 30 days or Zero OR Self-Certification Income Statement)
- Copy of I.D.
- Grievance Policy (and Copy for client)
- Budget
- Program Release of Information
- Housing Stability and/or Individual Service Plan

HOUSING PAPERWORK

- Landlord W-9
- Housing Habitability Standards Inspection Checklist Complete
- Budget
- Request for Payment
 - Rent
 - Utilities (must be in client's name)
- Rental Assistance Payment Agreement (Move In Cost Agreement)
- Signed residential lease between participant and landlord
 - Security deposit less than or equal to 2 months of rent
 - What does my lease say? Tenant education sheet (provide copy of completed document to client)

PROGRAM EXIT/FOLLOW-UP

- Resource needs assessment every 4 months
- HMIS Exit
- Documentation of 1 contact every 4 months for 1 year after program exit

Pre-screening Application

Referring Agency: Case Manager / contact #: Name of all adults in household: First: _____ MI: ____ Last: _____ First: _____ MI: ____ Last: _____	Date: Last 4 digits of Social Security # _____ _____
Phone #:	
Have you received previously received Diversion funding within the last 3 months? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the client's current shelter stay over 90 days? <input type="checkbox"/> Yes <input type="checkbox"/> No <p style="text-align: center;"><i>Applicants who answer yes to the questions may not eligible.</i></p>	
Homelessness Criteria: 1. Are you and your family living in an emergency shelter or staying in a hotel that is paid for by a charitable organization? <input type="checkbox"/> Yes <input type="checkbox"/> No 2. Is your permanent nighttime residence a place not meant for human habitation such as a car, abandoned house, or tent? <input type="checkbox"/> Yes <input type="checkbox"/> No 3. Are you and your family currently fleeing from domestic or sexual violence? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Did the applicant answer yes to at least one of the three criteria listed above?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
1. Does your household include children under 18? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, how many? _____	
Do you have enough income or benefits to be able to afford to pay rent and utilities each month (In most cases, clients will need at least \$900 in monthly income and benefits)? <input type="checkbox"/> Yes <input type="checkbox"/> No Can you move into an apartment/house without this assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<input type="checkbox"/> Eligible <input type="checkbox"/> Ineligible, reason: _____ <p style="text-align: center;"><i>All information above must be complete prior to acceptance of form</i></p>

Attachment L

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.12. Improvement of System Performance

D.12. Improvement of System Performance

CESC, Inc. will utilize this project to improve the following HUD System Performances:

1. Decrease the length of time persons experiencing homelessness
2. Decreasing likelihood of client reentering homelessness

The CESC, Inc. *Day Services* program provides access to supportive services to unsheltered individuals through a single location in the Kearney Center. These services are a holistic, comprehensive approach to help unsheltered individuals obtain the resources needed towards stability, which would decrease time in homelessness and prevent reentering of homelessness.

Attachment M

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.13. Project Outcomes

D.13. Project Outcomes

CESC, Inc.'s proposed outcomes include: (1) decreasing the length of homelessness (2) decreasing reentry into homelessness (3) decreasing number of homeless persons and annual PIT count

Goal 1: Decreasing the length of homelessness

By the end of the grant period there will be at least a 50% reduction in the length of homelessness experienced.

Goal 2: Decreasing reentry into homelessness

By the end of the grant period 80% of participants that achieve permanent housing will remain.

Goal 3: Decreasing number of homeless persons and annual PIT count

By the end of the grant period, there will be at least a 30% reduction in individuals experiencing unsheltered homelessness in the community.

Data will be tracked ongoing and monthly reports will be pulled to ensure that the program is working toward the identified goals. The data elements for the goals listed above will be tracked within the HMIS System.

Attachment N

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.14. Project Budget

CESC, Inc.
Proposed Budgeted Expenses

	Year 1	Year 2	Year 3	Total
Personnel Total Comp (7 positions)	\$ 271,001.60	\$ 271,001.60	\$ 271,001.60	\$ 813,004.80
H3LP FL - Job Placement	\$ 42,000.00	\$ 42,000.00	\$ 42,000.00	\$ 126,000.00
Supplies (towels, hygiene, paper products, detergent, etc.)	\$ 16,000.00	\$ 16,000.00	\$ 16,000.00	\$ 48,000.00
Transportation	\$ 4,965.07	\$ 4,965.07	\$ 4,965.06	\$ 14,895.20
Administration	\$ 32,700.00	\$ 32,700.00	\$ 32,700.00	\$ 98,100.00
Totals	\$ 366,666.67	\$ 366,666.67	\$ 366,666.66	\$ 1,100,000.00

Category Cost per Client	
(1,800 in 3 Years)	
\$ 451.67	74%
\$ 70.00	11%
\$ 26.67	4%
\$ 8.28	1%
\$ 54.50	9%
\$ 611.11	

CESC, Inc. will be able to serve an additional 600 clients per year with the Day Services program, or 1,800 clients in 3 years. With the \$1.1M in funding, that would provide ~\$611 of Day Services cost per client.

Position Title	Employment Type	Group	Pay Type Code	Hourly Payrate	Salary	Retirement (3%)	Insurance	Total Comp	Year 1 Total Comp	Year 2 Total Comp	Year 3 Total Comp	Combined Total Comp
Day Services Manager	Full Time	Admin	Hourly	\$ 22.00	\$ 45,760.00	\$ 1,372.80	\$ 700.00	\$ 47,832.80	\$ 47,832.80	\$ 47,832.80	\$ 47,832.80	\$ 143,498.40
Day Services Intake Specialist	Full Time	Intake	Hourly	\$ 20.00	\$ 41,600.00	\$ 1,248.00	\$ 700.00	\$ 43,548.00	\$ 43,548.00	\$ 43,548.00	\$ 43,548.00	\$ 130,644.00
Day Services Direct Care Specialist	Full Time	Direct	Hourly	\$ 15.00	\$ 31,200.00	\$ 936.00	\$ 700.00	\$ 32,836.00	\$ 32,836.00	\$ 32,836.00	\$ 32,836.00	\$ 98,508.00
Day Services Laundry Attendant	Full Time	Laundry	Hourly	\$ 15.00	\$ 31,200.00	\$ 936.00	\$ 700.00	\$ 32,836.00	\$ 32,836.00	\$ 32,836.00	\$ 32,836.00	\$ 98,508.00
Day Services Meal Coordinator	Full Time	Food	Hourly	\$ 18.00	\$ 37,440.00	\$ 1,123.20	\$ 700.00	\$ 39,263.20	\$ 39,263.20	\$ 39,263.20	\$ 39,263.20	\$ 117,789.60
Day Services Food Service Specialist	Part Time	Food	Hourly	\$ 16.00	\$ 33,280.00	\$ -	\$ -	\$ 33,280.00	\$ 33,280.00	\$ 33,280.00	\$ 33,280.00	\$ 99,840.00
Day Services Intake Specialist (CCYS)	Full Time	Intake	Hourly	\$ 19.00	\$ 39,520.00	\$ 1,185.60	\$ 700.00	\$ 41,405.60	\$ 41,405.60	\$ 41,405.60	\$ 41,405.60	\$ 124,216.80
									\$ 271,001.60	\$ 271,001.60	\$ 271,001.60	\$ 813,004.80

Attachment O

CESC, Inc.

Day Services at CESC, Inc. Project Application

D.15. Match Documentation

Attachment O
Client Eligibility

September 16, 2022

Dear Big Bend Continuum of Care,

The purpose of this letter is to provide a detail breakout of the match funding for the CESC Inc. Day Services Project. This project will be used to provide various supplemental comprehensive services to unsheltered individuals and those experiencing homelessness.

The 2022 HUD NOFO require a 25% Match. 25% of \$1,100,000 is \$275,000.

The required match of \$275,500 will be taken from General Funds.

Should you have any questions, please do not hesitate to reach out.

Sincerely,



Rick Kearney
CESC, Inc. Board Chair