

Before Starting the CoC Application

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

The Collaborative Applicant is responsible for reviewing the following:

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

1A. Continuum of Care (CoC) Identification

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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1A-1. CoC Name and Number: NY-604 - Yonkers, Mount Vernon/Westchester County CoC

1A-2. Collaborative Applicant Name: Westchester County Dept. of Community Mental Health

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Westchester County Department of Social Services

1B. Continuum of Care (CoC) Engagement

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1B-1. CoC Meeting Participants.

For the period of May 1, 2018 to April 30, 2019, applicants must indicate whether the Organization/Person listed:

1. participated in CoC meetings;
2. voted, including selecting CoC Board members; and
3. participated in the CoC's coordinated entry system.

Organization/Person	Participates in CoC Meetings	Votes, including selecting CoC Board Members	Participates in Coordinated Entry System
Local Government Staff/Officials	Yes	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
Law Enforcement	No	No	No
Local Jail(s)	No	No	No
Hospital(s)	No	No	No
EMS/Crisis Response Team(s)	No	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Disability Service Organizations	Yes	Yes	Yes
Disability Advocates	Yes	No	No
Public Housing Authorities	Yes	Yes	No
CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	No	No

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

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

Applicants must describe how the CoC:

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

1. An Annual Meeting & Meeting on Priorities are held annually to solicit public opinion on community needs from organizations and/or persons that have an interest in preventing & ending homelessness. This year, we heard from service providers and community advocates on housing for physically disabled adults, unstably-housed youth, people on the sex offender registry, & the need for a day program. They also asked for more consumer involvement in CoC activities & for the CoC to examine the high rates of recidivism for ESG recipients. This past June, we also held a Symposium that included events for consumers, direct service staff, supervisory staff, Board members and the general public. We included a follow up survey to obtain feedback from attendees of the symposium to help plan future events. Part of our process to re-design the Homeless Assessment Tool was to survey all HAT users to provide feedback and input into the new tool. This process, taking nearly a year, included gathering input from consumers, the Board, shelter, outreach and housing staff

to ensure the effectiveness and collective buy in of the tool.

2. Events are publicized via broad distribution lists & our website. We also encourage the public to submit questions, feedback, and comments through our website.

3. Issues are brought back to the Board for further discussion & evaluation of strategies to address unmet needs through current/future funding opportunities, and through our relationships with agencies such as DSS. Discussion is encouraged at Board meetings, from the many points of view represented.

4. Our webmaster created our website with ADA requirements in mind, & we are re-reviewing what other revisions we can make to improve accessibility. All of our video materials are available in closed caption & meetings are held in accessible buildings.

1B-2. Open Invitation for New Members.

Applicants must describe:

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

1. CoC General Membership is open; individuals interested contact one of the Co-Chairs. They are then directed to our website where they can review CoC materials such as the Guiding Principles & subcommittee information. If agreeable, they are added to relevant distribution lists.

2. Membership information is distributed at our public forums, via emails publicizing the events & on our website. We also print Co-Chair contact info on materials with an invitation to participate. At every public event, upcoming subcommittee meeting participation is encouraged. Board members actively recruit individuals. With an increase in the number of requests for CoC data & support letters, we use those opportunities to illustrate the importance & benefit of being involved in the CoC's activities.

3. Website & materials are created with ADA requirements in mind using guidance from the platform developers. We are also awaiting guidance from WC DoIT regarding ways to improve accessibility. Our video materials are available in closed caption & meetings are held in accessible buildings.

4. The CoC solicits new members at all events & regularly at Board meetings. Information is also posted on our website.

5. We have seen an increase in consistent presence at our open forums & we continue to try various methods to have persons experiencing

homelessness/formerly homeless persons participate. At a panel discussion held during our 2018 Symposium week, it was asked that instead of being identified, could they join other subcommittees so they could be part of the operations of the CoC on every level. This led to our having a team of formerly homeless individuals for our PIT Count & having a formerly homeless individual on our PIT Count Planning Committee. Last year, we spoke with Homeless Are People Too (HAPT), a local subsidiary of Community Voices Heard to create ways for collaboration. Though we continue to wait for approval from CVH, efforts such as these will continue.

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

Applicants must describe:

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

1. The CoC widely emails & posts to our website a notice that agencies can apply to operate new projects by submitting a form outlining their project scope and qualifications based on priorities set by the Board using our needs assessments, the HUD NOFA, results of our public annual meetings, & member experience.

The application form makes it clear that new agencies are encouraged to apply, and it includes an ADDITIONAL point for any proposals submitted by an organization that had not previously received CoC program funding. Over the years, these efforts have led to new CoC partners serving chronic homeless, LGBTQ youth, & DV survivors.

2. All non-applying Board members vote to choose the project applications using pre-approved scoring sheets.

3. This year, we released one Request for Information (RFI) for PSH projects for families. The RFI was released on 7/23/19 and included an ADDITIONAL point for any proposals submitted by an organization that had not previously received CoC program funding. It was also made clear that technical assistance related to HMIS, applying for projects & understanding CoC operations was available at no cost to the agency. This year, one RFI (out of 5) was submitted by an agency new to the CoC.

4. Website & materials are created with ADA requirements in mind using guidance from the platform developers. We are also awaiting guidance from WC DoIT regarding ways to improve accessibility. Our video materials are available in closed caption & meetings are held in accessible buildings.

5. Not applicable.

1C. Continuum of Care (CoC) Coordination

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

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

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

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

Applicants must describe how the CoC:

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

1. Our CoC Board formally adopted and distributed to all local ESG recipients a set of 2019 ESG Funding Priorities (see Other Attachment #1). In 2017 and 2018, the Westchester CoC distributed a similar set of ESG funding recommendations which were followed by Yonkers ESG and resulted in additional ESG funding for street outreach and Rapid Re-housing. One of our CoC Board Co-Chairs led the development of the current plan used by Yonkers ESG to make funding decisions.

2. The Westchester CoC and City of Yonkers have developed performance standards for ESG projects. Westchester CoC has conducted monitoring visits to ESG projects annually since 2015; both Yonkers ESG and NYS ESG projects are again being monitored in 2019. CoC staff meet monthly with Yonkers ESG recipients to plan ESG program performance and compliance improvements.

3. Our CoC provides local ESG recipients (Yonkers, NYS, Westchester County) and all 4 local municipal Con Plan jurisdictions (Yonkers, New Rochelle, Mount Vernon, & White Plains) with essential information & statistical data to address the needs of the homeless in their Con Plans, including PIT count, Housing Inventory Chart and CoC funding data; HMIS database access & data sharing; details on CoC activities and local services; and assistance identifying unmet needs to create their local Con Plan sections on homelessness & housing. CoC staff helped Mount Vernon to write the Affordable Housing and Homeless sections of their CDBG Annual Action Plan and CAPER. City of Yonkers also uses CoC staff assistance to submit the CAPER.

Representatives of all four local Con Plan jurisdictions sit on the Board of the Westchester CoC and collaborate to develop local priorities for homeless services.

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

Yes to both

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

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

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

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

Applicants must describe:

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

1) On 12/20/17 our CoC adopted a VAWA compliant Emergency Transfer Plan following HUD-5381 allowing DV survivors to request priority housing transfer if they feel unsafe in their current placement.

Our Coordinated Entry protocols allow DV survivors to be assessed using a Danger Assessment tool developed at Johns Hopkins that is trauma-informed & victim-centered in place of the VI-SPDAT.

Our CoC works closely with Westchester's DV Council to ensure housing services provided for DV survivors are safety-focused, trauma-informed and victim-centered. The DV Council is led by our County Office for Women. Our DV Council is a Coordinated Community Response to DV; it includes survivors, the DA, Probation, civil and criminal legal services providers, judges, and DV advocacy groups. Our CoC has a designated liaison to the Council and an experienced DV provider is a voting member of our CoC board.

The Office for Women coordinates the Family Justice Center at the White Plains courthouse, a 24-agency consortium that provides one-stop integrated services to survivors of DV, sexual assault, elder abuse, stalking and dating violence. Services include safety planning, advocacy, legal assistance, court accompaniment, help getting orders of protection, emergency shelter and other housing needs. Referrals are made for other services.

2) Through the coordinated network of CoC and DV Council members, survivors of DV are referred to the CoC's Coordinated Entry system for housing placement and prioritized based on their safety and other needs. To preserve confidentiality DV clients are enrolled in Coordinated Entry only when they are ready for housing referral. They are then connected with a housing provider who helps them find an apartment and needed subsidies and other supports. Clients choose their housing type and location and are counseled with respect to the safety implications of different housing options. DSS has two DV liaisons who help assess and refer DV survivors.

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

Applicants must describe how the CoC coordinates with victim services providers to provide training, at least on an annual basis, for:

- 1. CoC area project staff that addresses safety and best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence; and**
 - 2. Coordinated Entry staff that addresses safety and best practices (e.g., Trauma Informed Care) on safety and planning protocols in serving survivors of domestic violence.**
- (limit 2,000 characters)**

My Sisters' Place (MSP) is Westchester's largest DV services, shelter and training provider. My Sisters' Place conducted CoC-wide training sessions on DV and human-trafficking last October & December respectively. In the training, CoC project staff, Coordinated Entry staff, and shelter providers learned the dynamics of intimate partner/domestic violence, gained skills for assessing survivor needs in trauma-informed, client-centered ways, and acquired basic safety planning approaches.

Last June our CoC conducted a five-day Symposium of training sessions that included resilience, peer support services, crisis intervention, & trauma-informed care to ensure services are delivered with a person-centered philosophy in mind.

All CoC members are invited to the monthly DV Council meetings and to trainings offered by the DV Council and the Family Justice Center including:

- * serving survivors of domestic violence strangulation;
- * identifying and responding to stalking;
- * victim safety and offender accountability: intimate partner violence intervention.

Other collaborative training efforts include an annual police conference cohosted by the Police Chiefs' Association and the Office for Women, conferences on multiple topics including teen dating abuse, campus sexual assault and neurobiology of trauma led and/or organized by individual partners and trainings at Westchester Police Academy by the District Attorney, Family Justice Center and others.

The Office for Women and My Sisters' Place are our two largest DV training providers. They will routinely send all their training notices to our CoC co-chairs who will distribute them to our entire CoC email list. A senior administrator from Hope's Door, our other major DV shelter and services provider, is a voting member of our CoC board and will announce training opportunities during our meetings.

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

Applicants must describe how the CoC uses de-identified aggregate data from a comparable database to assess the special needs related to domestic violence, dating violence, sexual assault, and stalking.

(limit 2,000 characters)

The Westchester Office for Women helps coordinate our communities' response to DV, dating violence, sexual assault and stalking. The Office for Women compiles statistics on the number of Domestic Incident Reports (DIRs) reported by 44 police departments in Westchester including county and state police. This is the most comprehensive measure of reported DV in Westchester. In 2018 WC had 10,614 Domestic Incident Reports. In 2018 Westchester's three Family Courts handled 2,593 Family Offense petitions.

Westchester has 2 DV shelter providers. In 2018 My Sisters' Place (MSP) received 1,255 requests for shelter. Hope's Door received 420 requests for shelter. Many people called both shelters.

In 2018 MSP's hotline answered 3,430 calls. MSP's Legal Center assisted 529 individuals with brief legal services, advice and representation related to orders of protection, child support, custody and immigration. MSP's counseling programs provided individual and group support for 1,042 adult survivors and specialized children's services for 144 children.

National data suggests the problem is even larger due to under reporting. The CDC's 2015 National Intimate Partner and Sexual Violence Survey reported the following national estimates:

* 1 in 5 women experienced completed or attempted rape; 1 in 6 women were stalked; and 1 in 4 experienced contact sexual violence, physical violence, and/or stalking by an intimate partner;

* Many males also experience these forms of violence. For example, during their lifetime, 1 in 14 men were made to sexually penetrate someone else; 1 in 17 men were stalked; and 1 in 10 experienced contact sexual violence, physical violence, and/or stalking by an intimate partner.

We use these DV statistics to develop a Coordinated Community Response to DV and recommend the best ways to increase CoC capacity to serve this population including our new DV Bonus Joint TH-RRH project and refocusing existing local housing resources.

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

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2018 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On
Westchester County (CVR)	23.73%	No	No
Municipal Housing Authority - City of Yonkers	11.11%	No	No

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

Applicants must:

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1. provide the steps the CoC has taken, with the two largest PHAs within the CoC's geographic area or the two PHAs the CoC has working relationships with, to adopt a homeless admission preference—if the CoC only has one PHA within its geographic area, applicants may respond for one; or

2. state that the CoC does not work with the PHAs in its geographic area. (limit 2,000 characters)

CoC co-chairs have negotiated with Yonkers and New Rochelle HA's to add a homeless admission preference. A formal request to adopt a Move On Strategy has been submitted by Westchester County DCMH (the CoC Collaborative Applicant) to the Municipal Housing Authority for the City of Yonkers, which is now pending MHACY Board approval. MHACY also recently solicited and accepted referrals of persons experiencing homelessness from CoC staff to fill vacancies during their RAD conversion.

We have also approached the White Plains Housing Authority as they have had regular contact with the CoC.

DSS, during attendance at regular Section 8 administrator meetings, has requested the adoption of a homeless preference by all local HA's. During these contacts, we encourage discussion regarding homeless preference; many are reluctant to do so because they see it as prioritizing homeless over other needy individuals & households who may have been waiting longer for assistance. There are also barriers to changing longstanding PHA policies.

The CoC Board, using Planning Grant funds to expand staffing to devote to this issue, will strategically introduce the concept of the CoC and educate PHA's. We will continue to work on developing inroads to forums where PHA's meet, using our connections with our county's Housing Choice Voucher vendor (CVR) and individual service providers to make those introductions. This will continue to be a priority task for the CoC Co-Chairs, with assistance as appropriate from CVR & DSS this coming year. We have also discussed ways to publicly recognize those that do prioritize homeless at our Annual Meeting.

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

Applicants must indicate whether the CoC has a Moving On Strategy with affordable housing providers in its jurisdiction.

No

1C-5. Protecting Against Discrimination.

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

In February 2019, WRO provided for the CoC membership a fair housing

training entitled Equal Access to Housing in HUD Programs For LGBTQ Members of Our Community. This training was mandatory for all CoC member agencies. In March & April 2019, we encouraged member agencies to participate in conferences around the county on relevant topics including "Fair and Affordable Housing in Westchester" sponsored by the Human Rights Commission & "The Fair and Affordable Housing Expo" sponsored by Westchester Residential Opportunities and the Housing Action Council. Information was then brought back and discussed at Board meetings.

In April 2019, CoC member agency WRO released its report on three years (2015-2018) of "testing" investigations of housing discrimination in Westchester and the rest of the Lower Hudson Valley. WRO conducted approximately 500 tests across many protected classes, and saw an overall 33% rate of violative or unequal results. This report was discussed at the Board level, with WRO consulted for more details and follow-up, including possible points of intervention.

Our Guiding Principles has included an antidiscrimination statement since their adoption in January 2013, as does our CES policy/procedures adopted 09/20/17. These policies are reviewed in training settings, implemented via technical assistance to provider agencies and consumers, and monitoring is completed through site visit review of terminations to ensure discriminatory practices are not being employed.

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

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

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

***1C-6. Criminalization of Homelessness.**

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

1. Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
2. Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
3. Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
4. Implemented communitywide plans:	<input type="checkbox"/>

5. No strategies have been implemented:	<input type="checkbox"/>
6. Other:(limit 50 characters)	
Trained outreach workers "ride-along" with police	<input checked="" type="checkbox"/>
Police take homeless to shelter instead of arrests	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

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

Applicants must:

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

1. Our Coordinated Entry System (CES) uses multiple sites where customers are enrolled including:
DSS' 4 district offices located throughout Westchester; Overnight emergency shelters in multiple cities allow clients to enroll into Coordinated Entry AFTER business hours; Countywide street outreach allows unsheltered homeless to be enrolled in CES.

Together these access points cover the entire CoC geographic area.

2. Multiple access points allow us to reach varied populations. DSS district offices refer single adults, families, victims of DV, & youth to 24-hour shelter. Overnight shelters house homeless unable to comply with DSS requirements. Street outreach teams enroll street homeless persons in CES without shelter entry.

All access points are wheelchair accessible. All written CES materials are available in both English and Spanish.

The Westchester 211 number for County services advises homeless callers on how to access Coordinated Entry.

3. We use the Homeless Assessment Tool (HAT), a modified version of the VISPDAT as our standardized assessment. The HAT is used at ALL Coordinated Entry access points to ensure that persons with the greatest needs receive priority for homeless services.

Our CoC requires that EVERY person in emergency shelters or engaged on the street is rapidly enrolled in CES and assessed with the HAT.

CES identifies the housing needed, client eligibility for specific programs, and refers homeless to available units in priority order so that those with highest needs and length of time homeless are housed first.

We sort all those in need of PSH in the HUD-mandated priority order according to CPD notice 16-11, with additional ranking based on HAT score and length of

time homeless.

Our Coordinated Referral Committee meets weekly to case conference households for PSH and RRH using by-name lists.

The group coordinates action among street outreach, shelter staff, & housing providers to move clients into housing as rapidly as possible.

1D. Continuum of Care (CoC) Discharge Planning

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1D-1. Discharge Planning Coordination.

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

Foster Care:	<input checked="checked" type="checkbox"/>
Health Care:	<input checked="checked" type="checkbox"/>
Mental Health Care:	<input checked="checked" type="checkbox"/>
Correctional Facilities:	<input checked="checked" type="checkbox"/>
None:	<input type="checkbox"/>

1E. Local CoC Competition

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

Applicants must indicate whether the CoC:

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

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

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

1. Used objective criteria to review and rank projects for funding (e.g., cost effectiveness of the project, performance data, type of population served);	Yes
2. Included one factor related to improving system performance (e.g., exits to permanent housing (PH) destinations, retention of PH, length of time homeless, returns to homelessness, job/income growth, etc.); and	Yes
3. Included a specific method for evaluating projects submitted by victim services providers that utilized data generated from a comparable database and evaluated these projects on the degree they improve safety for the population served.	No

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

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Applicants must describe:

1. the specific severity of needs and vulnerabilities the CoC considered when reviewing and ranking projects; and

2. how the CoC takes severity of needs and vulnerabilities into account when reviewing and ranking projects.

(limit 2,000 characters)

Projects serving populations that have severe needs, are hard to serve, or are especially vulnerable were given extra points in the ranking criteria used by the Westchester County CoC (specifically, 5 points out of the maximum 85 possible in our scoring system).

This includes projects with target populations including participants in the following populations:

- Youth
- Victims of domestic violence
- Families with children
- Persons experiencing chronic homelessness
- Veterans
- Current or past substance use
- Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status
- Significant health or behavioral health challenges or functional impairments

See attachment 1E-1 Public Posting–Local Competition Announcement.

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

Applicants must:

1. indicate how the CoC made public the review and ranking process the CoC used for all project applications; or

2. check 6 if the CoC did not make public the review and ranking process; and

3. indicate how the CoC made public the CoC Consolidated Application—including the CoC Application and CoC Priority Listing that includes all project applications accepted and ranked or rejected—which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the FY 2019 CoC Program Competition application submission deadline; or

4. check 6 if the CoC did not make public the CoC Consolidated Application.

Public Posting of Objective Review and Ranking Process		Public Posting of CoC Consolidated Application including: CoC Application, CoC Priority Listing, Project Listings	
1. Email	<input checked="" type="checkbox"/>	1. Email	<input checked="" type="checkbox"/>
2. Mail	<input type="checkbox"/>	2. Mail	<input type="checkbox"/>
3. Advertising in Local Newspaper(s)	<input type="checkbox"/>	3. Advertising in Local Newspaper(s)	<input type="checkbox"/>

4. Advertising on Radio or Television	<input type="checkbox"/>	4. Advertising on Radio or Television	<input type="checkbox"/>
5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>	5. Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>
6. Did Not Publicly Post Review and Ranking Process	<input type="checkbox"/>	6. Did Not Publicly Post CoC Consolidated Application	<input type="checkbox"/>

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

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

Reallocation: 6%

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

Applicants must:

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

1. For FY2019, the Westchester County CoC used the Reallocation process to reallocate funding from low performing projects to create new high performing projects.

All 23 CoC projects appearing on the HUD Grant Inventory Worksheet and eligible for renewal were ranked based on objective Performance Measure criteria. Low ranking projects were considered for reallocation.

2. The Ranking and Review Process which describes the objective Performance Measures and outlines the reallocation process followed by the CoC was approved by the CoC Board on 07/31/19.

3. The Ranking and Reallocation process was posted to the CoC website on 08/14/19.

4-5. On 08/02/19 the CoC Board met to review the ranking results and decided to reallocate the LOW PERFORMING project Westhab RA SRO (\$45,158 ARA) with rank #22 out of 23 based on the objective Performance Measures.

The affected Recipient agency was notified in writing of the reallocation on 08/02/19.

The CoC Board reallocated this low performing project ranked #22 rather than the low performing Stepping Stones project ranked #23 because Stepping Stones targets Youth ages 18-24, which is considered a priority population by HUD and our CoC.

The CoC Board reallocated funds from this LOW performing project to create an expansion for the First Steps PSH project because First Steps is the HIGHEST ranked renewal housing project and serves the priority Youth target population.

Westchester County CoC therefore reallocated funds from a LOWER ranked housing project (#22 out of 23) into an expansion of the HIGHEST ranked housing project.

This same process was followed in prior years.

For FY2018, the lowest ranked project (#25 of 25) was reallocated into an expansion of the highest ranked renewal project.

For FY2017, the 3 lowest ranked projects (#26 to #28 of 28) were reallocated into a new PSH project.

For FY2016 the 4 lowest ranked projects (#29 to #32 of 32) were reallocated into a new Rapid Rehousing project.

DV Bonus

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

Please submit technical questions to the HUD Exchange Ask-A-Question at <https://www.hudexchange.info/program-support/my-question/>

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

1F-1 DV Bonus Projects.

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

Applicant Name	DUNS Number
This list contains no items	

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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2A-1. HMIS Vendor Identification. Eccovia Solutions

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

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

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

Project Type	Total Number of Beds in 2019 HIC	Total Beds Dedicated for DV in 2019 HIC	Total Number of 2019 HIC Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	1,016	39	977	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	677	0	677	100.00%
Rapid Re-Housing (RRH) beds	440	0	440	100.00%
Permanent Supportive Housing (PSH) beds	1,514	0	1,171	77.34%
Other Permanent Housing (OPH) beds	2,942	0	2,897	98.47%

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

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

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

PSH coverage in HMIS is below 85% entirely due to the local VA's not including their HUD-VASH beds in HMIS. Every single one of the 343 PSH beds not in HMIS are HUD-VASH.

We have been negotiating for several years with the VA to increase bed coverage, and the Hudson Valley VA consented in 2018 to correct this deficiency and enter their HUD-VASH beds into our HMIS. However, by the date of our 2019 HIC, only 9 HUD-VASH beds had been entered into HMIS by VA staff.

We have continued to work with the VA in 2019 and there are currently 35 HUD-VASH beds in our HMIS.

The VA agrees that by the end of 2019, at least 130 HUD-VASH beds will be in HMIS (allowing us to reach 85% PSH coverage in HMIS), with the rest to follow during 2020.

We therefore expect our next HIC will show over 85% Permanent Supportive Housing in HMIS.

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

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

***2A-4. HIC HDX Submission Date.**

**Applicants must enter the date the CoC submitted the 2019 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX).
(mm/dd/yyyy)** 04/24/2019

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

Instructions:

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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2B-1. PIT Count Date. 01/24/2019

Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).

2B-2. PIT Count Data–HDX Submission Date. 04/24/2019

Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).

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

Applicants must describe:

1. any changes in the sheltered count implementation, including methodology or data quality methodology changes from 2018 to 2019, if applicable; and

2. how the changes affected the CoC's sheltered PIT count results; or

3. state "Not Applicable" if there were no changes.

(limit 2,000 characters)

We made the following change to sheltered PIT count implementation Data Quality for 2019:

Data was gathered by Emergency Shelter and Transitional Housing staff using a Westchester CoC-provided WEB-BASED electronic PIT Count survey to interview residents rather than the paper (or excel file) surveys used in prior years.

Data was entered by shelter staff into a central database. This allowed the data

collected to be more easily and extensively cross-checked with the PIT count report generated by our HMIS to reduce errors and discrepancies.

Corrections to the PIT count data were made when the two data sources did not match to ensure maximum accuracy in the sheltered PIT count results.

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

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

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

Applicants must describe:

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

For 2019 we added the following to improve unsheltered PIT count Data Quality:

a) Data was gathered by PIT Count Enumerators using a Westchester CoC-provided ESRI Survey 123 smartphone app with GIS capability rather than the paper surveys used in prior years.

The app-based survey questions were dynamic so that the questions asked of each person encountered were only those relevant to that respondent.

Data and GIS position entered by Enumerators into the survey app was uploaded automatically into a central database. This allowed us to view the data in real time and clarify discrepancies immediately, improving accuracy.

GIS positioning recorded allowed us to delete double-counts. In the months following, we have used the GIS position records to build a list of locations for street outreach to visit routinely and to continue to engage with people encountered during the PIT Count with the goal of connecting them to housing.

b) Training for the volunteer Enumerators sent out to count unsheltered persons was held on the evening of the PIT Count. In prior years trainings were held days or weeks before the Count. This switch ensured that every volunteer was properly trained and that the training was fresh in their minds as they conducted the count.

c) We took advantage of recent changes in HUD guidance to send teams of Enumerators out to count unsheltered persons during the day time in the days after the official night of the PIT Count.

This allowed us to have teams encounter unsheltered persons in areas that law enforcement deemed too dangerous for Enumerator teams to check at night.

We used comparison of personally identifying information such as name and date of birth and survey screening questions to prevent double counting on both the night of the PIT Count and later day-time encounters.

These changes together improved our ability to encounter & engage unsheltered persons and made our unsheltered PIT count results more accurate and complete.

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

Applicants must:

Indicate whether the CoC implemented specific measures to identify youth experiencing homelessness in their 2019 PIT count. Yes

2B-6a. PIT Count–Involving Youth in Implementation.

Applicants must describe how the CoC engaged stakeholders serving youth experiencing homelessness to:

- 1. plan the 2019 PIT count;**
 - 2. select locations where youth experiencing homelessness are most likely to be identified; and**
 - 3. involve youth in counting during the 2019 PIT count.**
- (limit 2,000 characters)**

(1) Staff from the Children's Village, and Westhab who specialize in homeless youth/children participated in planning the PIT count and served as enumerators on the night of the PIT count.

Westchester Building Futures (WBF) is a Federal Department of Health and Human Services-funded collaborative of local government and non-profit agencies with the aim of reducing youth falling into homelessness as they leave the child welfare system. The Westchester CoC PIT Count involved WBF in our planning for the PIT Count, including soliciting information on where to look for homeless youth and how to best engage any youth encountered on the streets.

(2) We conducted a survey asking where to look for homeless on the night of the PIT count. Responses from organizations such as Children's Village, BraveHearts, Westhab, HOPE Community Services, and Westchester DCMH who routinely serve youth were used to identify where to look for homeless youth during the PIT count.

(3) The BraveHearts - a peer support group for youth who have experienced foster care, homelessness, and other trauma - were invited to participate in planning the PIT count and provided location information for where to look for homeless youth on the night of the PIT count.

We targeted youth during volunteer PIT Count Enumerator recruitment. Members of a student service group made up the bulk of one of our PIT Count survey teams.

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

Applicants must describe the CoC’s actions implemented in its 2019 PIT count to better count:

- 1. individuals and families experiencing chronic homelessness;**
- 2. families with children experiencing homelessness; and**
- 3. Veterans experiencing homelessness.**

(limit 2,000 characters)

We utilized the web-based ESRI Survey 123 app on smartphones in the field and therefore were able to view the data in real time as it was collected. This allowed us the opportunity to clarify any discrepancies in the data immediately so we could count with greater accuracy.

The survey included dynamic questions related to the status of each person to determine whether they were experiencing chronic homelessness, were an individual or part of a family/household and/or whether they served in a branch of the U.S. Armed Forces.

In addition, we conducted a day time count in the days following the official night of the PIT Count so that Enumerator teams could visit locations deemed by law enforcement personnel to be too dangerous to visit at night. This ensured we captured information on as many persons experiencing chronic homelessness and families experiencing homelessness as possible.

We also continued to have team leadership in the field who specialize in child and family homelessness, as well as those experienced in engaging with veterans experiencing homelessness, to ensure our count is inclusive of these populations.

3A. Continuum of Care (CoC) System Performance

Instructions

Guidance for completing the application can be found in the FY 2019 CoC Program Competition Notice of Funding Availability and in the FY 2019 CoC Application Detailed Instructions.

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

*3A-1. First Time Homeless as Reported in HDX.

Applicants must:

Report the Number of First Time Homeless as Reported in HDX.	2,943
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3A-1a. First Time Homeless Risk Factors.

Applicants must:

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

1) Everyone potentially facing homelessness is first screened by DSS. It has 7 specially-trained Homeless Diversion workers stationed across our 4 district offices. They assess clients' financial resources, rent payment history, and availability of family and community supports. They do an initial screening and triage, address emergent needs, provide assistance finding alternatives to shelter placement, and refer more complex cases to the two CBOs described below for more in-depth assessment and intensive budget counseling.

2) DSS Diversion workers provide one-time emergency payments when appropriate to avert evictions. DSS has contracted for \$884,594 (including

\$300,000 for pass-through rents arrear payments) with 2 experienced CBOs to station staff in all 4 DSS district offices to provide immediate assessment, budget counseling and locally-funded rent arrears for people who need more intensive help resolving their rent payment issues. The WC Planning Department contracts for \$479,613 with Legal Services of the Hudson Valley to provide housing and eviction-related legal counseling and representation. Last month NYS awarded a \$272,284/year for 5 years to LSHV to provide eviction prevention services in Westchester. DSS is now piloting a new universal access program to provide legal services to people under 200% of AMI facing eviction in a Yonkers housing court. Other budget counseling, legal services, rent arrears and intermediate-term rent subsidies are available through an integrated decentralized network of experienced providers funded by ESG, NYS, EFSP, and private sources. Representatives of 3 leading eviction prevention providers meet monthly with DSS and CoC leadership as part of our Homeless System Transformation Team and convene coordinating meetings of all local homelessness prevention service providers as needed.

3) The Westchester County Department of Social Services (DSS) is responsible for overseeing our strategy to reduce first-time homelessness.

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

Applicants must:

Report Average Length of Time Individuals and Persons in Families Remained Homeless as Reported in HDX.	223
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3A-2a. Strategy to Reduce Length of Time Homeless.

Applicants must:

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

Our mean average LOTH was 223 days in FY2018. Our median LOTH was only 97 days, because a small group with very long stays disproportionately skewed the mean. We reduced our median LOTH in 2018 by 4.9%.

1) Our strategy to reduce LOS is to: a) increase use of Rapid Rehousing (RRH), b) intensify & focus case planning, c) systematically remove interagency barriers that delay rehousing, and d) speed home-finding.

a) We increased our supply of RRH subsidies from 341 in 2017 to 498 in 2018 – a 46% increase!

b) DSS has 12 Homeless Caseworkers who identify clients with long LOTH using HMIS, review their rehousing plans with shelter staff, identify housing barriers, ensure that clients & staff stay focused on overcoming these barriers & identify housing to fit each client's needs. DCMH contracts with Andrus to

provide intensive mental health case management and 3-month post-housing placement follow-up to homeless families with serious mental health issues to ensure they are effectively stabilized and linked to community supports.

c) Multiple CoC workgroups systematically remove barriers (e.g. slow communication or action) to speed rehousing. Our Patriot Housing team meets weekly to review rehousing status of every homeless veteran & Coordinated Entry Referral Conferences meet biweekly to review status of all unsheltered & all highest-need ES clients.

d) A CoC Landlord Relations Committee works to expand our supply of available units. DSS is planning a Landlord Risk Mitigation Program (LRMP) that will offer problem solving staff & financial incentives to encourage landlords to rent to people with longest LOTH.

2) We identify people with longest LOTH using HMIS. Our Coordinated Entry system prioritizes clients homeless over 1 year. Clients are then prioritized by severity of need and then within each need level based on days homeless. LRMP will incentivize landlords renting to our longest stayers.

3) DSS oversees our LOTH reduction efforts.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations as reported in HDX.	25%
2. Report the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	99%

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

Applicants must:

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

(limit 2,000 characters)

1) We are using multiple strategies to increase our permanent housing placement rate.

* Our Coordinated Entry identifies and rapidly fills current vacancies.

* We dramatically increased our supply of RRH subsidies from 341 in 2017 to 498 in 2018 – a 46% increase.

* DSS is planning a Landlord Risk Mitigation Program that will speed homefinding by offering landlords incentives, e.g. dedicated problem resolution staff and financial incentives.

* We are working to increase our supply of permanent supportive housing (PSH) using new non-CoC state resources. On 9/11/2018 NYS announced 7 provisional Empire State Supportive Housing Initiative awards in Westchester. These grants give renewable 5-year funding to cover operating and supportive service costs for newly created PSH, thus making new capital projects feasible. These grants also bring awardees priority for capital funding available from NYS.

* We are accessing NYS Medicaid Redesign Team funding to create innovative housing programs. In July 2018 FSSY, a CoC member, was awarded a \$2.5 million 5-year Health Home Supportive Housing contract to provide 15 scattered-site PSH units for homeless high-Medicaid utilizing disabled adults.

2) DSS oversees our efforts to increase our ES/TH/RRH exit rate to permanent housing.

3) Our PSH retention rate is excellent: 99%, up from 98% in 2017. All of our PSH programs offer in-home case management support. DSS' Homeless Casework unit links clients to housing & services needed for housing stability. Our CoC convenes a Housing Retention Committee that helps housing providers share strategies to how to stabilize and manage challenging clients. DCMH contracts with Andrus to provide intensive mental health case management and 3-month post-housing placement follow-up to homeless families with serious mental health issues to ensure they are effectively stabilized and linked to community supports.

4) The CoC Board oversees our efforts at PSH housing retention.

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

	Percentage
1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX.	6%
2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX.	11%

3A-4a. Returns to Homelessness—CoC Strategy to Reduce Rate.**Applicants must:**

1. describe the strategy the CoC has implemented to identify individuals

and persons in families who return to homelessness;

2. describe the CoC's strategy to reduce the rate of additional returns to homelessness; and

3. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,000 characters)

1) When a previously housed person or family becomes homeless again, one of several multi-agency teams analyzes what went wrong with that specific individual's housing placement. Patriot Housing expedites planning and referrals for veterans. We have one Coordinated Entry Referral Conference (CERC) expediting planning and referrals for PSH, a 2nd for RRH referrals, a 3rd for street homeless, and a 4th for DV survivors. Every agency that knows the client contributes their perspective and helps shape the new housing and service plan. Multiple outreach workers and service providers are mobilized as needed to re-engage the client.

2) DSS' Homeless unit reviews cases of all homeless clients, beginning with those with long lengths of stay and multiple returns to homelessness. They are prioritized for case conferencing and systemic advocacy to ensure that needed services are built into their rehousing plans. The CoC's Housing Success Workgroup uses case conferences to support providers managing the most difficult clients to prevent returns to homelessness.

We look not for general characteristics but try to understand the specific individual factors that led to renewed homelessness. Sometimes they are relatively straightforward issues like money management, substance use, or mental health deterioration. We address these by making sure clients are linked to the specific services they need. Often they involve people's hearts and minds, less tangible things like loneliness, fear, or feeling overwhelmed. Our housing plans have included personalized interventions like enabling clients to stay involved with their shelter community as a volunteer rather than as a resident, linking newly housed people to 12-step and other support groups, and helping people find things they love doing in their new home, e.g. watching movies, cooking, knitting and painting.

3) The CoC Board oversees our work to prevent returns to homelessness.

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

Applicants must:

	Percentage
1. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their employment income from entry to exit as reported in HDX.	12%
2. Report the percentage of individuals and persons in families in CoC Program-funded Safe Haven, transitional housing, rapid rehousing, and permanent supportive housing projects that increased their non-employment cash income from entry to exit as reported in HDX.	26%

3A-5a. Increasing Employment Income.

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Applicants must:

- 1. describe the CoC's strategy to increase employment income;**
- 2. describe the CoC's strategy to increase access to employment;**
- 3. describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**
- 4. provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase jobs and income from employment.**

(limit 2,000 characters)

1) In 2019 DSS revamped its employment approach, making the Urban League of Westchester responsible for job services for ALL employable DSS clients. Its strategy is to provide underemployed individuals is to help them develop improved job skills so they can move up a career ladder. Our RRH projects have dedicated employment counselors.

2) The Urban League's strategy for unemployed recipients is to provide clients with the pre-vocational work readiness skills, work experience, and specific job skills training they need to effectively compete for jobs. The employment resources offered include job developers, job counselors, work readiness training, and job fairs. The Urban League also coordinates services for ALL non-employable DSS clients. It monitors treatment attendance to enhance employability and links clients to SSI/SSDI assistance. DSS caseworkers ensure that all CoC clients are linked to the Urban League. DSS also contracts with global firm Maximus to provide SSI/SSDI advocacy & SOAR to CoC clients. Legal Services of the Hudson Valley does NYS-funded disability advocacy & SSI/SSD appeals.

3) The Urban League and DSS Office of Work Activities (OWA) links all Westchester's employable homeless to the rich array of educational and vocational programs available here. These include the NYS Education Department-funded Board of Cooperative Educational Services (BOCES), the State University of New York's Westchester Educational Opportunity Center, the Yonkers' Public Schools' Vive School Pathways to Success program, and the Westchester County and Yonkers USDOL-funded Workforce Investment Boards' One-Stop Employment Centers. Individuals with disabilities can also receive services for NYS' Adult Career and Continuing Education Services-Vocational Rehabilitation (ACCES-VR). Homeless veterans can also access VA and SSVF employment services.

4) DSS OWA oversees our work to increase client employment income.

3A-5b. Increasing Non-employment Cash Income.**Applicants must:**

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

1) Our CoC's strategy to increase non-employment cash income is to

coordinate a multi-agency effort to ensure that homeless people are linked to all available mainstream entitlements.

2)

* DSS caseworkers routinely assess all new applicants for cash assistance to ensure that they are receiving all entitlements for which they are eligible. These include public assistance, SNAP food stamps, and the Earned Income Tax Credit.

* All PSH and RRH case managers develop an Independent Living Plan which includes linking them to mainstream benefits.

* The Urban League also coordinates services for ALL non-employable DSS clients. It monitors treatment attendance to enhance employability and links clients to SSI/SSDI assistance. DSS caseworkers ensure that all CoC clients are linked to the Urban League.

* DSS also contracts with global firm Maximus to provide SSI/SSDI advocacy & SOAR to CoC clients.

* The Westchester County Department of Community Mental Health provides certified SOAR training and technical assistance for any CoC partner willing to provide SOAR services.

* Legal Services of the Hudson Valley does NYS-funded disability advocacy & SSI/SSD appeals.

* Several CoC member organizations have recently submitted requests for state funding to provide SOAR.

3) DSS oversees our work to increase client non-employment cash income.

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

Applicants must describe how the CoC:

1. promoted partnerships and access to employment opportunities with private employers and private employment organizations, such as holding job fairs, outreach to employers, and partnering with staffing agencies; and

2. is working with public and private organizations to provide meaningful, education and training, on-the-job training, internship, and employment opportunities for residents of permanent supportive housing that further their recovery and well-being.

(limit 2,000 characters)

1) DSS and DCMH are sponsoring a job fair on 10/3/19 in which over two dozen local non-profits will recruit clients for over 500 job openings, including maintenance workers, therapists, childcare professionals, nurses, counselors, social workers, case managers, peers, advocates, receptionists, & drivers. The fair will include housing providers & agencies responsible for training NYS-certified peer specialists. CoC partners have also participated in other job fairs organized by CoC-member Westhab for homeless public assistance recipients and by SSVF and the VA for veterans.

Our CoC Self-Sufficiency Committee brings staff from our shelters & housing programs together with employment specialists from DSS-, VA-, USDoL-, and NYS-funded employment programs to share ideas, learn about community resources, and share job openings.

Local CoC grantee Greyston has developed an Open Hiring Model that removes barriers to employment & targets the homeless and ex-offenders.

2) The NYS Office of Mental Health & Office of Alcoholism and Substance Abuse Services recently created new NYS-certified Peer Specialist positions for people with lived experience with mental illness & substance use. These certified peer positions require completion of a standardized curriculum + supervised fieldwork. NYS has also made services by these peers Medicaid-reimbursable. This created a surge in demand. CoC members HDSW & MHAW are certified peer training agencies.

Our CoC board discussed the importance of providing paid or volunteer work opportunities for participants at our 9/18/19 board meeting. We will be distributing and discussing Exhibit 29-3i - Guide for Review of CoC Recipient Overall Grant Management of the CPD Monitoring Handbook at our next board meeting, with special focus on Questions 58 & 59, which describe HUD expectations re consumer participation in policymaking and in operations/service delivery. We will encourage CoC members to maximize use of certified peers.

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

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

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

3A-6. System Performance Measures 05/08/2019 Data-HDX Submission Date

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

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

Instructions

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<https://www.hudexchange.info/programs/e-snaps/fy-2019-coc-program-nofa-coc-program-competition/#nofa-and-notices>

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

3B-1. Prioritizing Households with Children.

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

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

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

Applicants must:

1. describe how the CoC currently rehouses every household of families with children within 30 days of becoming homeless that addresses both housing and service needs;

2. describe how the CoC addresses both housing and service needs to ensure families with children successfully maintain their housing once

assistance ends; and

3. provide the organization name or position title responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of them becoming homeless.

(limit 2,000 characters)

Families that are eligible for a homeless placement are assigned a worker who conducts a thorough assessment within 10 days of their shelter placement. Families are assessed for service needs as well as to identify what local subsidies they might qualify for, in order to get them re-housed quickly. An Independent Living Plan (ILP) and goals are developed to aid the family in becoming self-sufficient. ILP's are reviewed by trained DSS case managers and DCMH CASAC's to monitor progress & ensure all needed services are provided.

When a family enters the shelter, they are also entered into the Coordinated Entry System and a Family Homeless Assessment Tool (HAT) is completed to determine if they are good candidates for Rapid Re-housing (RRH). If so, they are immediately referred to Rapid Rehousing (RRH) projects. A RRH Referral Committee meets monthly for case conferencing between RRH providers and CoC support staff to discuss every open RRH referral. What makes this process effective is that Westchester DSS works collaboratively with shelter staff and community organizations to remove barriers to get families with children rapidly rehoused.

Shelters also have housing specialists on staff who provide housing leads, applications, lists of real estate brokers, assistance with contacting landlords, transportation for housing search and other resources for families to utilize to meet their goal of permanent housing. Shelter staff also provide workshops on budgeting and how to maintain housing as well as aftercare services when a customer finds permanent housing. If they are accepted into a RRH project they work with a caseworker and employment specialist to increase their income in order to be self-sufficient and able to pay their rent without the RRH program assistance within the 2 year project period.

Westchester County DSS is primarily responsible for overseeing the CoC's strategy to rapidly rehouse families with children within 30 days of becoming homeless.

3B-1b. Antidiscrimination Policies.

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

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

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

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

1. Unsheltered homelessness	Yes
2. Human trafficking and other forms of exploitation	Yes
3. LGBT youth homelessness	Yes
4. Exits from foster care into homelessness	Yes
5. Family reunification and community engagement	Yes
6. Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	No

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

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

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

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

Applicants must describe how the CoC increased availability of housing and services for:

1. all youth experiencing homelessness, including creating new youth-focused projects or modifying current projects to be more youth-specific

or youth-inclusive; and

2. youth experiencing unsheltered homelessness including creating new youth-focused projects or modifying current projects to be more youth-specific or youth-inclusive.

(limit 3,000 characters)

1) In 2016 WC DSS won a \$2 million 3-year DHHS grant to pilot system reform to prevent foster care youth aging into homelessness, 1 of only 6 nationwide. Called Westchester Building Futures (WBF), it builds on a \$720,000 2-year DHHS planning grant we won in 2013. WBF seeks to eliminate youth homelessness among at-risk youth/young adults with child welfare/foster care histories. WBF identified sustainable innovative strategies for more effectively integrating Westchester's child welfare, homeless services, education, employment, mental health and community support systems to focus necessary resources on youth at highest risk of becoming homeless. We found 3 risk factors most closely associated with chronic homelessness: # of entries into care, facility transfers & AWOL episodes. We are exploring ways to build these risk factors into our Coordinated Entry assessment process for homeless youth. We have created specialized housing for parenting youth and LGBTQ youth.

We will use peer navigators & social media to draw LGBTQ, parenting & other high-risk youth into safe housing before they wind up on NYC streets. We have CoC-funded housing for parenting youth and LGBTQ youth. Last year we reallocated funds to eliminate our lowest-performing youth housing program (TSH) and transferred them to expand our highest performing renewal (PSH for youth) to maximize effectiveness. We give youth priority for some of our CoC RRH funds. We are exploring greater use of NYS & federal Chafee funds for housing support including expansion of our NYS-funded Supervised Independent Living Program for older foster care youth.

We initially focus on engaging high-risk youth. Our new CE process will help us track success. Although still in its early phases, DHHS has concluded that our comprehensive strategy is one of the most promising emerging national models.

2) Our research found most homeless youth avoid shelters, couch-surf erratically and/or do not identify as homeless therefore they do not fit HUD's definition of "literally homeless". When they live on the streets, they often do so in nearby NYC, at an increased risk of exploitation & trafficking. Our 2019 PIT Count found NO unsheltered homeless children under age 18 who were living on the streets or places not intended for human habitation in Westchester. We found only 1 unsheltered young adult aged 18-24. The majority of youth who do meet the definition of literal homelessness are engaged in our emergency and transitional housing. Our PIT count found 3 unaccompanied children under age 18 and 93 unaccompanied/parenting young adults aged 18-24 in our emergency shelters and transitional housing. As stated above, WBF is using peer navigators and social media to engage couch-surfing and unsheltered youth and link them to housing.

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

Applicants must:

1. provide evidence the CoC uses to measure each of the strategies in

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question 3B-1d. to increase the availability of housing and services for youth experiencing homelessness;

2. describe the measure(s) the CoC uses to calculate the effectiveness of both strategies in question 3B-1d.; and

3. describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of both strategies in question 3B-1d. (limit 3,000 characters)

1) We will use our FY2018 CoC Planning Grant to evaluate both strategies, i.e. a) strategies to more effectively provide housing and services to ALL homeless children (under age 18) and young adults (aged 18-24) and b) strategies to provide them specifically to UNSHELTERED homeless youth.

The main evidence we'll use to evaluate the impact of our strategies to more effectively provide housing and services to ALL youth includes:

- a) the # of youth served by our WBF Peer Navigators,
- b) the # of transitional beds specifically targeted to youth,
- c) the # and % of youth exiting to permanent housing, and
- d) the average length of homelessness for youth.

The primary evidence we will use to evaluate the impact of our strategies to serve UNSHELTERED youth will include:

- a) the # of youth served by our WBF Peer Navigators,
- b) the # of youth couch-surfing or unsheltered at intake who transition to emergency or transitional housing, and
- c) the # of youth couch-surfing or unsheltered at intake who transition to permanent housing.

2) DSS has contracted with Children's Village to coordinate the WBF Peer Navigator program. Our CoC will ask Children's Village to report the # of youth served divided into 2 age groups (under age 18 and aged 18-24) and 3 housing categories at intake (sheltered in emergency or transitional housing, couch-surfing/doubled up, or unsheltered, i.e. living on the streets or in places not intended for human habitation).

Our CoC will use our Housing Inventory Chart to measure changes in the # of transitional beds targeted to youth. Our CoC will use HMIS to measure the # and % of youth exiting to permanent housing. We will also use HMIS to calculate the average length of homeless for youth.

3) Our proposed evaluation measures speak directly to the most essential aspects of our work with youth:

- * Engagement: using specially trained Peer Navigators to identify, engage and link youth is the core engagement strategy being piloted by WBF,
- * Increasing the # of transitional beds targeted to youth: measures our success in creating more programs designed to help this group transition successfully to adult self-sufficiency,
- * Increasing the # of couch-surfing or unsheltered youth who transition to emergency or transitional housing: measures our success in engaging these traditionally hard-to-reach groups and helps keep them from getting pulled into the NYC street life scene where they are at risk for exploitation and trafficking,
- * Increasing the # and % of exits to permanent housing: is the ultimate measure of our success in reducing homelessness for this group,
- * Reducing the length of homelessness: mirrors HUD's goal of reducing

average time spent homeless.

3B-1e. Collaboration–Education Services.

Applicants must describe:

- 1. the formal partnerships with:**
 - a. youth education providers;**
 - b. McKinney-Vento LEA or SEA; and**
 - c. school districts; and**
- 2. how the CoC collaborates with:**
 - a. youth education providers;**
 - b. McKinney-Vento Local LEA or SEA; and**
 - c. school districts.**

(limit 2,000 characters)

1. The CoC has a formal partnership with WestCOP for Head Start/Early Head Start referrals (See Other Attachment #2). The homeless student liaison for Southern Westchester BOCES McKinney-Vento LEA is an active CoC Board member who meets regularly with over 65 school district liaisons throughout Westchester.

2. The homeless student liaison for Southern Westchester BOCES McKinney-Vento LEA is an active CoC Board member who consistently brings issues effecting homeless families and students to the CoC's attention and works on CoC proposals to bring potential solutions to DSS. All school districts have designated staff to address the needs of homeless children & all family shelters have educational liaisons. The educational liaisons identify and assess children in homeless families & inform family members of available educational services. DSS also contracts with the Urban League to provide educational advocacy services. Urban League maintains a Homeless Students Program Database and data is brought back to the Board as needed. Over the past 18 months, the CoC Co-Chairs collaborated with the Westchester Children's Association (WCA) advocacy group to define the scope of youth homelessness in Westchester, particularly doubled up youth meeting the U.S. Dept. of Education homeless definition. The purpose was to promote awareness of the issue and develop possible interventions. The WCA report was released in July 2019 with significant input from the CoC, and one of the Co-Chairs will continue to sit on the WCA's task force related to this issue. The CoC mandates that all shelter and housing provider agencies attend annual McKinney-Vento training which usually occurs in October and is sponsored by NYSTEACHS and SW BOCES.

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

Applicants must describe policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.

(limit 2,000 characters)

All CoC Coordinated Entry access point staff explain various educational

services available to families with children upon intake. All school districts have designated staff to address the needs of homeless children & all family shelters have educational liaisons. Once placed in a shelter, adults meet with Eligibility, Homeless and Employment workers to complete an ILP & an Employment Assessment. If the customer is determined to be employable and able to participate in Voc/Ed activities then an employment plan is developed which might include a referral to an educational program designed to give them the skills needed to gain employment & become self-sufficient.

Children in families are assessed for needs by the Educational Liaison at their shelter placement & informed of available services. Educational liaisons are required to arrange transportation to the family's home district & communicate with the school regarding any special needs of the children. They also attend community & school meetings & assist with addressing barriers to education. They follow up on all school incident reports, take school bus attendance and act as liaison between parents & the bus company. DSS also contracts with the Urban League to provide educational advocacy services. Urban League maintains a Homeless Students Program Database.

The Urban League works very closely with the McKinney-Vento committee & with shelter liaisons with regard to the registering and transporting of homeless children to their community of origin. The Urban League also attends school meetings to assist children with disabilities who may require special programming. Advocacy organization Student Assistance Services (SAS) advocates on behalf of individual children with school districts and Committees on Special Education to ensure they receive appropriate support services. Information on these and any other educational services are communicated to individuals and families through their shelter staff.

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

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

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

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

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

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

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

3B-2b. Housing First for Veterans.

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

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

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

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

3B-3a. Addressing Racial Disparities.

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

Assessment:

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

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

Instructions:

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4A-1. Healthcare—Enrollment/Effective Utilization

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

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	No	Yes
Non-Profit, Philanthropic:	No	Yes
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits.

Applicants must:

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

health insurance;

4. describe how the CoC provides assistance with the effective utilization of Medicaid and other benefits; and

5. provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits.

(limit 2,000 characters)

1. The CoC keeps program staff up to date on mainstream resources available during monthly Board meetings to ensure important updates are distributed to the full membership. The information is then distributed further via email distribution lists & other CoC subcommittee meetings & events.

2. The CoC, via our DSS Board member, disseminates the availability of mainstream resources to projects via email & during monthly Board meetings. The information is then distributed further as described above. As needed, training is offered by the CoC either during our annual Symposium or at other times during the year.

3. The CoC collaborates with WC DoH & DSS to enroll persons into health insurance. Our health representative Board Member from the WC DoH oversees insurance navigator programs.

4. DSS provides eligible persons with Food Stamps, Medicaid & TANF. Shelter/outreach staff work to link clients to mainstream community resources for which they are eligible, including SSI. DSS contracts with Maximus to provide SSI/SSDI advocacy & SOAR. The CoC has an agreement with DSS to provide these SOAR services to our clients. CoC member agency Legal Services of the Hudson Valley also provides advocacy & SSI/SSD appeals assistance. CoC agency MHA of Westchester contracts with DSS to perform assessments including insurance status on DSS sheltered individuals. That agency provides Health Home Care Management services (HHCM); 3 other CoC agencies that also operate HHCM programs conduct homeless outreach to street- & sheltered- homeless. These agencies can immediately register individuals for HHCM services if they qualify. A pilot program was also launched in 2019 at our largest emergency shelter where HHCMs, Homeless Outreach, DSS eligibility specialists & DCMH staff work together to enroll those who qualify in all mainstream benefits on-site.

5. The CoC Co-Chairs with Board guidance, are responsible for overseeing the CoC's strategy for mainstream benefits.

4A-2. Lowering Barriers to Entry Data:

Applicants must report:

1. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition.	22
2. Total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	18
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects the CoC has ranked in its CoC Priority Listing in the FY 2019 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	82%

4A-3. Street Outreach.**Applicants must:**

- 1. describe the CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;**
- 2. state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;**
- 3. describe how often the CoC conducts street outreach; and**
- 4. describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)**

1. We have eight outreach teams that target different populations of homeless including:

Two countywide mobile mental health outreach teams through Westchester County DCMH,

Three city-based DCMH-Police Department Community Intervention teams that operate as outreach in White Plains, Mount Vernon, and Yonkers,

NYS ESG funded countywide street outreach,

City-funded outreach in New Rochelle, and

VA outreach targeting veterans experiencing street homelessness.

In addition, based on recommendations made by our CoC Board, the City of Yonkers ESG has funded a new street outreach team operated by the Yonkers YMCA which will begin operation shortly.

Outreach workers work to link ALL homeless encountered to housing and services. All persons engaged are entered into HMIS for identification, tracking, and referral. DCMH teams are trained to serve unsheltered persons with mental health disorders and co-occurring substance abuse. Specialized outreach engages Spanish-speakers, LGBT, youth, and Veterans.

2. The street outreach teams collectively cover 100% of the CoC geographic area.

3. Street outreach teams engage homeless persons 5 days/week.

4. Outreach workers work to link ALL homeless encountered to housing and services.

All persons who are contacted experiencing street homelessness are enrolled into Coordinated Entry and assessed using the same standardized assessment tool as those clients living in emergency shelters.

Individuals who decline assistance or are otherwise hard to engage are brought to the CoC Street Homeless case conference workgroup which enacts housing plans for all cases reviewed using a by-name list. The group is attended by street outreach, shelter staff, and housing providers. The group coordinates action among all attendees to assist these hard to engage clients.

Follow-up action to urgent need takes place continually between meetings.

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

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

	2018	2019	Difference
RRH beds available to serve all populations in the HIC	498	440	-58

4A-5. Rehabilitation/Construction Costs–New Projects. No

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

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

Applicants must indicate whether the CoC is requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other federal statutes.

4A-6a. Serving Persons Experiencing Homelessness under Other Federal Statutes. Attachment Required.

If the response was yes to question 4A-6, applicants must:

1. describe how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3;
 2. describe how the CoC will meet requirements described in Section 427(b)(1)(F) of the Act; and
 3. identify the specific project(s) that will use the funding for this purpose (up to 10 percent of the CoC total awarded) by submitting an attachment to the CoC application in e-snaps that must include all the following:
 - a. project name(s) as listed on the CoC Project Priority Listing; and
 - b. amount of funding in the project or per project that will be used for this purpose.
- (limit 2,000 characters)

- 1) While our HMIS shows 959 children aged 5-18 in shelters or on the streets in 2016, school data reported to the U.S. Education Department shows 2,785

(nearly 3 times as many) homeless schoolchildren here in the 2015-16 school year. The difference is the large # of families living precariously doubled-up with friends or family due to high housing costs. Current CoC efforts to reduce homelessness do not effectively serve this group.

Homeless youth in Westchester typically don't enter shelter or live on the streets. Our DHHS-funded research found most homeless youth here avoid shelters, couch-surf erratically & don't meet HUD's homeless definition. When they do end up on the streets, they often do so in neighboring NYC at high risk for exploitation & trafficking.

If allowed to serve this new population, we will use peer navigators & social media to draw LGBTQ & other high-risk youth into safe transitional housing to prevent street and shelter stays and help them become independent.

2) Stepping Stones and The Refuge, the two CoC Transitional Housing projects for youth that we are requesting be allowed to enroll youth defined as homeless under other federal statutes have been only 66% full over the last 12 months. This is because most of the youth in contact with CoC outreach staff are not living in shelter or the streets, and so are not eligible for these projects. Only youth that lose (or will imminently lose) their doubled-up housing and are forced to enter shelter or the streets can be placed in TH.

Thus, allowing us to serve this new population will actually reduce youth in the shelters and the streets because we will be able to move needy young adults directly from doubled-up housing into TH without any time spent in shelter/streets in between. We will be more efficiently utilizing both shelter and TH capacity.

3) Projects: See attachment.

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
FY 2019 CoC Competition Report (HDX Report)	Yes	NY-604 CoC Compet...	09/06/2019
1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners' Preference.	No		
1C-4. PHA Administrative Plan Homeless Preference.	No		
1C-7. Centralized or Coordinated Assessment System.	Yes	NY-604 Coordinate...	09/06/2019
1E-1.Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.	Yes	NY-604 1E-1 Proje...	09/12/2019
1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.	Yes	NY-604 1E-1. Publ...	09/13/2019
1E-1.Public Posting–30-Day Local Competition Deadline.	Yes	NY-604 1E-1.Publi...	09/20/2019
1E-1. Public Posting–Local Competition Announcement.	Yes	NY-604 1E-1 Local...	09/12/2019
1E-4.Public Posting–CoC-Approved Consolidated Application	Yes	NY-604 1E-4 Publi...	09/24/2019
3A. Written Agreement with Local Education or Training Organization.	No	NY-604 Written Ag...	09/23/2019
3A. Written Agreement with State or Local Workforce Development Board.	No	NY-604 Written Ag...	09/23/2019
3B-3. Summary of Racial Disparity Assessment.	Yes	Summary of Racial...	09/10/2019
4A-7a. Project List-Homeless under Other Federal Statutes.	No	NY-604 FY2019 Pro...	09/20/2019
Other	No	Westchester CoC 2...	09/19/2019
Other	No	Early childhood s...	09/24/2019

Applicant: Yonkers/Mount Vernon/New Rochelle/Westchester County CoC

NY-604

Project: NY-604 CoC Registration FY2019

COC_REG_2019_170834

Other	No		
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Attachment Details

Document Description: NY-604 CoC Competition Report (HDX Report)

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: NY-604 Coordinated Entry Standardized
Assessment Tool

Attachment Details

Document Description: NY-604 1E-1 Projects Accepted Notification
Outside e-snaps

Attachment Details

Document Description: NY-604 1E-1. Public Posting–15-Day Notification
Outside e-snaps–Projects Rejected or Reduced.

Attachment Details

Document Description: NY-604 1E-1.Public Posting–30-Day Local
Competition Deadline

Attachment Details

Document Description: NY-604 1E-1 Local Competition Public
Announcement

Attachment Details

Document Description: NY-604 1E-4 Public Posting–CoC-Approved
Consolidated Application

Attachment Details

Document Description: NY-604 Written Agreements with Local
Education or Training Organizations

Attachment Details

Document Description: NY-604 Written Agreements with State or Local Workforce Development Boards

Attachment Details

Document Description: Summary of Racial Disparity Assessment.

Attachment Details

Document Description: NY-604 FY2019 Project List-Homeless under Other Federal Statutes

Attachment Details

Document Description: Westchester CoC 2019 ESG priorities

Attachment Details

Document Description: Early childhood services linkages combined

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/13/2019
1B. Engagement	09/23/2019
1C. Coordination	09/23/2019
1D. Discharge Planning	No Input Required
1E. Local CoC Competition	09/18/2019
1F. DV Bonus	No Input Required
2A. HMIS Implementation	09/13/2019
2B. PIT Count	09/17/2019
3A. System Performance	09/23/2019
3B. Performance and Strategic Planning	09/24/2019
4A. Mainstream Benefits and Additional Policies	09/24/2019
4B. Attachments	09/24/2019

Submission Summary

No Input Required

2019 HDX Competition Report

PIT Count Data for NY-604 - Yonkers, Mount Vernon/Westchester County CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	1750	1832	1827	1812
Emergency Shelter Total	916	1,018	1,081	1100
Safe Haven Total	0	0	0	0
Transitional Housing Total	800	767	702	680
Total Sheltered Count	1716	1785	1783	1780
Total Unsheltered Count	34	47	44	32

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	131	149	164	130
Sheltered Count of Chronically Homeless Persons	117	131	150	123
Unsheltered Count of Chronically Homeless Persons	14	18	14	7

2019 HDX Competition Report

PIT Count Data for NY-604 - Yonkers, Mount Vernon/Westchester County CoC

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	362	383	396	389
Sheltered Count of Homeless Households with Children	362	383	396	389
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011	2016	2017	2018	2019
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	161	128	121	45	42
Sheltered Count of Homeless Veterans	152	126	116	42	41
Unsheltered Count of Homeless Veterans	9	2	5	3	1

2019 HDX Competition Report

HIC Data for NY-604 - Yonkers, Mount Vernon/Westchester County CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2019 HIC	Total Beds in 2019 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	1016	39	977	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	677	0	677	100.00%
Rapid Re-Housing (RRH) Beds	440	0	440	100.00%
Permanent Supportive Housing (PSH) Beds	1514	0	1171	77.34%
Other Permanent Housing (OPH) Beds	2942	0	2897	98.47%
Total Beds	6,589	39	6162	94.08%

2019 HDX Competition Report

HIC Data for NY-604 - Yonkers, Mount Vernon/Westchester County CoC

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC	2019 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	154	154	154	0

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

Households with Children	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH units available to serve families on the HIC	102	87	143	129

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC	2019 HIC
RRH beds available to serve all populations on the HIC	280	341	498	440

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Summary Report for NY-604 - Yonkers, Mount Vernon/Westchester County CoC

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

RESUBMITTING FY2018 DATA: If you provided revised FY2018 data, the original FY2018 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

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

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

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES and SH	3907	3892	3935	109	109	117	8	49	49	54	5
1.2 Persons in ES, SH, and TH	4710	4692	4636	212	222	223	1	102	102	97	-5

b. This measure is based on data element 3.17.

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

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

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY 2017	Revised FY 2017	FY 2018	Submitted FY 2017	Revised FY 2017	FY 2018	Difference	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	3996	4002	4075	153	184	220	36	77	87	122	35
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	4795	4801	4766	256	317	347	30	149	169	207	38

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY 2017	FY 2018	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	Revised FY 2017	FY 2018	% of Returns	FY 2018	% of Returns
Exit was from SO	78	103	5	10	10%	2	8	8%	10	10	10%	28	27%
Exit was from ES	563	656	18	49	7%	35	24	4%	59	53	8%	126	19%
Exit was from TH	501	444	36	21	5%	13	30	7%	34	20	5%	71	16%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	475	321	36	16	5%	31	3	1%	30	11	3%	30	9%
TOTAL Returns to Homelessness	1617	1524	95	96	6%	81	65	4%	133	94	6%	255	17%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

	January 2017 PIT Count	January 2018 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1832	1827	-5
Emergency Shelter Total	1018	1081	63
Safe Haven Total	0	0	0
Transitional Housing Total	767	702	-65
Total Sheltered Count	1785	1783	-2
Unsheltered Count	47	44	-3

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Unduplicated Total sheltered homeless persons	4745	4744	4713	-31
Emergency Shelter Total	4034	4032	4097	65
Safe Haven Total	0	0	0	0
Transitional Housing Total	1323	1326	1059	-267

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	966	909	1010	101
Number of adults with increased earned income	63	61	78	17
Percentage of adults who increased earned income	7%	7%	8%	1%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	966	909	1010	101
Number of adults with increased non-employment cash income	277	271	228	-43
Percentage of adults who increased non-employment cash income	29%	30%	23%	-7%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults (system stayers)	966	909	1010	101
Number of adults with increased total income	324	315	290	-25
Percentage of adults who increased total income	34%	35%	29%	-6%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	390	389	310	-79
Number of adults who exited with increased earned income	69	69	36	-33
Percentage of adults who increased earned income	18%	18%	12%	-6%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	390	389	310	-79
Number of adults who exited with increased non-employment cash income	83	81	82	1
Percentage of adults who increased non-employment cash income	21%	21%	26%	5%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Number of adults who exited (system leavers)	390	389	310	-79
Number of adults who exited with increased total income	134	132	107	-25
Percentage of adults who increased total income	34%	34%	35%	1%

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	3677	3689	3604	-85
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1433	1462	1297	-165
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	2244	2227	2307	80

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	4082	4481	4612	131
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1646	1767	1669	-98
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	2436	2714	2943	229

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

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

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

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

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons who exit Street Outreach	26	55	87	32
Of persons above, those who exited to temporary & some institutional destinations	17	16	16	0
Of the persons above, those who exited to permanent housing destinations	7	26	38	12
% Successful exits	92%	76%	62%	-14%

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

2019 HDX Competition Report

FY2018 - Performance Measurement Module (Sys PM)

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	3000	2836	2794	-42
Of the persons above, those who exited to permanent housing destinations	917	805	711	-94
% Successful exits	31%	28%	25%	-3%

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

	Submitted FY 2017	Revised FY 2017	FY 2018	Difference
Universe: Persons in all PH projects except PH-RRH	1477	2972	3644	672
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1432	2924	3595	671
% Successful exits/retention	97%	98%	99%	1%

2019 HDX Competition Report

FY2018 - SysPM Data Quality

NY-604 - Yonkers, Mount Vernon/Westchester County CoC

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

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

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

2019 HDX Competition Report

FY2018 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018	2014-2015	2015-2016	2016-2017	2017-2018
1. Number of non-DV Beds on HIC	927	879	962	966	1233	966	801	691	1639	1900	1771	1815	311	280	341	498				
2. Number of HMIS Beds	846	872	962	966	1228	966	801	691	1012	1316	1188	1212	311	280	341	438				
3. HMIS Participation Rate from HIC (%)	91.26	99.20	100.00	100.00	99.59	100.00	100.00	100.00	61.74	69.26	67.08	66.78	100.00	100.00	100.00	87.95				
4. Unduplicated Persons Served (HMIS)	3300	4002	4032	4097	1538	1379	1326	1059	1237	1357	2967	3666	792	661	776	798	277	206	53	82
5. Total Leavers (HMIS)	2283	3085	3045	3065	763	634	675	359	150	149	154	138	533	325	398	384	102	135	37	45
6. Destination of Don't Know, Refused, or Missing (HMIS)	1620	1962	1951	1893	229	33	38	31	6	4	5	5	149	6	11	1	13	51	0	3
7. Destination Error Rate (%)	70.96	63.60	64.07	61.76	30.01	5.21	5.63	8.64	4.00	2.68	3.25	3.62	27.95	1.85	2.76	0.26	12.75	37.78	0.00	6.67

2019 HDX Competition Report

Submission and Count Dates for NY-604 - Yonkers, Mount Vernon/Westchester County CoC

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2019 PIT Count	1/24/2019	

Report Submission Date in HDX

	Submitted On	Met Deadline
2019 PIT Count Submittal Date	4/24/2019	Yes
2019 HIC Count Submittal Date	4/24/2019	Yes
2018 System PM Submittal Date	5/8/2019	Yes

Homeless Assessment Tool (HAT)

Administration

Interviewer Name: _____

Agency: ☐ Team ☐ Staff ☐ Volunteer

Date/Time: * _____

Interview Location: _____

Basic Information

Name: _____

Has Consented to Participate? ☐ Yes ☐ No

Nickname: _____

In what language do you feel best able to express yourself?

- ☐ African Languages
☐ Caribbean Languages
☐ English
☐ Khmer
☐ Native Central American, South American, and Mexican Languages
☐ Native North American / Alaska Native Languages
☐ Pacific Island Languages
☐ Spanish
☐ French
☐ German
☐ Italian
☐ Polish
☐ Portugese
☐ Russian
☐ Arabic
☐ Armenian
☐ Farsii
☐ Hebrew
☐ Turkish
☐ Cantonese
☐ Mandarin
☐ Mien
☐ Other Chinese Language
☐ Cambodian
☐ Hmong
☐ Lao
☐ Thai
☐ Vietnamese
☐ Tagalog
☐ Ilacano
☐ Japanese
☐ Korean
☐ Samoan
☐ American Sign Language
☐ Other Sign Language
☐ Other - Non-English

 SSN: _____ -
 _____ -

☐ Data Not Collected

Age at Assessment:

Birthdate:

IF THE PERSON IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE:

A. History of Housing & Homelessness

1. Where do you sleep most frequently? (check one):

☐ Shelter ☐ Transitional Housing ☐ Safe Haven ☐ Outdoors
☐ Own Home ☐ Couch Surfing ☐ Other (specify) ☐ Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

SCORE:

2. How long has it been since you lived in permanent stable housing? # of Years: _____

of Months: _____ ☐ Refused

3. In the last three years, how many times have you been homeless? _____ ☐ Refused

IF THE PERSON HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

SCORE:

B. Risks

4. In the past six months, how many times have you...:

a) Received health care at an emergency department/room?

_____ ☐ Refused

b) Taken an ambulance to the hospital?

_____ ☐ Refused

c) Been hospitalized as an inpatient?

_____ ☐ Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?

_____ ☐ Refused

e) Talked to police because you witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told you that you must move along?

_____ ☐ Refused

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between?

_____ ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

5. Have you been attacked or beaten up since becoming homeless? ☐ Yes ☐ No ☐ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

SCORE:

7. Do you have any legal stuff going on right now that may result in you being locked up, having to pay fines, or that make it more difficult to rent a place to live?

☐ Yes ☐ No ☐ Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

8. Does anybody force or trick you to do things that you do not want to do?

☐ Yes ☐ No ☐ Refused

9. Do you ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone you don't know, share a needle, or anything like that?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

C. Socialization & Daily Functioning

10. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you owe them money?

☐ Yes ☐ No ☐ Refused

11a. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?

☐ Yes ☐ No ☐ Refused

11b. How do you make money?

IF "YES" TO QUESTION 10 OR "NO" TO QUESTION 11, THEN SCORE 1 FOR MONEY MANAGEMENT.

SCORE:

12. Do you have planned activities, other than just surviving, that make you feel happy and fulfilled?

☐ Yes ☐ No ☐ Refused

IF "NO," THEN SCORE 1 FOR MEANINGFUL DAILY ACTIVITY.

SCORE:

13. Are you currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that?

☐ Yes ☐ No ☐ Refused

IF "NO," THEN SCORE 1 FOR SELF-CARE.

SCORE:

14. Is your current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive

☐ Yes ☐ No ☐ Refused

relationship, or because family or friends caused you to become evicted?

IF "YES," THEN SCORE 1 FOR SOCIAL RELATIONSHIPS.

SCORE:

D. Wellness

15a. Where do you usually go for healthcare when you're not feeling well?

☐ Hospital ☐ VA ☐ Other ☐ Does not go for care

Specific Location:

- ☐ Montefiore Mount Vernon Hospital
- ☐ Montefiore New Rochelle Hospital
- ☐ Mount Vernon Neighborhood Health Center
- ☐ New York Presbyterian - Hudson Valley Hospital
- ☐ New York Presbyterian - Lawrence Hospital
- ☐ New York Presbyterian - Westchester Division (White Plains)
- ☐ Northern Westchester Hospital
- ☐ Phelps Memorial Hospital Center
- ☐ St John's Riverside Hospital - Andrus
- ☐ St John's Riverside Hospital - Dobbs Ferry
- ☐ St John's Riverside Hospital - Park Care
- ☐ St Vincent's Hospital Westchester - division of St Joseph's MC
- ☐ St. Joseph's Medical Center
- ☐ VA Clinic - White Plains
- ☐ VA Clinic - Yonkers
- ☐ VA Hospital - Knightsbridge Campus (Bronx)
- ☐ VA Hospital - Montrose Campus
- ☐ Westchester Medical Center
- ☐ White Plains Hospital

If OTHER - Please specify:

15b. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?

☐ Yes ☐ No ☐ Refused

16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs or heart?

☐ Yes ☐ No ☐ Refused

17. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you?

☐ Yes ☐ No ☐ Client refused

18. Do you have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help?

☐ Yes ☐ No ☐ Refused

19. When you are sick or not feeling well, do you avoid getting help?

☐ Yes ☐ No ☐ Refused

20.FOR FEMALE RESPONDENTS ONLY:
Are you currently pregnant?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR PHYSICAL HEALTH.

SCORE:

21.Has your drinking or drug use led you

☐ Yes ☐ No ☐ Refused

to being kicked out of an apartment or program where you were staying in the past?

22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR SUBSTANCE USE.

SCORE:

23. Have you ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern?

☐ Yes ☐ No ☐ Refused

b) A past head injury?

☐ Yes ☐ No ☐ Refused

c) A learning disability, developmental disability, or other impairment?

☐ Yes ☐ No ☐ Refused

24. Do you have any mental health or brain issues that would make it hard for you to live independently because you'd need help?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR MENTAL HEALTH.

SCORE:

IF THE RESPONDENT SCORED 1 FOR PHYSICAL HEALTH AND 1 FOR SUBSTANCE USE AND 1 FOR MENTAL HEALTH, SCORE 1 FOR TRI-MORBIDITY.

SCORE:

25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?

☐ Yes ☐ No ☐ Refused

26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?

☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR MEDICATIONS.

SCORE:

27. **YES OR NO:** Has your current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you have experienced?

☐ Yes ☐ No ☐ Refused

IF "YES", SCORE 1 FOR ABUSE AND TRAUMA.

SCORE:

Prescreen
Total:

0

PRE-SURVEY:

0

A. HISTORY:

0

B. RISK:

0

C. SOCIALIZATION & DAILY

0

FUNCTIONS:

D. WELLNESS:

0

PRE-SCREEN TOTAL:

0

SCORING SECTION

SECTION

SCORE

Results

PRE-SURVEY

Score**Recommendation**

A. HISTORY OF HOUSING & HOMELESSNESS

0-3

No housing intervention

B. RISK

4-7

An assessment for Rapid Re-Housing

C. SOCIALIZATION & DAILY FUNCTIONS

8+

An assessment for Permanent Supportive Housing/Housing First

D. WELLNESS

Grand Total

Follow-Up Questions

Is there a person/outreach worker that you trust more than others?

- ☐ Yes
☐ No
☐ Client Doesn't Know
☐ Client Refused
☐ Data not Collected

If YES - Please specify the person and/or agency name:

On a regular day, where is it easiest to find you and what time of day is easiest to do so?

When?

- ☐ Mornings ☐ Afternoon ☐ Evening ☐ Night

Is there a phone number and/or email where someone can get in touch with you or leave a message?

Phone:

Email:

Photo Permission:

- ☐ Yes ☐ No ☐ Refused

Restriction:

- * ☐ Restrict to Organization
☐ Share to Continuum of Care

Homeless Assessment Tool (HAT)

Interviewer Name: _____

Agency: _____

☐ Team ☐ Staff ☐ Volunteer

Date/Time: _____

*

Interview Location: _____

Parent 1

Name: _____

Has Consented to Participate? ☐ Yes ☐ No

In what language do you feel best able to express yourself?

- ☐ African Languages
☐ Caribbean Languages
☐ English
☐ Khmer
☐ Native Central American, South American, and Mexican Languages
☐ Native North American / Alaska Native Languages
☐ Pacific Island Languages
☐ Spanish
☐ French
☐ German
☐ Italian
☐ Polish
☐ Portugese
☐ Russian
☐ Arabic
☐ Armenian
☐ Farsii
☐ Hebrew
☐ Turkish
☐ Cantonese
☐ Mandarin
☐ Mien
☐ Other Chinese Language
☐ Cambodian
☐ Hmong
☐ Lao
☐ Thai
☐ Vietnamese
☐ Tagalog
☐ Ilacano
☐ Japanese
☐ Korean
☐ Samoan
☐ American Sign Language
☐ Other Sign Language
☐ Other - Non-English
☐ Data Not Collected

Birthdate: _____

Age: _____ SSN: _____

Gender: _____

Parent 2No second parent currently part of the household: ☐

IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1.

SCORE: _____**Children**

1. How many children under the age of 18 are currently with you? _____

☐ Refused

2. How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? : _____

☐ Refused

3. IF HOUSEHOLD INCLUDES A FEMALE: Is any member of the family currently pregnant?

☐ Yes ☐ No ☐ Refused

4. Please provide a list of children's names and ages:

No records found (+1).

8/23/2018Printable Version

<input type="checkbox"/> First Name*	Last Name*	Gender*	Birth Date*	Age	SSN	Relationship to Head of Household*	Living With Head of Household	Race*	Ethnicity*	Chronically Disabled	Veteran Status
<input type="checkbox"/>		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Trans Male (FTM or Female to Male) <input type="checkbox"/> Trans Female (MTF or Male to Female) <input type="checkbox"/> Gender Non-Conforming (i.e. not exclusively male or female) <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data not collected			N/A	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Non-Legal Partner <input type="checkbox"/> Son <input type="checkbox"/> Step-son <input type="checkbox"/> Daughter <input type="checkbox"/> Step-daughter <input type="checkbox"/> Dependent Child <input type="checkbox"/> Non-Legal Child <input type="checkbox"/> Grandson <input type="checkbox"/> Granddaughter <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Guardian <input type="checkbox"/> Nephew <input type="checkbox"/> Niece <input type="checkbox"/> Cousin <input type="checkbox"/> Other Family Member <input type="checkbox"/> Other Caretaker <input type="checkbox"/> Other Non-Family	<input type="checkbox"/>	...	<input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Non-Latino <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data not collected	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data Not Collected	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Client doesn't know <input type="checkbox"/> Client refused <input type="checkbox"/> Data Not Collected

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER,AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.
IF THERE ARE TWO PARENTS WITH 3+ CHILDREN,AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.
SCORE:

A. History of Housing & Homelessness

5. Where do you and your family sleep most frequently?

☐ Shelters
☐ Transitional House
☐ Safe Haven
☐ Outdoors
☐ Other (specify)
☐ Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.
SCORE:

6. How long has it been since you and your family lived in permanent stable housing? # Years: # Months ☐ Refused

7. In the last three years, how many times have you and your family been homeless? ☐ Refused

IIF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.
SCORE:

B. Risks

8. In the past six months, how many times have you or anyone in your family...

a) Received health care at an emergency department/room? ☐ Refused

b) Taken an ambulance to the hospital? ☐ Refused

c) Been hospitalized as an inpatient? ☐ Refused

d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? ☐ Refused

e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or ☐ Refused

because the police told them that they must move along?

f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

9. Have you or anyone in your family been attacked or beaten up since they've become homeless? ☐ Yes ☐ No ☐ Refused

10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF HARM**.

SCORE:

11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Yes ☐ No ☐ Refused

IF "YES," THEN SCORE 1 FOR **LEGAL ISSUES**.

SCORE:

12. Does anybody force or trick you or anyone in your family to do things that you do not want to do? ☐ Yes ☐ No ☐ Refused

13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **RISK OF EXPLOITATION**.

SCORE:

C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money? ☐ Yes ☐ No ☐ Refused

15a. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Yes ☐ No ☐ Refused

15b. How do you or anyone in your family make money?

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled? ☐ Yes ☐ No ☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY**.

SCORE:

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Yes ☐ No ☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE**.

SCORE:

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted? ☐ Yes ☐ No ☐ Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:

D. Wellness

19a. Where does your family usually go for healthcare or when someone's not feeling well? ☐ Hospital ☐ VA ☐ Other ☐ Does not go for care

Specific Location:

- ☐ Montefiore Mount Vernon Hospital
☐ Montefiore New Rochelle Hospital
☐ Mount Vernon Neighborhood Health Center
☐ New York Presbyterian - Hudson Valley Hospital
☐ New York Presbyterian - Lawrence Hospital
☐ New York Presbyterian - Westchester Division (White Plains)

- ☐ Northern Westchester Hospital
☐ Phelps Memorial Hospital Center
☐ St John's Riverside Hospital - Andrus
☐ St John's Riverside Hospital - Dobbs Ferry
☐ St John's Riverside Hospital - Park Care
☐ St Vincent's Hospital Westchester - division of St Joseph's MC
☐ St. Joseph's Medical Center
☐ VA Clinic - White Plains
☐ VA Clinic - Yonkers
☐ VA Hospital - Knightsbridge Campus (Bronx)
☐ VA Hospital - Montrose Campus
☐ Westchester Medical Center
☐ White Plains Hospital

If OTHER - Please specify: _____

19b. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family? ☐ Yes ☐ No ☐ Refused

20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Yes ☐ No ☐ Refused

21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family? ☐ Yes ☐ No ☐ Refused

22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Yes ☐ No ☐ Refused

- If any response is YES in questions 35 through 42, score 1 in the Substance Use column.

23. When someone in your family is sick or not feeling well, does your family avoid getting medical help? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE: _____

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past? ☐ Yes ☐ No ☐ Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE: _____

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? ☐ Yes ☐ No ☐ Refused

b) A past head injury? ☐ Yes ☐ No ☐ Refused

c) A learning disability, developmental disability, or other impairment? ☐ Yes ☐ No ☐ Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE: _____

28. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, and experience with problematic substance use?

☐ Yes ☐ No ☐ Refused

IF "YES", SCORE 1 FOR **TRI-MORBIDITY**.

SCORE: _____

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking? ☐ Yes ☐ No ☐ Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication? ☐ Yes ☐ No ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS**.

SCORE: _____

31. YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced? ☐ Yes ☐ No ☐ Refused

IF "YES", SCORE 1 FOR ABUSE AND **TRAUMA**.**SCORE:**

E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days? ☐ Yes ☐ No ☐ Refused33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing? ☐ Yes ☐ No ☐ RefusedIF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **FAMILY LEGAL ISSUES**.**SCORE:**34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation? ☐ Yes ☐ No ☐ Refused35. Has any child in the family experienced abuse or trauma in the last 180 days? ☐ Yes ☐ No ☐ Refused36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week? ☐ Yes ☐ No ☐ RefusedIF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR **NEEDS OF CHILDREN**.**SCORE:**37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that? ☐ Yes ☐ No ☐ Refused38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed? ☐ Yes ☐ No ☐ RefusedIF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **FAMILY STABILITY**.**SCORE:**39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that? ☐ Yes ☐ No ☐ Refused

40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...

a) 3 or more hours per day for children aged 13 or older? ☐ Yes ☐ No ☐ Refusedb) 2 or more hours per day for children aged 12 or younger? ☐ Yes ☐ No ☐ Refused41. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that? ☐ Yes ☐ No ☐ Don't Know ☐ RefusedIF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR **PARENTAL ENGAGEMENT**.**SCORE:**

SCORING SECTION

SECTION

SCORE

Results

GENERAL INFORMATION

Score

Recommendation

A. HISTORY

0-3

No housing intervention

B. RISK

4-8

An assessment for Rapid Re-Housing

C. SOCIALIZATION & DAILY FUNCTIONS

9+

an assessment for Permanent Supportive Housing/Housing First

D. WELLNESS

E. FAMILY UNIT

PRE-SCREEN TOTAL

Follow-Up Questions

Is there a person/outreach worker that you trust more than others?

- ☐ Yes
☐ No
☐ Client Doesn't Know
☐ Client Refused
☐ Data not Collected

If YES - Please specify the person and/or agency's name:

On a regular day, where is it easiest to find you and what time of day is easiest to do so?

Is there a phone number and/or email where someone can get in touch with you or leave a message?

Ok, now I'd like to take your picture. May I do so?

- ☐ Yes ☐ No ☐ Refused

Restriction:

- * ☐ Restrict to Organization
☐ Share to Continuum of Care



**WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS**

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

September 4, 2019

Chantelle L. Okarter
Commissioner
Planning & Community Development Department
City Of Mount Vernon
One Roosevelt Square
Mount Vernon, NY 10550

RE: FY2019 Continuum of Care application project prioritization

Dear Ms. Okarter:

This letter serves to inform you that **all 5** Project Applications submitted by the City of Mount Vernon will be prioritized and will be submitted as part of the Westchester County CoC 2019 Consolidated Application. The Fully Consolidated Project Application submitted by the City of Mount Vernon will also be prioritized (with the same rank number as the higher ranked individual project included in the consolidation).

If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



**WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS**

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

September 4, 2019

Michael Orth, LMSW
Commissioner
Westchester County DCMH
112 East Post Road, 2nd Floor
White Plains NY 10601

RE: FY2019 Continuum of Care application project prioritization

Dear Mr. Orth:

This letter serves to inform you that **all 4** Project Applications submitted by the Westchester County Department of Community Mental Health will be prioritized and will be submitted as part of the Westchester County CoC 2019 Consolidated Application. Per HUD instructions, the Combined Renewal Expansion submitted by DCMH will not be ranked but will be included in the Consolidated Application.

If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



**WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS**

do WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

September 4, 2019

Joseph D. Kenner
Vice President of Programs and Partnerships
Greyston
21 Park Avenue
Yonkers, NY 10703

RE: FY2019 Continuum of Care application project prioritization

Dear Mr. Kenner:

This letter serves to inform you that the 1 Project Application submitted by Greyston Health Services will be prioritized and will be submitted as part of the Westchester County CoC 2019 Consolidated Application.

If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



**WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS**

d/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

September 4, 2019

Walter Ritz
Executive Director
HOPE Community Services
50 Washington Avenue
New Rochelle NY 10801

RE: FY2019 Continuum of Care application project prioritization

Dear Mr. Ritz:

This letter serves to inform you that the 1 Project Application submitted by HOPE Community Services will be prioritized and will be submitted as part of the Westchester County CoC 2019 Consolidated Application.

If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



**WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS**

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

September 4, 2019

Joseph Shuldiner
Executive Director
Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers NY 10710-0035

RE: FY2019 Continuum of Care application project prioritization

Dear Mr. Shuldiner:

This letter serves to inform you that **all 3** Project Applications submitted by the Municipal Housing Authority for the City of Yonkers will be prioritized and will be submitted as part of the Westchester County CoC 2019 Consolidated Application.

As described to you in a previous letter sent August 2, the low scoring project Westhab RA SRO was reallocated into a new Permanent Supportive Housing expansion of the highest performing project (First Steps) by the CoC Board.

If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



**WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS**

d/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

September 4, 2019

Craig Wong
Program Administrator-Homeless Services
Westchester County Department of Social Services
85 Court Street
White Plains, New York 10601

RE: FY2019 Continuum of Care application project prioritization

Dear Mr. Wong:

This letter serves to inform you that **all 10** Project Applications submitted by the Westchester County DSS will be prioritized and will be submitted as part of the Westchester County CoC 2019 Consolidated Application. Per HUD instructions, the Combined Renewal Expansion submitted by DSS will not be ranked but will be included in the Consolidated Application.

The FY2019 NOFA for the Continuum of Care Program Competition released 07/03/19 requires all CoC's requesting funding to prioritize new and renewal projects into two Tiers. As discussed in Section II.B.10 of the NOFA, HUD will select projects in Tier 2 in order of point value until there are no more funds available.

HUD has given local CoC's the opportunity to rank projects and decide which projects will be listed in Tier 2 in their FY2019 application. During a Board meeting held on 07/25/19, the CoC Board approved a Ranking and Review Process with objective performance measure criteria by which to rank renewal projects. A copy of the resulting scoring tally details is attached.

At the meeting of the Westchester County CoC Board held on 08/02/19, the Stepping Stones (rank 23 out of 23 renewals) and Turning Point (rank 21 out of 23 renewals) projects administered by Westchester DSS were placed in Tier 2 (24% of Turning Point will be in Tier 2; the remainder will be in Tier 1). New Project Applications from reallocation and the CoC Bonus will be placed in Tier 2 below these two renewals.

Funding for the current operating year of these projects is unaffected. We will, of course, keep you up to date with further developments including any funding notices (expected in late 2019) from HUD informing Westchester County DSS of the status of the projects placed in Tier 2.

If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

WESTCHESTER COUNTY CONTINUUM OF CARE: 2019 RANK AND REVIEW PROCESS

Adopted by the Board of the Westchester County Continuum of Care on July 31, 2019 with revisions made on August 2, 2019.

Summary

HUD's Continuum of Care (CoC) homeless assistance program provides over \$18,000,000 of funding per year for homeless services in Westchester County which provides housing for over 900 homeless and formerly homeless households. HUD awards homeless assistance grants through an annual application process known as the CoC Program Competition.

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In order for WC CoC to prioritize programs that are most effectively serving the community at the local level, the community has implemented a Rank and Review Process for new and renewal projects. This process uses objective criteria and (where available) past performance to gain knowledge of project effectiveness within the full CoC system.

Multiple factors related to System Performance are used in the ranking including Exits to Permanent Housing, Exits to Homelessness, Length of Stay in PH, Increased Total Income, and Increased Earned Income.

The process includes a specific method for evaluating projects submitted by victim service providers (if necessary).

The CoC evaluates each renewal CoC project using objective data gathered from:

- HMIS APR report for the previous 12 months.
- HMIS System Performance (SysPM) report for the previous 12 months.
- LOCCS financial data
- SAGE APR timeliness information
- Previous Project Application submitted to HUD

Scoring

The 2019 Westchester CoC Project Ranking will be scored on an 85 point scale with the following breakdown:

Criteria	Source	Points
Factors related to System Performance		
Exits to Permanent Housing	SysPM 7b	0 to 10 points scored relative to other projects
Exits to Homelessness	APR Q23	0 to 5 points scored relative to other projects
Increased participant earned income	SysPM 4.1	0 to 5 points scored relative to other projects
Increased participant total income	SysPM 4.3	0 to 5 points scored relative to other projects
Project Performance factors		
Housing Utilization Rate	APR Q7b and Q8b	0 to 10 points scored relative to other projects
Length of Stay	APR Q22b	0 to 5 points scored relative to other projects
Participant Eligibility	CoC monitoring visit	0 to 5 points scored (% eligible participants x 5 points)
HMIS Data Quality	APR Q6	0 to 5 points scored relative to other projects (data element error rate 5% or above Q6a, Q6b, Q6c)
APR timeliness	SAGE	1 point per on time APR due in last two funding periods
Amount of funds recaptured by HUD	LOCCS and Project Application	0 to 5 points scored (% funds grant spent x 5 points)
Project Characteristics		
Project serves a specialized population services or serves a population with severe needs	Project Application	5 points for serving one or more of the following: <ul style="list-style-type: none"> Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status Significant health or behavioral health challenges or functional impairments
Project Component	Project Application	10 points for PSH or RHH; 5 points for TH; 0 points for SSO (except Coordinated Entry)
Low Barrier	Project Application	5 points for Low Barrier
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		2 points for provider attendance at most CERC meetings
CoC Board attendance	CoC attendance records	3 points for attendance at most CoC Board meetings [recipient and subrecipient]

Note: Domestic Violence services providers may self-report their data (from a comparable database) to respond to performance criteria since they do not participate in the Westchester CoC HMIS.

Projects are scored on performance criteria relative to other projects with the same component, with the highest performing project receiving full points on that measure, the worst performing project receiving 0 points, and all other projects receiving a score proportional to their performance between the worst and the best.

e.g. if the best performing project has a utilization rate of 100% (5 points), and the worst performing project has a utilization rate of 50% (0 points), then a project with 65% utilization rate would receive 1.5 points and a project with a 90% utilization rate would receive 4 points.

Project Ranking

Using the above scoring matrix, all projects seeking funding are scored and placed in numerical order, referred to as the “ranking”. Ranking places an applicant in either Tier 1 or Tier 2 based on the criteria established by HUD in the NOFA and CoC priorities.

The HMIS and Westchester Coordinated Entry projects are not scored, but automatically ranked #1 and #2 because they provide funding necessary for the functioning of the entire CoC.

First time renewal projects, without performance data available are placed in bottom spot in Tier 1.

The project ranking is first shared with the Continuum of Care Board. The Board reviews the process and all scoring in order to adopt the ranking. Projects that fall into the bottom of the ranking, Tier 2, are contacted and notified of their ranking.

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This year, HUD has made bonus funds available through the CoC Bonus (for CoC’s that demonstrate that the CoC ranks projects based on how they improve system performance). A separate RFP will be issued by the CoC to determine subrecipients to design and submit Project Applications to HUD for the CoC Bonus.

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If funds are reallocated, any resulting new projects will be ranked below renewals.

Westchester CoC FY2019 Project Ranking Tally

Project Name	Total ARA	Increased Earned Income		Increased Total Income		Exits to PH		HMIS DQ		Housing Utilization Rate		Length of Stay		Exits to Homelessness		Participant Eligibility	
Project Name		SysPM 4.1	4.1 data	SysPM 4.3	4.3 data	SysPM 7b	7b data	APR Q6	# Q6 data elements 5%+ error rate	APR 7b and 8b	utilization rate households	APR Q22b	leavers and stayers LOS	APR Q23	% exits to homelessness	CoC monitoring visit	% eligible
HMIS	\$260,000																
Westchester Coordinated	\$458,872																
First Steps	\$847,612	5.00	37%	2.00	40%	7.65	95%	5.00	0	4.02	98%	2.01	1642.88889	5.00	0%	5	100%
Yonkers RA	\$575,955	1.76	13%	2.85	57%	9.26	99%	2.50	1	10.00	170%	5.00	3054.17647	5.00	0%	2.69230769	54%
DCMH Leasing Project	\$164,177	0.00	0%	3.35	67%	10.00	100%	2.50	1	3.85	96%	1.55	1424.71429	5.00	0%	5	100%
CMV RA 07	\$97,030	0.00	0%	3.35	67%	10.00	100%	5.00	0	4.84	108%	2.08	1675	5.00	0%	2.5	50%
The Refuge	\$107,001	5.00	40%	5.00	40%	10.00	100%	2.50	1	0.00	64.29%	0.00	408.533333	5.00	0%	5	100%
CNR Rehousing Initiative	\$281,153	4.46	33%	2.90	58%	10.00	100%	2.50	1	5.19	113%	1.36	1337.29412	5.00	0%	1.25	25%
DCMH Vet Home 03	\$90,312	0.00	0%	5.00	100%	10.00	100%	2.50	1	2.77	83%	1.23	1273	5.00	0%	5	100%
Homestead	\$468,431	0.00	0%	3.20	64%	8.39	97%	2.50	1	3.63	94%	1.06	1192.90625	5.00	0%	3.33333333	67%
New Start	\$802,217	5.00	83%	5.00	92%	10.00	94%	0.00	2	0.00	147%	0.00	455.171429	3.75	7%	5	100%
CMV RA 05	\$230,013	0.68	5%	2.10	42%	10.00	100%	2.50	1	6.71	131%	1.99	1635	5.00	0%	3.33333333	67%
HIV RA	\$70,773	0.00	0%	0.00	0%	10.00	100%	2.50	1	2.08	75%	1.18	1250	5.00	0%	1.66666667	33%
CMV RA 06	\$285,485	1.08	8%	2.10	42%	10.00	100%	2.50	1	3.41	91.1%	1.66	1476	5.00	0%	2.5	50%
Shallow Rent	\$384,214	1.35	10%	3.10	62%	8.65	97%	0.00	2	4.15	100%	1.42	1366.09524	5.00	0%	3	60%
DCMH RA Project	\$8,407,550	0.54	4%	1.10	22%	9.24	98%	2.50	1	3.76	95%	3.89	2530.81057	2.56	13%	1.73076923	35%
Rapid Road To Housing	\$882,731	1.08	18%	1.14	21%	0.00	58%	5.00	0	10.00	241%	5.00	445.383178	1.11	20%	5	100%
Issan House	\$279,467	0.00	0%	1.45	29%	8.65	97%	2.50	1	2.91	85%	1.97	1625.375	5.00	0%	0	0%
CMV RA Vets	\$53,080	0.00	0%	0.00	0%	10.00	100%	2.50	1	0.00	50.0%	2.05	1663	5.00	0%	0	0%
RISE	\$594,021																
Turning Point	\$2,941,203	0.27	2%	1.20	24%	5.00	90%	2.50	1	3.75	95%	0.77	1057.99359	0.00	26%	3.16666667	63%
Westhab RA SRO	\$45,158	0.00	0%	1.65	33%	0.00	80%	5.00	0	3.63	94%	0.00	695	5.00	0%	5	100%
Stepping Stones	\$329,915	0.00	0%	0.00	0%	0.00	89%	0.00	2	10.00	81.25%	5.00	365.315789	5.00	0%	5	100%
		5		5		10		5		10		5		5		5	

Westchester CoC FY2019 Project Ranking Tally

APR timeliness	% unspent	% unspent	Population with severe needs	Project Component		Low Barrier	Participation in CE				CoC Board Attendance			SCORE		Project Name	
SAGE		% spent last APR	Project Application	Project Application	component	Project Application	HMIS and CE attendance records	non-CE enrollments	CE notes	CERC attendance	CoC attendance records	recipient attendance most CoC Board meetings	provider attendance most CoC Board meetings	TOTAL		Project Name	RANK
														100	\$18,656,370	HMIS	1
														99	\$18,396,370	Westchester Coordinated Entry	2
1	4.76502117	95.30%	5	10	PSH	5	5	3		2	3	1.5	1.5	69.44	\$17,937,498	First Steps	3
2	4.51327227	90.27%		10	PSH	5	4	3		1	1.5	0	1.5	66.07	\$17,089,886	Yonkers RA	4
1	4.25594436	85.12%	5	10	PSH	5	5	3		2	3	1.5	1.5	64.51	\$16,513,931	DCMH Leasing Project	5
2	4.80176988	96.04%		10	PSH	5	5	3		2	1.5	0	1.5	61.07	\$16,349,754	CMV RA 07	6
2	5	100.00%	5	5	TH	5	5	3		2	1.5	1.5	0	61.00	\$16,252,724	The Refuge	7
2	4.61777007	92.36%		10	PSH	5	5	3		2	0	0	0	59.28	\$16,145,723	CNR Rehousing Initiative	8
2	2.76892548	55.38%	5	10	PSH	0	5	3		2	3	1.5	1.5	59.26	\$15,864,570	DCMH Vet Home 03	9
2	4.84251367	96.85%	5	10	PSH	5	0	0	1 of 5 pre-CE	0	3	1.5	1.5	56.95	\$15,774,258	Homestead	10
2	3.2007019	64.01%	3.28	10	RRH	0	5	3		2	3	1.5	1.5	55.23	\$15,305,827	New Start	11
0	4.10646741	82.13%		10	PSH	5	3	3		0	0	0	0	54.41	\$14,503,610	CMV RA 05	12
2	3.03917802	60.78%	5	10	PSH	5	5	3		2	1.5	0	1.5	53.96	\$14,273,597	HIV RA	13
0	3.83319804	76.66%		10	PSH	5	5	3		2	1.5	0	1.5	53.58	\$14,202,824	CMV RA 06	14
1	3.55013332	71.00%	2.5	10	PSH	5	3	3		0	1.5	0	1.5	53.22	\$13,917,339	Shallow Rent	15
2	4.00495958	80.10%	1.875	10	PSH	5	1.66666667	0	2 of 40 pre-C	1.66666667	3	1.5	1.5	52.87	\$13,533,125	DCMH RA Project	16
2	3.39872769	67.97%	2.5	10	RRH	0	5	3		2	1.5	0	1.5	52.73	\$5,125,575	Rapid Road To Housing	17
2	5	100.00%	5	10	PSH	5	0	0	2 of 8 pre-CE	0	3	1.5	1.5	52.48	\$4,242,844	Issan House	18
1	4.97561153	99.51%	5	10	PSH	5	3	3		0	0	0	0	48.53	\$3,963,377	CMV RA Vets	19
														47	\$3,910,297	RISE	20
2	4.42615905	88.52%	0.35	10	PSH	5	4.6	3		1.6	3	1.5	1.5	46.03	\$3,316,276	Turning Point (\$708,668 [24%] in Tier 2)	21
2	1.85840046	37.17%		10	PSH	5	5	3		2	1.5	0	1.5	45.64	\$375,073	Westhab RA SRO	22
2	4.03178182	80.64%	5	5	TH	0	3	3		0	1.5	1.5	0	45.53	\$329,915	Stepping Stones	23
2	5		5	10		5	5				3			85			

Note: The Westchester County Continuum of Care (NY-604) did not reject any Project Applications for FY2019. All Project Applications were accepted and ranked.

One project was eliminated through reallocation.

The letters to notify the project applicant that the Westchester County CoC Board approved the reallocation affecting their project is attached.



August 2, 2019

Joseph Shuldiner
Executive Director, Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers NY 10710-0035

RE: FY2019 Continuum of Care application project reallocation

Dear Mr. Shuldiner:

The FY2019 NOFA for the Continuum of Care Program Competition was released on 07/03/19. Per section VI.G.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA.

In addition, at VII.B.1.c., CoCs are instructed to demonstrate that they review performance of existing projects, and then reallocate funding from lower performing projects to create new higher performing projects. Therefore, as part of the application process, we have reviewed and ranked, in as transparent a manner as possible, all projects eligible for renewal in FY2019 for possible reallocation.

During a Board meeting held on 07/25/19, the CoC Board approved a Ranking and Review Process with objective performance measure criteria by which to rank renewal projects, including length of time homeless, % exits to Permanent Housing destinations, % exits to homelessness, % clients increasing income and employment during enrollment, participant eligibility, utilization rates, APR timeliness, Coordinated Entry participation, and HMIS data quality. Project Component was also taken into account, with Permanent Housing receiving more points than Transitional Housing or Supportive Services Only projects. Projects that serve priority populations, or populations with special needs were also scored higher.

Projects were ranked using the above criteria, and the **Westhab RA SRO** (Permanent Supportive Housing) project administered by MHACY was ranked 22 out of the 23 projects eligible for renewal. A copy of the scoring tally details is attached.

During a subsequent Board meeting held on 08/02/19, the CoC Board elected to reallocate the low performing Westhab RA SRO. Westhab RA SRO with rank #22 was chosen for reallocation rather than the low performing Stepping Stones project with rank #23 because Stepping Stones is Transitional Housing with the target population Youth ages 18-24, which is considered a priority population both nationally by HUD and locally by the Westchester Continuum of Care.

The CoC Board decided to use Reallocated funds to create an expansion project for the renewal First Steps PSH project, which was the highest performing renewal housing project. Reallocation to First Steps expansion was determined to be the most efficient use of funds as this project serves the priority target population of youth experiencing homelessness.

In addition, the FY2019 NOFA for the Continuum of Care Program Competition section II.B.10 requires all CoC's requesting funding to prioritize new and renewal projects into two Tiers. However, in the event



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On behalf of the CoC, I want to thank you for your work to assist the homeless in Westchester County, and your participation in this difficult process of self-evaluation.

We will, of course, keep you up to date with further developments regarding the FY2019 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health

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First Steps	\$847,612	5.00	37%	2.00	40%	7.65	95%	5.00	0	4.02	98%	2.01	1642.88889	5.00	0%	5	100%
Yonkers RA	\$575,955	1.76	13%	2.85	57%	9.26	99%	2.50	1	10.00	170%	5.00	3054.17647	5.00	0%	2.69230769	54%
DCMH Leasing Project	\$164,177	0.00	0%	3.35	67%	10.00	100%	2.50	1	3.85	96%	1.55	1424.71429	5.00	0%	5	100%
CMV RA 07	\$97,030	0.00	0%	3.35	67%	10.00	100%	5.00	0	4.84	108%	2.08	1675	5.00	0%	2.5	50%
The Refuge	\$107,001	5.00	40%	5.00	40%	10.00	100%	2.50	1	0.00	64.29%	0.00	408.533333	5.00	0%	5	100%
CNR Rehousing Initiative	\$281,153	4.46	33%	2.90	58%	10.00	100%	2.50	1	5.19	113%	1.36	1337.29412	5.00	0%	1.25	25%
DCMH Vet Home 03	\$90,312	0.00	0%	5.00	100%	10.00	100%	2.50	1	2.77	83%	1.23	1273	5.00	0%	5	100%
Homestead	\$468,431	0.00	0%	3.20	64%	8.39	97%	2.50	1	3.63	94%	1.06	1192.90625	5.00	0%	3.33333333	67%
New Start	\$802,217	5.00	83%	5.00	92%	10.00	94%	0.00	2	0.00	147%	0.00	455.171429	3.75	7%	5	100%
CMV RA 05	\$230,013	0.68	5%	2.10	42%	10.00	100%	2.50	1	6.71	131%	1.99	1635	5.00	0%	3.33333333	67%
HIV RA	\$70,773	0.00	0%	0.00	0%	10.00	100%	2.50	1	2.08	75%	1.18	1250	5.00	0%	1.66666667	33%
CMV RA 06	\$285,485	1.08	8%	2.10	42%	10.00	100%	2.50	1	3.41	91.1%	1.66	1476	5.00	0%	2.5	50%
Shallow Rent	\$384,214	1.35	10%	3.10	62%	8.65	97%	0.00	2	4.15	100%	1.42	1366.09524	5.00	0%	3	60%
DCMH RA Project	\$8,407,550	0.54	4%	1.10	22%	9.24	98%	2.50	1	3.76	95%	3.89	2530.81057	2.56	13%	1.73076923	35%
Rapid Road To Housing	\$882,731	1.08	18%	1.14	21%	0.00	58%	5.00	0	10.00	241%	5.00	445.383178	1.11	20%	5	100%
Issan House	\$279,467	0.00	0%	1.45	29%	8.65	97%	2.50	1	2.91	85%	1.97	1625.375	5.00	0%	0	0%
CMV RA Vets	\$53,080	0.00	0%	0.00	0%	10.00	100%	2.50	1	0.00	50.0%	2.05	1663	5.00	0%	0	0%
RISE	\$594,021																
Turning Point	\$2,941,203	0.27	2%	1.20	24%	5.00	90%	2.50	1	3.75	95%	0.77	1057.99359	0.00	26%	3.16666667	63%
Westhab RA SRO	\$45,158	0.00	0%	1.65	33%	0.00	80%	5.00	0	3.63	94%	0.00	695	5.00	0%	5	100%
Stepping Stones	\$329,915	0.00	0%	0.00	0%	0.00	89%	0.00	2	10.00	81.25%	5.00	365.315789	5.00	0%	5	100%
		5		5		10		5		10		5		5		5	

Westchester CoC FY2019 Project Ranking Tally

APR timeliness	% unspent	% unspent	Population with severe needs	Project Component		Low Barrier	Participation in CE				CoC Board Attendance			SCORE		Project Name	
SAGE		% spent last APR	Project Application	Project Application	component	Project Application	HMIS and CE attendance records	non-CE enrollments	CE notes	CERC attendance	CoC attendance records	recipient attendance most CoC Board meetings	provider attendance most CoC Board meetings	TOTAL		Project Name	RANK
														100	\$18,656,370	HMIS	1
														99	\$18,396,370	Westchester Coordinated Entry	2
1	4.76502117	95.30%	5	10	PSH	5	5	3		2	3	1.5	1.5	69.44	\$17,937,498	First Steps	3
2	4.51327227	90.27%		10	PSH	5	4	3		1	1.5	0	1.5	66.07	\$17,089,886	Yonkers RA	4
1	4.25594436	85.12%	5	10	PSH	5	5	3		2	3	1.5	1.5	64.51	\$16,513,931	DCMH Leasing Project	5
2	4.80176988	96.04%		10	PSH	5	5	3		2	1.5	0	1.5	61.07	\$16,349,754	CMV RA 07	6
2	5	100.00%	5	5	TH	5	5	3		2	1.5	1.5	0	61.00	\$16,252,724	The Refuge	7
2	4.61777007	92.36%		10	PSH	5	5	3		2	0	0	0	59.28	\$16,145,723	CNR Rehousing Initiative	8
2	2.76892548	55.38%	5	10	PSH	0	5	3		2	3	1.5	1.5	59.26	\$15,864,570	DCMH Vet Home 03	9
2	4.84251367	96.85%	5	10	PSH	5	0	0	1 of 5 pre-CE	0	3	1.5	1.5	56.95	\$15,774,258	Homestead	10
2	3.2007019	64.01%	3.28	10	RRH	0	5	3		2	3	1.5	1.5	55.23	\$15,305,827	New Start	11
0	4.10646741	82.13%		10	PSH	5	3	3		0	0	0	0	54.41	\$14,503,610	CMV RA 05	12
2	3.03917802	60.78%	5	10	PSH	5	5	3		2	1.5	0	1.5	53.96	\$14,273,597	HIV RA	13
0	3.83319804	76.66%		10	PSH	5	5	3		2	1.5	0	1.5	53.58	\$14,202,824	CMV RA 06	14
1	3.55013332	71.00%	2.5	10	PSH	5	3	3		0	1.5	0	1.5	53.22	\$13,917,339	Shallow Rent	15
2	4.00495958	80.10%	1.875	10	PSH	5	1.66666667	0	2 of 40 pre-C	1.66666667	3	1.5	1.5	52.87	\$13,533,125	DCMH RA Project	16
2	3.39872769	67.97%	2.5	10	RRH	0	5	3		2	1.5	0	1.5	52.73	\$5,125,575	Rapid Road To Housing	17
2	5	100.00%	5	10	PSH	5	0	0	2 of 8 pre-CE	0	3	1.5	1.5	52.48	\$4,242,844	Issan House	18
1	4.97561153	99.51%	5	10	PSH	5	3	3		0	0	0	0	48.53	\$3,963,377	CMV RA Vets	19
														47	\$3,910,297	RISE	20
2	4.42615905	88.52%	0.35	10	PSH	5	4.6	3		1.6	3	1.5	1.5	46.03	\$3,316,276	Turning Point (\$708,668 [24%] in Tier 2)	21
2	1.85840046	37.17%		10	PSH	5	5	3		2	1.5	0	1.5	45.64	\$375,073	Westhab RA SRO	22
2	4.03178182	80.64%	5	5	TH	0	3	3		0	1.5	1.5	0	45.53	\$329,915	Stepping Stones	23
2	5		5	10		5	5				3			85			

Westchester County
Continuum of Care Partnership for the Homeless

**1E-1. (2) Public Posting– 30-Day Local Competition
Deadline**

Please find attached:

**1) Letters to Applicants notifying them of the Local
Competition Deadline 08/30/2019.**

**2) Copy of email distributing 07/17/19 CoC Board
meeting agenda attachment which included Local
Competition Deadline as item V.c. ● #5**

**As shown, this email was sent by the CoC to ALL CoC
recipient and subrecipients.**

**3) 07/17/19 CoC Board meeting agenda which included
Local Competition Deadline as item V.c. ● #5**



July 17, 2019

Chantelle L. Okarter
Commissioner, Department of Planning & Community Development
City Of Mount Vernon
One Roosevelt Square
Mount Vernon, NY 10550

RE: FY2019 Continuum of Care application internal competition deadlines

Dear Ms. Okarter:

The FY2019 NOFA for the Continuum of Care Program Competition was released on 07/03/19. Per section VI.G.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

(1) Project Applicants. All project applications are required to be submitted to the Westchester CoC through e-snaps no later than 7:59:59 p.m on **August 30, 2019** (no later than 30 days before the application deadline to HUD).

(2) CoC Notification to Project Applicants. The Westchester CoC will notify, in writing outside of e-snaps, all project applicants who submitted their project applications to the CoC whether their project application(s) will be accepted and ranked on the CoC Priority Listing, rejected, or reduced by the CoC no later than 7:59:59 p.m on September 15, 2019 (no later than 15 days before the application deadline to HUD).

Where a project application is being rejected or reduced, the Westchester CoC will notify the project applicant, in writing outside of e-snaps, with an explanation for the decision to reject or reduce the project application.

We will, of course, keep you up to date with further developments regarding the FY2019 CoC competition as they become available. If you have any questions, please contact me at (914) 995-5278.

Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 17, 2019

Michael Orth
Commissioner
Westchester County DCMH
112 East Post Road, 2nd Floor
White Plains NY 10601

RE: FY2019 Continuum of Care application internal competition deadlines

Dear Mr. Orth:

The FY2019 NOFA for the Continuum of Care Program Competition was released on 07/03/19. Per section VI.G.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you.

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 17, 2019

Craig Wong
Program Administrator-Homeless Services
85 Court Street
White Plains, New York 10601

RE: FY2019 Continuum of Care application internal competition deadlines

Dear Mr. Wong:

The FY2019 NOFA for the Continuum of Care Program Competition was released on 07/03/19. Per section VI.G.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

d/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

July 17, 2019

Joe Kenner
Vice-President, Programs and Partnerships
Greyston Foundation
21 Park Avenue
Yonkers NY 10703

RE: FY2019 Continuum of Care application internal competition deadlines

Dear Mr. Kenner:

The FY2019 NOFA for the Continuum of Care Program Competition was released on 07/03/19. Per section VI.G.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW
Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 17, 2019

Walter Ritz
Executive Director
HOPE Community Services
50 Washington Avenue
New Rochelle NY 10801

RE: FY2019 Continuum of Care application internal competition deadlines

Dear Mr. Ritz:

The FY2019 NOFA for the Continuum of Care Program Competition was released on 07/03/19. Per section VI.G.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless



July 17, 2019

Joseph Shuldiner
Executive Director, Municipal Housing Authority for the City of Yonkers
1511 Central Park Avenue
P.O. Box 35
Yonkers NY 10710-0035

RE: FY2019 Continuum of Care application internal competition deadlines

Dear Mr. Shuldiner:

The FY2019 NOFA for the Continuum of Care Program Competition was released on 07/03/19. Per section VI.G.1.b., the Westchester CoC must design, operate, and follow a collaborative process for the development of the application in response to the NOFA. As part of this process, we must establish internal competition deadlines as outlined below:

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Thank you,

Annette Peters-Ruvolo, LCSW

Program Director, WC Department of Community Mental Health
Co-Chair, Westchester County Continuum of Care Partnership for the Homeless

Spiegel, Yoav

From: Peters-Ruvolo, Annette
Sent: Wednesday, July 17, 2019 9:09 AM
To: alba.guevara@yonkersny.gov; Allison McSpedon; Amy Gelles; Anahaita Kotval; Anthony Sabia; Austin, Dahlia; Barbara Bento-Fleming; Bolivar, Sylvia; Candice Kane; Catalano, Michael; Christopher Rivera; Cynthia Knox (cynthiaknox@chhop.org); dlockwood@lexingtonctr.org; Drummond, Norma; erikad@greyston.org; Frankel Helen; James Coughlin; Jeff Worden (jworden@programdesign.com); Joe Kenner; 'Karlyn Jackson'; kathy pandekakes; KBertrand@programdesign.com; Krukiel, May; Lakia Perkins; Lockhart, Reginald; Manzione, Susan; Marcie Ciuffetelli (mciuffetelli@mhacy.org); 'Maria McGinty'; Maria McGinty (mmcginty830@gmail.com); Michelle Gonzalez YWCA Yonkers; Nadine Burns-Lyons; Nicole Granata (ngranata@hdswn.org); Okarter, Chantelle; Paul Stolz; Richards, Malika; Rita Liegner; Ruthanne Becker (beckerr@mhawestchester.org); Smith, Kevin; Spiegel, Yoav; Tajae Gaynor; Tarchoun, Jomarie; 'Tisne Suzanne'; Walt Ritz; Winner, Jill; Wong, Craig; Blanca P. Lopez; Daniel Gore; Edwards, Desh; Elizabeth McCorvey (frcecm@aol.com); Freda Macon; Giuliano, Mark; Gordon Albert; John, Christopher; joseph shuldiner; Kathy Halas; Knighton, Lili; Labrusciano Joanne; Linda Puoplo (lpuoplo@whiteplainsny.gov); Marlene Zarfes; Mims, Patricia; Nicole Masucci; Orth, Michael; Sanchez, Dana
Subject: re: materials for CoC Board meeting 7/17/19
Attachments: 2019 Housing Gaps Analysis FINAL07_2019.pdf; CoC Board meeting agenda 07_17_2019FINAL.pdf; CoC Board Meeting Minutes 5-23-2019 Draft2.docx; CoC Minutes 04-10-19 Draft(2).docx

Importance: High

Good morning –

Please see agenda and handouts attached.

Of course, hoping you can all join us in person, but just in case, the call in info is:

Phone #: 515-604-9094

Dial in # for participants:

947-630-925

Thank you!

Annette M. Peters-Ruvolo, LCSW

Program Director, Community Support Services
Westchester County Department of Community Mental Health
112 East Post Road, 2nd Floor
White Plains, NY 10601
914-995-5278
914-995-6220 (fax)

Westchester County
Continuum of Care Partnership for the Homeless
COC MONTHLY BOARD MEETING
AGENDA: July 17, 2019

- I. Welcome and Introductions**
- II. Minutes from April and May meetings (APR)**
- III. Announcements (APR)**
 - a. Yoav's transition to DCMH**
 - b. Possible name change to Partnership?**
- IV. Gaps Analysis (KB, JW)**
- V. CoC NOFA (YS, APR, KB)**
 - a. Summary of this year's scoring; new items, etc**
 - b. Bonus parameters**
 - c. Upcoming dates:**
 - **7/23/19 – release RFI for Bonus w 8/6/19 due date**
 - **7/31/19 – meeting to review formula for project ranking**
 - **8/7/19 – release RFIs for Board review/meeting to finalize project rankings**
 - **8/14/19 – meet – vote on RFIs**
 - **8/30/19 – Project Apps due**
 - **9/30/19 – completed NOFA due**
- VI. SOAR (APR) – revival scheduled for Sept – 9/18 refresher training & 9/19 stakeholders (now child SOAR!)**
- VII. Spring Symposium – update (CW, AM, JW)**
- VIII. Subcommittees**
 - Homelessness Prevention Network
 - CE Committee/Data/Systems Committee
 - Patriot Housing
 - CERC for PSH
 - CERC for RRH
 - DV Survivors CERC
 - Street Outreach
 - Education Committee
 - **Self-Sufficiency Committee**
 - PIT Count
 - Housing Success
 - Landlord Relations Committee
 - Consumer Advisory Committee

****Next CoC NOFA Board meeting 7/31/19 – 9:30am-11am – DCMH room 217****

Next CoC Board meeting: 8/14/19 – DCMH, 112 East Post Road Room 217

Check out our website: www.wcohomeless.org

Westchester County
Continuum of Care Partnership for the Homeless

1E-1. (1) Public Posting–Local Competition Announcement

Projects were ranked based on Performance Measure criteria within the Westchester CoC 2019 Rank and Review Process approved by the CoC Board on July 31, 2019.

The Performance Measures used objective criteria to rank projects (including length of stay in housing, increase in participant earned and total incomes, participant eligibility, occupancy rates, housing utilization rate, HMIS data quality, APR timeliness, Low Barrier, and Coordinated Entry participation), and included at least one factor related to achieving positive housing outcomes (% exits to permanent housing destinations, % exits to homelessness).

All 23 CoC projects appearing on the HUD Grant Inventory Worksheet (GIW) and eligible for renewal were ranked based on those Performance Measure criteria.

The results of the Project Ranking based on those criteria were discussed and approved by the CoC Board on August 2, 2019.

Please find attached:

- 1) Westchester CoC 2019 Rank and Review Process with project ranking criteria, and
- 2) Screen shot showing public posting of the Westchester CoC 2019 Rank and Review Process on the CoC website.

WESTCHESTER COUNTY CONTINUUM OF CARE: 2019 RANK AND REVIEW PROCESS

Adopted by the Board of the Westchester County Continuum of Care on July 31, 2019 with revisions made on August 2, 2019.

Summary

HUD's Continuum of Care (CoC) homeless assistance program provides over \$18,000,000 of funding per year for homeless services in Westchester County which provides housing for over 900 homeless and formerly homeless households. HUD awards homeless assistance grants through an annual application process known as the CoC Program Competition.

The Westchester Continuum of Care (WC CoC) coordinates the implementation of a housing and service system within Westchester County that meets the needs of the homeless individuals (including unaccompanied youth) and families. The Westchester CoC also, in consultation with the Collaborative Applicant, develops a process to respond to the HUD CoC Program Competition.

In order for WC CoC to prioritize programs that are most effectively serving the community at the local level, the community has implemented a Rank and Review Process for new and renewal projects. This process uses objective criteria and (where available) past performance to gain knowledge of project effectiveness within the full CoC system.

Multiple factors related to System Performance are used in the ranking including Exits to Permanent Housing, Exits to Homelessness, Length of Stay in PH, Increased Total Income, and Increased Earned Income.

The process includes a specific method for evaluating projects submitted by victim service providers (if necessary).

The CoC evaluates each renewal CoC project using objective data gathered from:

- HMIS APR report for the previous 12 months.
- HMIS System Performance (SysPM) report for the previous 12 months.
- LOCCS financial data
- SAGE APR timeliness information
- Previous Project Application submitted to HUD

Scoring

The 2019 Westchester CoC Project Ranking will be scored on an 85 point scale with the following breakdown:

Criteria	Source	Points
Factors related to System Performance		
Exits to Permanent Housing	SysPM 7b	0 to 10 points scored relative to other projects
Exits to Homelessness	APR Q23	0 to 5 points scored relative to other projects
Increased participant earned income	SysPM 4.1	0 to 5 points scored relative to other projects
Increased participant total income	SysPM 4.3	0 to 5 points scored relative to other projects
Project Performance factors		
Housing Utilization Rate	APR Q7b and Q8b	0 to 10 points scored relative to other projects
Length of Stay	APR Q22b	0 to 5 points scored relative to other projects
Participant Eligibility	CoC monitoring visit	0 to 5 points scored (% eligible participants x 5 points)
HMIS Data Quality	APR Q6	0 to 5 points scored relative to other projects (data element error rate 5% or above Q6a, Q6b, Q6c)
APR timeliness	SAGE	1 point per on time APR due in last two funding periods
Amount of funds recaptured by HUD	LOCCS and Project Application	0 to 5 points scored (% funds grant spent x 5 points)
Project Characteristics		
Project serves a specialized population services or serves a population with severe needs	Project Application	5 points for serving one or more of the following: <ul style="list-style-type: none"> Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status Significant health or behavioral health challenges or functional impairments
Project Component	Project Application	10 points for PSH or RHH; 5 points for TH; 0 points for SSO (except Coordinated Entry)
Low Barrier	Project Application	5 points for Low Barrier
Participation in Coordinated Entry	HMIS and CoC attendance records	3 points if all project entries since 7/1/18 are CE referrals

		2 points for provider attendance at most CERC meetings
CoC Board attendance	CoC attendance records	3 points for attendance at most CoC Board meetings [recipient and subrecipient]

Note: Domestic Violence services providers may self-report their data (from a comparable database) to respond to performance criteria since they do not participate in the Westchester CoC HMIS.

Projects are scored on performance criteria relative to other projects with the same component, with the highest performing project receiving full points on that measure, the worst performing project receiving 0 points, and all other projects receiving a score proportional to their performance between the worst and the best.

e.g. if the best performing project has a utilization rate of 100% (5 points), and the worst performing project has a utilization rate of 50% (0 points), then a project with 65% utilization rate would receive 1.5 points and a project with a 90% utilization rate would receive 4 points.

Project Ranking

Using the above scoring matrix, all projects seeking funding are scored and placed in numerical order, referred to as the “ranking”. Ranking places an applicant in either Tier 1 or Tier 2 based on the criteria established by HUD in the NOFA and CoC priorities.

The HMIS and Westchester Coordinated Entry projects are not scored, but automatically ranked #1 and #2 because they provide funding necessary for the functioning of the entire CoC.

First time renewal projects, without performance data available are placed in bottom spot in Tier 1.

The project ranking is first shared with the Continuum of Care Board. The Board reviews the process and all scoring in order to adopt the ranking. Projects that fall into the bottom of the ranking, Tier 2, are contacted and notified of their ranking.

Bonus Projects

This year, HUD has made bonus funds available through the CoC Bonus (for CoC’s that demonstrate that the CoC ranks projects based on how they improve system performance). A separate RFP will be issued by the CoC to determine subrecipients to design and submit Project Applications to HUD for the CoC Bonus.

Bonus projects will be ranked below renewals.

Reallocation

Reallocation is the process by which the CoC shifts funds, in whole or in part, from existing eligible renewal grants to new projects that can better address prioritized community need(s). Reallocating funds is one of the most important tools by which communities can make strategic improvements to their homelessness system. The CoC can decide to repurpose a project that is underperforming or may be more appropriately funded from other sources to fill that need. Criteria to assess performance or underperformance will include scoring/rank and review results, participation in Coordinated Entry, participation in the local CoC, and participation within HMIS. CoC funded agencies may also voluntarily propose to reallocate CoC funds. Additionally, if a project consistently demonstrates unsatisfactory project performance outcomes and fails to make significant changes to improve its performance, that project may be recommended for reallocation.

If funds are reallocated, any resulting new projects will be ranked below renewals.



HUD Fiscal Year 2019 Notice of Funding Availability and Westchester County CoC (NY-604) Project Ranking

[HUD Notice of Funding Availability \(NOFA\) for FY2019](#)

[Grant Inventory Worksheet for Westchester County CoC](#)

[Westchester County CoC Priority List in Rank order -
Posted 8/14/19](#)

 [CoC-604 Board Project Ranking and Review Process -
Posted 8/14/19](#)

[Westchester CoC Board Proposed Reallocation - FY2019 -
Posted 8/14/19](#)

*Agencies with questions and concerns please contact
Annette Peters-Ruvolo at Apr5@westchestergov.com*

WESTCHESTER COUNTY CONTINUUM OF CARE: 2019 RANK AND REVIEW PROCESS

Adopted by the Board of the Westchester County Continuum of Care on July 31, 2019 with revisions made on August 2, 2019.

Summary

HUD's Continuum of Care (CoC) homeless assistance program provides over \$18,000,000 of funding per year for homeless services in Westchester County which provides housing for over 3000 homeless and formerly homeless households. HUD awards homeless assistance grants through an annual application process known as the CoC Program Competition.

The Westchester Continuum of Care (WC CoC) coordinates the implementation of a housing and service system within Westchester County that meets the needs of the homeless individuals (including unaccompanied youth) and families. The Westchester CoC also, in consultation with the Collaborative Applicant, develops a process to respond to the HUD CoC Program Competition.

In order for WC CoC to prioritize programs that are most effectively serving the community at the local level, the community has implemented a Rank and Review Process for new and renewal projects. This process uses objective criteria and (where available) past performance to gain knowledge of project effectiveness within the WC CoC system.

Multiple factors related to System Performance are used in the ranking including: CoC to Permanent Housing, CoC to Homelessness, Length of Stay in CoC, Increased Total Income, and Increased Earned Income. The process includes a specific method for evaluating projects submitted by victim service providers (if necessary).

The CoC evaluates each renewal CoC project using objective data gathered from:

- HUD's APR report for the previous 12 months.
- HUD's System Performance (SPMR) report for the previous 12 months.
- UDCC's financial data.
- SAGE APR homeless information.
- Previous Project Application submitted to HUD.

Preview FY2019 Westchester County CoC Board
Project Ranking Criteria

Continuum of Care Partnership for the Homeless

1E-4. Public Posting–CoC Approved Consolidated Application

1. Evidence demonstrating the objective review and ranking process

Projects were ranked based on Performance Measure criteria within the Westchester CoC 2019 Rank and Review Process approved by the CoC Board on July 31, 2019.

The Performance Measures used objective criteria to rank projects (including length of stay in housing, increase in participant earned and total incomes, participant eligibility, occupancy rates, housing utilization rate, HMIS data quality, APR timeliness, Low Barrier, and Coordinated Entry participation), and included at least one factor related to achieving positive housing outcomes (% exits to permanent housing destinations, % exits to homelessness).

All 23 CoC projects appearing on the HUD Grant Inventory Worksheet (GIW) and eligible for renewal were ranked based on those Performance Measure criteria.

The results of the Project Ranking based on those criteria were discussed and approved by the CoC Board on August 2, 2019.

Please find attached:

- 1) Westchester CoC 2019 Rank and Review Process with project ranking criteria
- 2) Final table showing the scoring for every renewal project for all Performance Measure criteria and the total score for each project based on that criteria & resulting ranking order for Continuum of Care projects

3) Screenshot of final ranking table posted to the Westchester County CoC website

4) The project ranking criteria and resulting ranking order were approved by the entire CoC Board, including all stakeholders, on 07/31/19 and 08/02/19.

Minutes from those Board meetings are attached.

2. Evidence demonstrating public posting of the final version of the completed CoC Consolidated Application—including the CoC Application with attachments, CoC Priority Listing with reallocation forms and all project applications the CoC accepted and ranked or reject.

Please find attached:

A. Screen shot of Westchester County CoC website showing links to CoC Consolidated Application and CoC Priority Listing on 09/24/2019.

B. Copy of email announcement sent 09/24/2019 that FY2019 CoC Application documents had been posted to the CoC website.

As shown, this email was sent by the CoC to ALL CoC recipients, subrecipients, and stakeholders.

WESTCHESTER COUNTY CONTINUUM OF CARE: 2019 RANK AND REVIEW PROCESS

Adopted by the Board of the Westchester County Continuum of Care on July 31, 2019 with revisions made on August 2, 2019.

Summary

HUD's Continuum of Care (CoC) homeless assistance program provides over \$18,000,000 of funding per year for homeless services in Westchester County which provides housing for over 900 homeless and formerly homeless households. HUD awards homeless assistance grants through an annual application process known as the CoC Program Competition.

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Multiple factors related to System Performance are used in the ranking including Exits to Permanent Housing, Exits to Homelessness, Length of Stay in PH, Increased Total Income, and Increased Earned Income.

The process includes a specific method for evaluating projects submitted by victim service providers (if necessary).

The CoC evaluates each renewal CoC project using objective data gathered from:

- HMIS APR report for the previous 12 months.
- HMIS System Performance (SysPM) report for the previous 12 months.
- LOCCS financial data
- SAGE APR timeliness information
- Previous Project Application submitted to HUD

Scoring

The 2019 Westchester CoC Project Ranking will be scored on an 85 point scale with the following breakdown:

Criteria	Source	Points
Factors related to System Performance		
Exits to Permanent Housing	SysPM 7b	0 to 10 points scored relative to other projects
Exits to Homelessness	APR Q23	0 to 5 points scored relative to other projects
Increased participant earned income	SysPM 4.1	0 to 5 points scored relative to other projects
Increased participant total income	SysPM 4.3	0 to 5 points scored relative to other projects
Project Performance factors		
Housing Utilization Rate	APR Q7b and Q8b	0 to 10 points scored relative to other projects
Length of Stay	APR Q22b	0 to 5 points scored relative to other projects
Participant Eligibility	CoC monitoring visit	0 to 5 points scored (% eligible participants x 5 points)
HMIS Data Quality	APR Q6	0 to 5 points scored relative to other projects (data element error rate 5% or above Q6a, Q6b, Q6c)
APR timeliness	SAGE	1 point per on time APR due in last two funding periods
Amount of funds recaptured by HUD	LOCCS and Project Application	0 to 5 points scored (% funds grant spent x 5 points)
Project Characteristics		
Project serves a specialized population services or serves a population with severe needs	Project Application	5 points for serving one or more of the following: <ul style="list-style-type: none"> Youth Victims of domestic violence Families with children Persons experiencing chronic homelessness Veterans Current or past substance use Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) status Significant health or behavioral health challenges or functional impairments
Project Component	Project Application	10 points for PSH or RHH; 5 points for TH; 0 points for SSO (except Coordinated Entry)
Low Barrier	Project Application	5 points for Low Barrier
Participation in Coordinated Entry	HMIS and CoC attendance records	3 points if all project entries since 7/1/18 are CE referrals

		2 points for provider attendance at most CERC meetings
CoC Board attendance	CoC attendance records	3 points for attendance at most CoC Board meetings [recipient and subrecipient]

Note: Domestic Violence services providers may self-report their data (from a comparable database) to respond to performance criteria since they do not participate in the Westchester CoC HMIS.

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If funds are reallocated, any resulting new projects will be ranked below renewals.

Westchester CoC FY2019 Project Ranking Tally

Project Name	Total ARA	Increased Earned Income		Increased Total Income		Exits to PH		HMIS DQ		Housing Utilization Rate		Length of Stay		Exits to Homelessness		Participant Eligibility	
Project Name		SysPM 4.1	4.1 data	SysPM 4.3	4.3 data	SysPM 7b	7b data	APR Q6	# Q6 data elements 5%+ error rate	APR 7b and 8b	utilization rate households	APR Q22b	leavers and stayers LOS	APR Q23	% exits to homelessness	CoC monitoring visit	% eligible
HMIS	\$260,000																
Westchester Coordinated	\$458,872																
First Steps	\$847,612	5.00	37%	2.00	40%	7.65	95%	5.00	0	4.02	98%	2.01	1642.88889	5.00	0%	5	100%
Yonkers RA	\$575,955	1.76	13%	2.85	57%	9.26	99%	2.50	1	10.00	170%	5.00	3054.17647	5.00	0%	2.69230769	54%
DCMH Leasing Project	\$164,177	0.00	0%	3.35	67%	10.00	100%	2.50	1	3.85	96%	1.55	1424.71429	5.00	0%	5	100%
CMV RA 07	\$97,030	0.00	0%	3.35	67%	10.00	100%	5.00	0	4.84	108%	2.08	1675	5.00	0%	2.5	50%
The Refuge	\$107,001	5.00	40%	5.00	40%	10.00	100%	2.50	1	0.00	64.29%	0.00	408.533333	5.00	0%	5	100%
CNR Rehousing Initiative	\$281,153	4.46	33%	2.90	58%	10.00	100%	2.50	1	5.19	113%	1.36	1337.29412	5.00	0%	1.25	25%
DCMH Vet Home 03	\$90,312	0.00	0%	5.00	100%	10.00	100%	2.50	1	2.77	83%	1.23	1273	5.00	0%	5	100%
Homestead	\$468,431	0.00	0%	3.20	64%	8.39	97%	2.50	1	3.63	94%	1.06	1192.90625	5.00	0%	3.33333333	67%
New Start	\$802,217	5.00	83%	5.00	92%	10.00	94%	0.00	2	0.00	147%	0.00	455.171429	3.75	7%	5	100%
CMV RA 05	\$230,013	0.68	5%	2.10	42%	10.00	100%	2.50	1	6.71	131%	1.99	1635	5.00	0%	3.33333333	67%
HIV RA	\$70,773	0.00	0%	0.00	0%	10.00	100%	2.50	1	2.08	75%	1.18	1250	5.00	0%	1.66666667	33%
CMV RA 06	\$285,485	1.08	8%	2.10	42%	10.00	100%	2.50	1	3.41	91.1%	1.66	1476	5.00	0%	2.5	50%
Shallow Rent	\$384,214	1.35	10%	3.10	62%	8.65	97%	0.00	2	4.15	100%	1.42	1366.09524	5.00	0%	3	60%
DCMH RA Project	\$8,407,550	0.54	4%	1.10	22%	9.24	98%	2.50	1	3.76	95%	3.89	2530.81057	2.56	13%	1.73076923	35%
Rapid Road To Housing	\$882,731	1.08	18%	1.14	21%	0.00	58%	5.00	0	10.00	241%	5.00	445.383178	1.11	20%	5	100%
Issan House	\$279,467	0.00	0%	1.45	29%	8.65	97%	2.50	1	2.91	85%	1.97	1625.375	5.00	0%	0	0%
CMV RA Vets	\$53,080	0.00	0%	0.00	0%	10.00	100%	2.50	1	0.00	50.0%	2.05	1663	5.00	0%	0	0%
RISE	\$594,021																
Turning Point	\$2,941,203	0.27	2%	1.20	24%	5.00	90%	2.50	1	3.75	95%	0.77	1057.99359	0.00	26%	3.16666667	63%
Westhab RA SRO	\$45,158	0.00	0%	1.65	33%	0.00	80%	5.00	0	3.63	94%	0.00	695	5.00	0%	5	100%
Stepping Stones	\$329,915	0.00	0%	0.00	0%	0.00	89%	0.00	2	10.00	81.25%	5.00	365.315789	5.00	0%	5	100%
		5		5		10		5		10		5		5		5	

Westchester CoC FY2019 Project Ranking Tally

APR timeliness	% unspent	% unspent	Population with severe needs	Project Component		Low Barrier	Participation in CE				CoC Board Attendance			SCORE		Project Name	
SAGE		% spent last APR	Project Application	Project Application	component	Project Application	HMIS and CE attendance records	non-CE enrollments	CE notes	CERC attendance	CoC attendance records	recipient attendance most CoC Board meetings	provider attendance most CoC Board meetings	TOTAL		Project Name	RANK
														100	\$18,656,370	HMIS	1
														99	\$18,396,370	Westchester Coordinated Entry	2
1	4.76502117	95.30%	5	10	PSH	5	5	3		2	3	1.5	1.5	69.44	\$17,937,498	First Steps	3
2	4.51327227	90.27%		10	PSH	5	4	3		1	1.5	0	1.5	66.07	\$17,089,886	Yonkers RA	4
1	4.25594436	85.12%	5	10	PSH	5	5	3		2	3	1.5	1.5	64.51	\$16,513,931	DCMH Leasing Project	5
2	4.80176988	96.04%		10	PSH	5	5	3		2	1.5	0	1.5	61.07	\$16,349,754	CMV RA 07	6
2	5	100.00%	5	5	TH	5	5	3		2	1.5	1.5	0	61.00	\$16,252,724	The Refuge	7
2	4.61777007	92.36%		10	PSH	5	5	3		2	0	0	0	59.28	\$16,145,723	CNR Rehousing Initiative	8
2	2.76892548	55.38%	5	10	PSH	0	5	3		2	3	1.5	1.5	59.26	\$15,864,570	DCMH Vet Home 03	9
2	4.84251367	96.85%	5	10	PSH	5	0	0	1 of 5 pre-CE	0	3	1.5	1.5	56.95	\$15,774,258	Homestead	10
2	3.2007019	64.01%	3.28	10	RRH	0	5	3		2	3	1.5	1.5	55.23	\$15,305,827	New Start	11
0	4.10646741	82.13%		10	PSH	5	3	3		0	0	0	0	54.41	\$14,503,610	CMV RA 05	12
2	3.03917802	60.78%	5	10	PSH	5	5	3		2	1.5	0	1.5	53.96	\$14,273,597	HIV RA	13
0	3.83319804	76.66%		10	PSH	5	5	3		2	1.5	0	1.5	53.58	\$14,202,824	CMV RA 06	14
1	3.55013332	71.00%	2.5	10	PSH	5	3	3		0	1.5	0	1.5	53.22	\$13,917,339	Shallow Rent	15
2	4.00495958	80.10%	1.875	10	PSH	5	1.66666667	0	2 of 40 pre-C	1.66666667	3	1.5	1.5	52.87	\$13,533,125	DCMH RA Project	16
2	3.39872769	67.97%	2.5	10	RRH	0	5	3		2	1.5	0	1.5	52.73	\$5,125,575	Rapid Road To Housing	17
2	5	100.00%	5	10	PSH	5	0	0	2 of 8 pre-CE	0	3	1.5	1.5	52.48	\$4,242,844	Issan House	18
1	4.97561153	99.51%	5	10	PSH	5	3	3		0	0	0	0	48.53	\$3,963,377	CMV RA Vets	19
														47	\$3,910,297	RISE	20
2	4.42615905	88.52%	0.35	10	PSH	5	4.6	3		1.6	3	1.5	1.5	46.03	\$3,316,276	Turning Point (\$708,668 [24%] in Tier 2)	21
2	1.85840046	37.17%		10	PSH	5	5	3		2	1.5	0	1.5	45.64	\$375,073	Westhab RA SRO	22
2	4.03178182	80.64%	5	5	TH	0	3	3		0	1.5	1.5	0	45.53	\$329,915	Stepping Stones	23
2	5		5	10		5	5				3			85			

<https://www.wcohomeless.org/s/FY-2019-CoC-Program-Competition-NOFA-brkt.pdf>

**Westchester County Continuum of Care Partnership for the Homeless
Monthly Meeting Minutes**

**CoC Project Ranking Meeting #1 – Project Ranking Formula
July 31st, 2019**

Attendees: Annette Peters-Ruvolo (Co-Chair), Karl Bertrand (Co-Chair), Dahlia Austin, Ruthanne Becker (phone), Barbara Bento-Fleming, Nadine Burns-Lyons (phone), Jim Coughlin, Elissa Ramos, Freda Macon (phone), Alba Guevara, Cynthia Knox, May Krukiel (phone), Doreen Lockwood, Maria McGinty, Allison McSpedon, Anthony Sabia, Yoav Spiegel, Craig Wong, Jeff Worden, Walt Ritz, Seth Berman, Michele Landry, Joe Kenner

Topic #1:	Discussion:
Announcements/Updates	<ul style="list-style-type: none">• Meeting commenced at 9:35am• Vote on monthly meeting minutes from July 17, 2019 - Dahlia Austin motioned to approve the meeting minutes, Cynthia seconded, all were in favor, zero opposed• CoC FY19 NOFA meeting #2 to finalize project rankings has been rescheduled for Friday, August 2nd @ 10:00am 112 East Post Rd. Room number TBD

Topic #2:	Discussion:
CoC 2019 Ranking and Review Process	<ul style="list-style-type: none">• Proposed changes to this year's CoC 2019 rank and review process are highlighted in blue (see handout)• Tier 1 vs Tier 2 discussion. Tier 2 is what HUD may not fully fund first (if HUD cannot fund everything)• Discussion of low barrier scoring requirement how it would influence the project applications for NOFA• Proposed change: Including a new ranking category in this year's ranking process to determine cost effectiveness- The amount of funds recaptured by HUD. This would be scored from 0 to 5 points (based on the % funds grant spent x 5 points). Total possible points per project is 85.• Proposed change: Bonus projects to be ranked below renewals – as bottom project of Tier 2.• Proposed change: Changing project rankings for first-time renewal projects, without performance data available being placed in bottom spot in tier 1 when they were previously placed in the top of tier 2• Cynthia motioned for project criteria to be adopted as written• Dahlia motioned for the CoC Board not to decide on the rankings of new projects (projects that do not have performance data available) until the CoC Board is able to see the CoC project ranking of existing projects• Dahlia's motion was passed with a 35- 10 vote
Follow-up	<ul style="list-style-type: none">• Annette will send excerpt to providers from NOFA on HUD guidance regarding the "low barrier" requirements• Yoav will e-mail CoC Project Ranking results to providers tomorrow (8/1/19)

Meeting was adjourned at 10:53am.

Respectfully submitted: Annette Peters-Ruvolo & Jeffrey Worden

Date: 07/31/2019

Next Meeting:

Date: 8/2/19

Time 10:00am

Location: DCMH, 112 East Post Rd, Room TBD

**Westchester County Continuum of Care Partnership for the Homeless
Monthly Meeting Minutes**

**CoC Project Ranking Meeting #2 – Vote on Project Rankings
August 2nd, 2019**

Attendees: Annette Peters-Ruvolo (Co-Chair), Karl Bertrand (Co-Chair), Dahlia Austin, Ruthanne Becker (phone), Vanessa Panico (phone), Seth Berman, Jim Coughlin, Erika D’Aquino (phone), Freda Macon (phone), Nicole Granata, Alba Guevara (phone), Cynthia Knox (phone), May Krukiel (phone), Allison McSpedon, Elissa Ramos, Anthony Sabia, Yoav Spiegel, Craig Wong, Jeff Worden, Walt Ritz, Danielle Gaffney, Pat Mims, Jesse Johnson, Charlie Knight, Juanquin Rogers

Topic #1:	Discussion:
Announcements/Updates	<ul style="list-style-type: none"> Meeting commenced at 10:05am Meeting minutes from 7/31/19 revised to say “Dahlia motioned for the CoC Board not to decide on the rankings of new projects (projects that do not have performance data available) until the CoC Board is able to see the CoC project ranking of existing projects” Craig Wong motioned to approve the revised version of the meeting minutes from July 31, 2019, Jim Coughlin seconded, all were in favor, zero opposed CoC FY19 NOFA meeting #3 to vote on RFI’s tentatively scheduled for Wednesday, August 14th @9:30am 112 East Post Rd. Room 217, unless Board decides to conduct voting via email – APR to send email confirming.

Topic #2:	Discussion:
CoC 2019 Project Ranking	<ul style="list-style-type: none"> Understanding the findings of audits and the process of correcting findings The CoC monitoring visit score is based on a number of factors, one of them being % eligibly enrolled which is defined as the percent of clients who were verified during site visits as being correctly documented within the project eligibility requirements. Recommendation made for Turning Point providers to meet separately to discuss ways to improve the program’s project ranking ; point made that all grantees should follow up with providers, particularly those projects w multiple providers, to ensure compliance. Request for CoC Board members to be provided with CoC project rankings on a bi-annual basis Recommendation - project scores can be improved by finding ways to increase program participants income levels Two scenarios discussed for the addition of the RISE project into the CoC project ranking tally (see hand-outs) A third scenario discussed for RISE to be placed at the bottom of tier 2. Scenario 1 – RISE is placed at the bottom of Tier 1(#20) Scenario 2 – RISE is placed in Tier 2 and is ranked (#21) Scenario 3 - RISE is ranked (#23) the bottom of Tier 2 above the Bonus Nicole Granata motioned to vote on the three scenarios.19 votes for scenario one, 3 votes for scenario two, 20 votes for scenario three. A second vote was motioned by Karl Bertrand to vote between scenario 1 & 3 Scenario 1 passed on a 22-20 vote. RISE will be placed at the bottom of Tier 1 and ranked (#20). Jim Coughlin motioned to have Westhab RA SRO funding reallocated to First Steps. All in favor, zero opposed.

Follow-up	<ul style="list-style-type: none"> • Annette Peters-Ruvolo will look into whether service providers will be provided with project rankings on a bi-annual basis.
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Meeting was adjourned at 10:53am.

Respectfully submitted: Annette Peters-Ruvolo & Jeffrey Worden

Date: 08/02/2019

Next Meeting:

Date: 8/14/19 (tentative – to be determined this week)

Time 9:30am

Location: DCMH, 112 East Post Rd, Room 217

Westchester County Continuum of Care Partnership for the Homeless

FY2019 Process for Reallocation

For FY2019, the Westchester County CoC used the Reallocation process to reallocate funding from lower performing projects to create new higher performing projects.

Projects were ranked based on the Performance Measure criteria contained in the Ranking and Review Process approved by the CoC Board on July 31, 2019.

All 23 CoC projects appearing on the HUD Grant Inventory Worksheet (GIW) and eligible for renewal were ranked based on those Performance Measure criteria.

The results of the Project Ranking based on those criteria were discussed by the CoC Board on August 2, 2019. At that meeting, the CoC Board reviewed all renewal projects, and weighing the priorities of the CoC as well as HUD's priorities outlined in the FY2019 CoC NOFA, decided to reallocate the one (1) project out of 23 renewals - comprising \$45,158 total ARA - with the rank #22 out of 23 based on the Performance Measures.

This project is:

Rank 22 (Score 45.64 out of 85): **Westhab RA SRO (\$45,158 ARA)** Permanent Supportive Housing project.

Recipient: Municipal Housing Authority for the City of Yonkers

The Westchester CoC Board decided to reallocate the low performing Westhab RA SRO project with rank #22 rather than the low performing Stepping Stones project with rank #23 because Stepping Stones is Transitional Housing with the target population Youth ages 18-24, which is considered a priority population both nationally by HUD and locally by the Westchester Continuum of Care.

The CoC actively encouraged new and existing providers to apply for new projects through reallocation. Westchester County DSS (an existing provider) requested that reallocated funds be used to create an expansion project for the renewal First Steps PSH project because First Steps was the highest ranked renewal housing project.

The CoC Board approved this request on 08/02/19. Reallocation to First Steps expansion was determined to be the most efficient use of funds as this project serves the priority target population of youth experiencing homelessness.


In addition, First Steps was the highest ranked renewal housing project (score 69.44 out of 85).

Westchester County CoC therefore reallocated funds from a lower ranked housing project (#22 out of 23) into an expansion of the highest ranked housing project.

The Recipient agency was notified in writing of the reallocation by the CoC Board on August 2, 2019.

The Westchester County CoC Board believes that the reallocated funding from this low performing project will better serve the homeless population of Westchester County by providing funding to expand the high performing First Steps PSH project.

x



Spiegel, Yoav

From: Peters-Ruvolo, Annette
Sent: Tuesday, September 24, 2019 11:29 AM
To: laura c; Allison McSpedon; Allissa Cloer; Andrea Molina; Angelica Hinojosa; Angelina Diaz; Austin, Dahlia; Bernal, Percio; cabel@mercy.edu; Caldara, Lucian; Carbone, Christine; Carole Troum (ctroum@hope-cs.org); Cassandra Rajcumar-Kendall (crkendall@voa-gny.org); Christopher Fuentes; Christopher Kelly; cory@thesharingcommunity.org; Cynthia Knox (cynthiaknox@chhop.org); Dan Morea; Daniel Griffin; Daniel Ivey; DeAmario, Jeffrey(DCMH); Diana Drysdale (diana@chhop.org); Diego Hernandez (dhernandez@hope-cs.org); Elissa Ramos; Felicia Ramos-Witherspoon; Glazer, Joseph; Gordon Albert; James Coughlin; Jessica Berlin; Joga, Alejandro; Josh Gaccione; Julie Irwin; Karen Dunkley; KBertrand@programdesign.com; Kevin McGill; Kingsley, David; Knighton, Lili; kyron dawkins; LAMosley@aol.com; Latonya Heyward; Imcfarlane@cvrnewyork.com; Lou Navarro; Marek Bienkowski; Michael Chagas (mchagas@hope-cs.org); Morton, Deborah; Nadine Burns-Lyons; Nancy Pollock; Norvelle Brandon; 'Patterson-Howard Shawyn'; Paul Stolz; Rene Jenkins; Sean McGrail; Sean Shaw (seandeeshaw@gmail.com); Sirotkin, Joanne N.; Spiegel, Yoav; Tom Richter; Blanca P. Lopez; Daniel Gore; Edwards, Desh; Elizabeth McCorvey (frcecm@aol.com); Freda Macon; Giuliano, Mark; John, Christopher; joseph shuldiner; Kathy Halas; Labrusciano Joanne; Linda Puoplo (lpuoplo@whiteplainsny.gov); Marlene Zarfes; Mims, Patricia; Nicole Masucci; Orth, Michael; Sanchez, Dana; Winner, Jill; alba.guevara@yonkersny.gov; Amy Gelles (TGCW); Anahaita Kotval; Anthony Sabia; Barbara Bento-Fleming; Bolivar, Sylvia; Candice Kane; Catalano, Michael; Charlie Knight; Christopher Rivera; criminodoc@aol.com; dlockwood@lexingtonctr.org; Drummond, Norma; erikad@greyston.org; Frankel Helen; Gaffney,Danielle; ggalatioto@mhacy.org; Jeff Worden (jworden@programdesign.com); Joe Kenner; 'Karlyn Jackson'; kathy pandekakes; Krukiel, May; Lakia Perkins; Landry, Michele; 'Larry Mosley'; Lindau, Jane; Lockhart, Reginald; Manzione, Susan; 'Maria McGinty'; Maria McGinty (mmcginty830@gmail.com); Michelle Gonzalez YWCA Yonkers; Nicole Granata (ngranata@hdsu.org); Okarter, Chantelle; Richards, Malika; Rita Liegner; Ruthanne Becker (beckerr@mhawestchester.org); Smith, Kevin; Tajae Gaynor; Tarchoun, Jomarie; 'Tisne Suzanne'; Walt Ritz; Wong, Craig; Aloma Washington (awashington@lexingtonctr.org); Angelica Valentine; Chebbak,Evelyn; CWilliams@LiftingUpWestchester.org; Hammond, Deborah; Jesse Johnson; Jodi Sawyer; Joey Salerno; Karola Gonzalez; 'Kellogg Millie'; Orlando Acevedo; Patricia.Vitelli@westhab.org; Poovappallil, Thomas; Sharon Dair; Skinner, Jane; Stephanie Viola; Taylor, Elizabeth; tlawrence-bell@theguidancecenter.org; Vanessa Panico (VPanico@LiftingUpWestchester.org); KYamin@clusterinc.org; samiltons@providencehouse.org; Amie Morganbesser (amorganbesser@pathstone.org); Antoine Lovell (alovell@childrensvillage.org); Ashley Brody (abrody@searchforchange.com); Berman Seth; Cabaleiro, MaryKate; Carla Horton; CHHOP care workers (chhop@chhop.org); Conner, Kenyatta; David Gerber; Debbie Haglund (Debbie@a-homehousing.org); Diane Adler; dperkins@chigrants.org; Elizabeth Jeffrey; Hauck, Lauren; Italiano, Maureen; jessica balmir (jbalmir@ywcaawpcw.org); Jordana Lorenzo; Julian Paul Babb (JBabb@svwsjmc.org); Laurie Orfe (lorfe@montefiore.org); Lori Stanlick; Mel Tanzman; Melvin Berger (melvinoberger@aol.com); Relkin, Abbie; Richard Yao; Tara Klein WIHD; Tina Cornish-Lauria (CareersforPeople@aol.com); tlaud@helpusa.org; Deborah Williams; Diane Tukman; Jessica Grimm (jgrimmmove@gmail.com); Jessica Tannenbaum; Karel Amaranth; Lauren Shaller; Maria Imperial; Quattrocchi, Patricia; Ricardo Torres; Schlaff, Robin (OFW)
Subject: re: WC CoC FY2019 HUD Application - Posting for Public Review
Importance: High

Good morning,

The NY-604 Westchester County FY2019 CoC Application and FY2019 CoC Priority Listing have been posted to the Westchester CoC website:

<https://www.wcochomeless.org/fy2019-applications>

The Application and Priority Listing are posted under the heading “FY2019 NY-604 Application Documents”

Please distribute this public notice as widely as possible to any and all interested parties.

If you have any questions or concerns, please contact me **and** Yoav Spiegel at apr5@westchestergov.com and yqs2@westchestergov.com BEFORE 12pm on Friday, 09/27/19.

The deadline for submission to HUD is 8pm on Monday, 9/30/19.

We plan to submit Friday afternoon before 5pm.

Thank you for your continued support of the Westchester County CoC Partnership for the Homeless and I apologize for duplicates.

Annette M. Peters-Ruvolo, LCSW
Program Director, Community Support Services
Westchester County Department of Community Mental Health
112 East Post Road, 2nd Floor
White Plains, NY 10601
914-995-5278
914-995-6220 (fax)

LINKAGE AGREEMENT
between the
Yonkers Workforce Development Board
and
The Westchester County Continuum of Care Partnership for the Homeless

Purpose

This Linkage Agreement between the Yonkers Workforce Development Board (YWDB) and the Westchester County Continuum of Care Partnership for the Homeless (WCCoC) is developed to facilitate the linkage of Westchester County's homeless individuals and families to the training and technical assistance services provided by the YWDB.

Background

WCCoC is the public-private partnership responsible for planning and coordinating all homeless resources and services for homeless families and individuals in Westchester. It administers \$19 million in annual HUD funding and helps coordinate tens of millions more in other county, state, local and private funding. Westchester's 2019 Homeless Point-In-Time Count identified close to 1,000 homeless households with over 1,800 family members.

The Yonkers Workforce Development Board (YWDB) oversees the strategic planning and coordination of all workforce development programs funded through the Department of Labor's Workforce Innovation and Opportunity Act. The Yonkers Workforce Development Board, through the Yonkers Office of Workforce Development, provides One-Stop access to employment services for both job seekers and local employers. It works with the private sector, government and educational institutions, community based organizations and other agencies associated with the employment and training community to form a seamless network. Its goal is to deliver effective workforce development services to the citizens of Yonkers. Homeless individuals are categorically eligible for YWDB programming, and will be prioritized for access to employment and/or education/training opportunities whenever possible.

Agreement

WCCoC will ensure that all of the housing programs participating in its CoC planning process are aware of the YWDB's training and technical assistance programs and will encourage referrals. The YWDB will facilitate these referrals to the extent possible to reach our shared goal of helping participants achieve financial self-sufficiency.

Signed by:



Sean McGrail

Executive Director

Yonkers Workforce Development Board

Date: 9/20/2019



Annette Peters-Ruvolo

Co-Chair

Westchester County Continuum of Care
Partnership for the Homeless

Date: 9/20/19

George Latimer
County Executive

Department of Social Services

Kevin M. McGuire
Commissioner

September 20, 2019

Annette Peters-Ruvolo, LCSW
Westchester County Continuum of Care
112 East Post Road
White Plains, NY 10601

Dear Ms. Peters-Ruvolo:

On behalf of the Westchester-Putnam Workforce Development Board (WPWDB), this letter serves to document the commitment of the WPWDB to provide Westchester County's individuals and families experiencing homelessness with training and technical assistance services. These services are delivered with the intention of increasing income and helping individuals and families move towards self-sufficiency.

The WPWDB will continue to work collaboratively with the Westchester County CoC Partnership for the Homeless ("WCCoC") and their member agencies to identify individuals and families eligible for services. As you are aware, the WPWDB works with the private sector, government and educational institutions, community based organizations and other agencies associated with the employment and training community, to form a seamless network. The WPWDB has developed a partnership with economic development agencies, business organizations, educational institutions, community based organizations and other workforce development agencies through Putnam and Westchester counties to develop a One Stop service delivery system. This system consists of One Stop Career Centers, core and satellite offices through which both businesses and job seekers may access an extensive array of services. Its goal is to deliver the most extensive workforce development services to the citizens of Westchester County.

We look forward to continuing our relationship with the WCCoC to ensure that all WCCoC member agencies are aware of the WPWDB's training and technical assistance programs. The WPWDB is committed to assisting homeless and formerly homeless people to move towards self-sufficiency and move beyond public assistance.

Sincerely,


Kevin M. McGuire
Commissioner

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Signed by:



Sean McGrail

Executive Director

Yonkers Workforce Development Board

Date: 9/20/2019



Annette Peters-Ruvolo

Co-Chair

Westchester County Continuum of Care
Partnership for the Homeless

Date: 9/20/19

George Latimer
County Executive

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September 20, 2019

Annette Peters-Ruvolo, LCSW
Westchester County Continuum of Care
112 East Post Road
White Plains, NY 10601

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Sincerely,


Kevin M. McGuire
Commissioner



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

An Examination of Racial Equity Within
Westchester's Continuum of Care
February 2019

Abstract

Each CoC has unique circumstances impacting their homeless populations. The CoC Racial Equity Analysis Tool was created to help facilitate the analysis of racial disparities among people experiencing homelessness. The U.S Department of Housing and Urban Development (HUD) considers this analysis to be a critical first step in identifying and changing racial and ethnic bias in their systems and services.¹

The tool illustrates racial and ethnic inequities across three populations; all people in poverty, youths experiencing homelessness, and veterans experiencing homelessness. The HUD Racial Equity's Analysis Tool identified the presence of large racial and ethnic disparities when comparing all people living in poverty to persons experiencing homelessness that were beyond the impact of poverty alone.

Methodology

The CoC Racial Equity Analysis Tool utilizes multiple data sources. The number of people experiencing homelessness represented in this tool is drawn from the 2017 Point-In-Time (PIT) Count data reported in the Annual Homeless Assessment Report (AHAR) to the U.S Congress. PIT Counts are unduplicated 1-night estimates of sheltered and unsheltered homeless populations conducted by CoCs nationwide during the last week of January each year.¹

In this analysis persons who are experiencing sheltered homelessness are defined as “an individual or family living in a supervised publicly or privately-operated shelter designed to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals,” as defined at 24 CFR 578.3 of the Homeless Definition Final Rule.¹

People who are experiencing unsheltered homelessness are defined as” an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park abandoned building, bus or train station, airport, or camping ground,” as defined at 24 CFR 578.3 of the Homeless Definition Final Rule.¹

The distributions of people living in poverty by race and ethnicity are sourced from the American Community Survey (ACS) 2011-2015 5-year estimates. The ACS is an ongoing survey by the U.S. Census Bureau that gathers information previously contained only in the long form of the decennial census. CoC level estimates were calculated from ACS Block Group (BG) estimates along with a BG-to-CoC crosswalk which were created based on ArcGIS mapping software.¹

Individuals are counted as being in poverty if they are part of a household whose total annual income is less than the poverty threshold. Threshold levels are set by household size but are not adjusted by location. For this reason, the impact of poverty on housing affordability varies from community to community. At the time that this report was created; data was unavailable for the number of people living in poverty by age, and veteran status.

Results

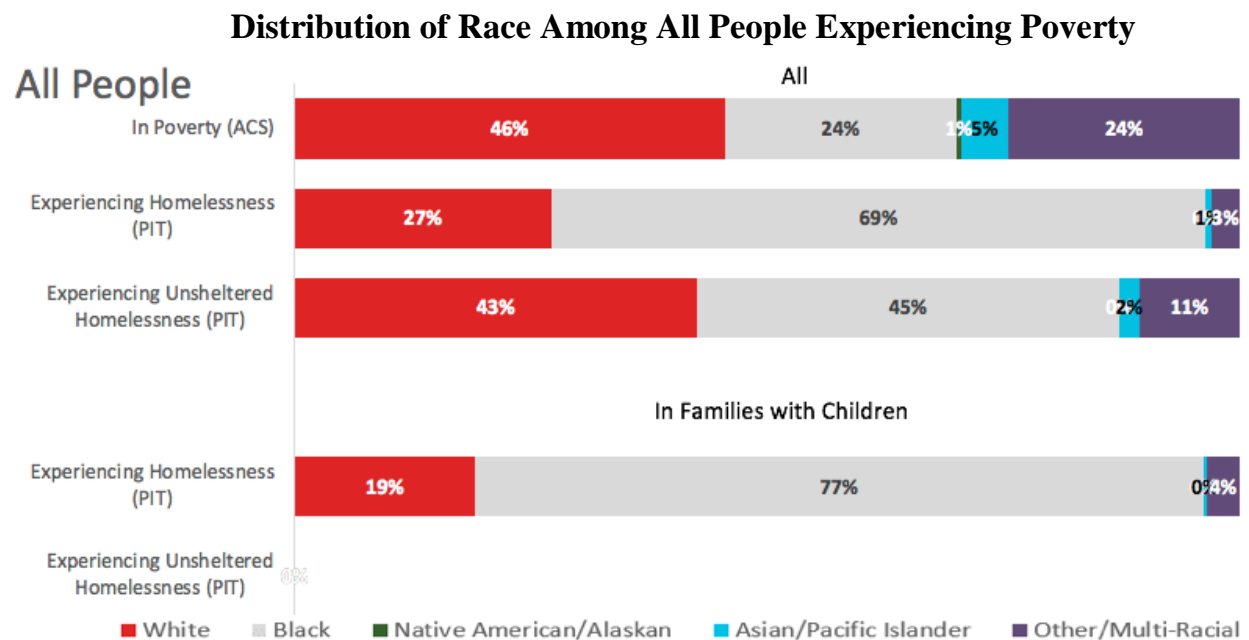


Figure 1. Distribution of race across all people living in poverty, persons experiencing homelessness, persons experiencing unsheltered homelessness, and in families with children experiencing homelessness.

The first bar chart (figure 1.) shows racial distributions for the Westchester CoC for all people living in poverty, persons experiencing homelessness, and persons experiencing unsheltered homelessness. By comparing racial distributions between persons experiencing

homelessness and persons experiencing poverty, we were able to identify racial disparities in homelessness that poverty alone cannot account for.

When reading the chart above, we see that 24% of all people living in poverty identified as Black in the 2011-2015 ACS. We also see that 69% of people experiencing homelessness in the 2017 Point-In-Time Count identified as Black. This demonstrates a large racial disparity in homelessness, beyond the impact of poverty.

When evaluating the percentage of families with children experiencing homelessness for Westchester's CoC, we see that 77% of families with children are Black compared to 19% identifying as White, 4% identifying as Multiracial, and <1% Asian/Pacific Islander. When comparing the percentage of families with children who are experiencing homelessness to the percent of estimated people in poverty, we see a greater disparity. While 24% of all people living in poverty identified as Black; 77% of families with children who were experiencing homelessness during the 2017 PIT Count identified as Black.

A figure was not generated depicting the racial demographics of families with children experiencing unsheltered homelessness because no families with children were identified during the 2017 Westchester's CoC Point-In-Time Count.

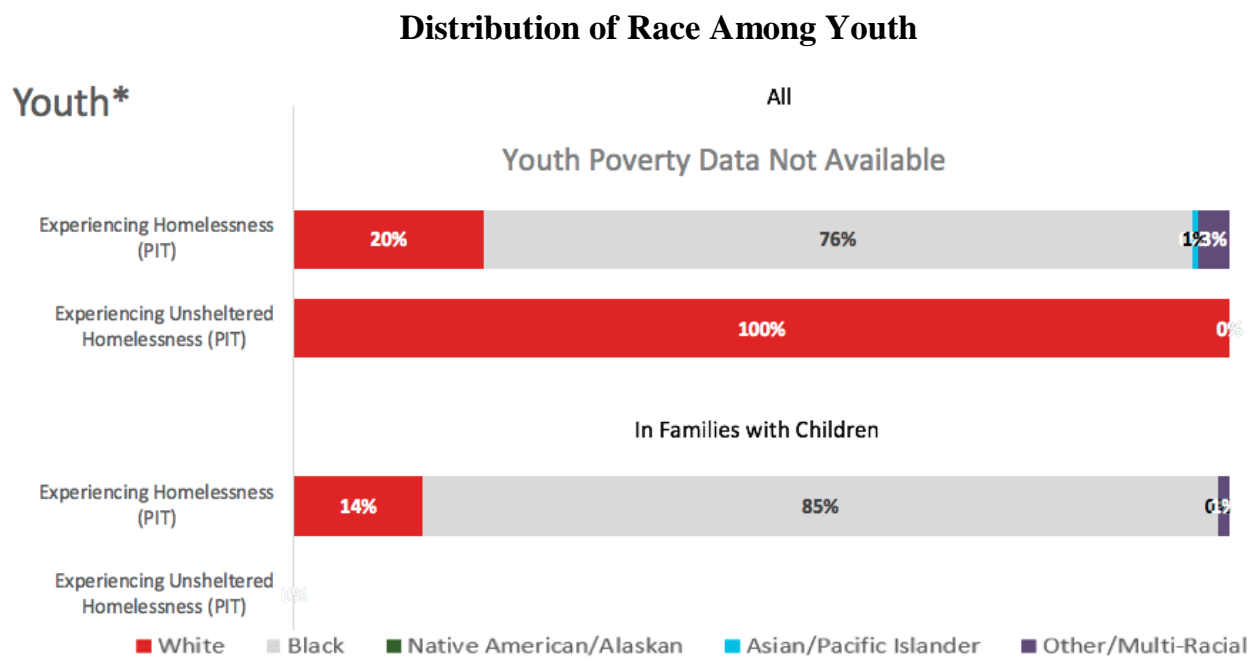


Figure 2. Distribution of race within youths who identified as experiencing homelessness, youths experiencing unsheltered homelessness, and in parenting youth (families with children experiencing homelessness).

This second bar chart (figure 2.) illustrates a racial breakdown of individual's who were identified during the 2017 PIT Count as "Youths". Youths are individuals under the age of 25 who are unaccompanied by a parent. Racial distributions were computed for youths who were experiencing homelessness, unsheltered homelessness, and parenting youth (youth in families with children) experiencing homelessness.

As noted at the top of figure 2; ACS youth poverty data was not available at the time of this report. For this reason, we were unable to compare the racial demographic percentages of individuals or families experiencing homelessness in this age group to the racial demographics of those in poverty. This graphic is only representative of the racial demographics for youth, and parenting youth who were experiencing homelessness during the night of the 2017 PIT Count. The racial demographics of youths identified as experiencing homelessness the night of the 2017 PIT count are as follows; 20% identified as White, 76% identified as Black, 3% as Other/Multi-Race, and 1% as Asian.

The 2017 PIT Count did not result in the identification of parenting youth experiencing unsheltered homelessness. However, the 2017 PIT Count data does indicate the racial demographics of parenting youth who were experiencing homelessness. As shown above; 85% of parenting youth who were experiencing homelessness identified as Black, 14% as White, and 1% as Other/Multi-Race.

It should also be noted that only two individuals were identified as being under the age of 25 unaided by a parent and experiencing unsheltered homeless during the 2017 PIT Count. Both individuals identified as White (100%). This racial disparity should be interpreted with caution. A larger sample size is needed to generate more precise estimates of the racial demographics of youth experiencing unsheltered homelessness in Westchester County, NY.

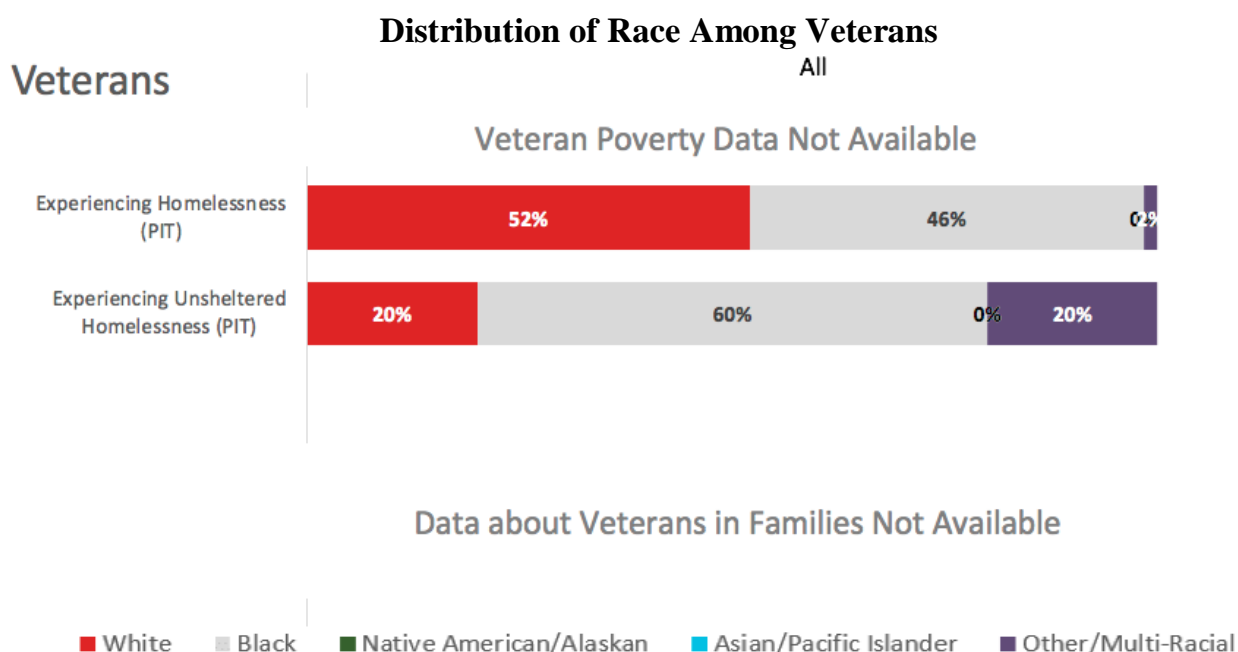


Figure 3. Distribution of race within veterans who identified as experiencing homelessness and unsheltered homelessness.

As notated at the top of Figure 3; ACS veteran poverty data was not available at the time of this report. For this reason, we were unable to compare the racial demographic percentages of veterans experiencing homelessness to the racial demographics of those in poverty. This Veteran data is only representative of the racial demographics of veterans who were experiencing homelessness during the night of the 2017 PIT Count. Data regarding Veterans in families was also not available during the time this report was generated.

52% of veterans experiencing homelessness identified as White, 46% as Black, and 1% as Other/Multi-race. Five individuals reported experiencing unsheltered homelessness; three of which identified as Black (60%), one as White (20%), and one as Other/Multi-Race (20%). The racial distribution shown between veterans experiencing unsheltered homelessness should be interpreted with caution due to the small sample size (n=5).

Distribution of Ethnicity Among All People Experiencing Poverty

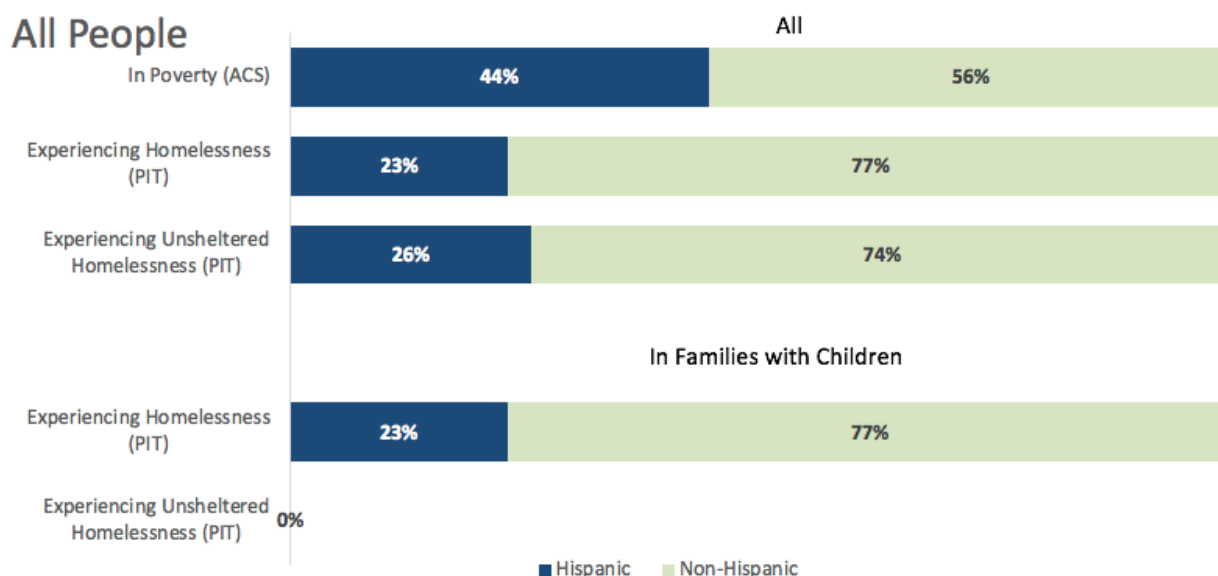


Figure 4. Distribution of ethnicity across all people living in poverty, persons experiencing homelessness, persons experiencing unsheltered homelessness, and in families with children experiencing homelessness.

Figure 4 illustrates ethnic distributions for the Westchester CoC for all persons living in poverty, persons experiencing homelessness, persons experiencing unsheltered homelessness, and in families with children experiencing homelessness. By comparing the ethnic distributions between persons experiencing homelessness and persons experiencing poverty, we were able to identify ethnic disparities in homelessness that poverty alone cannot account for.

When reading the chart above, we see that 56% of all people living in poverty identified as Non-Hispanic in the 2011-2015 ACS. We also see that 77% of people experiencing homelessness in the 2017 Point-In-Time Count identified as Non-Hispanic. This demonstrates an ethnic disparity in homelessness, beyond the impact of poverty.

When evaluating the percentage of families with children experiencing homelessness for Westchester's CoC, we see that 77% of families with children are Non-Hispanic compared to 23% identifying as Hispanic. When comparing the ethnic percentages of families with children who are experiencing homelessness to the ethnic percentages of all people estimated in poverty, we see a similar disproportion (77% Non-Hispanic vs 23% Hispanic).

No figures were generated to depict the ethnic demographics of families with children experiencing unsheltered homelessness because no families with children were identified during the 2017 Westchester's CoC Point-In-Time Count.

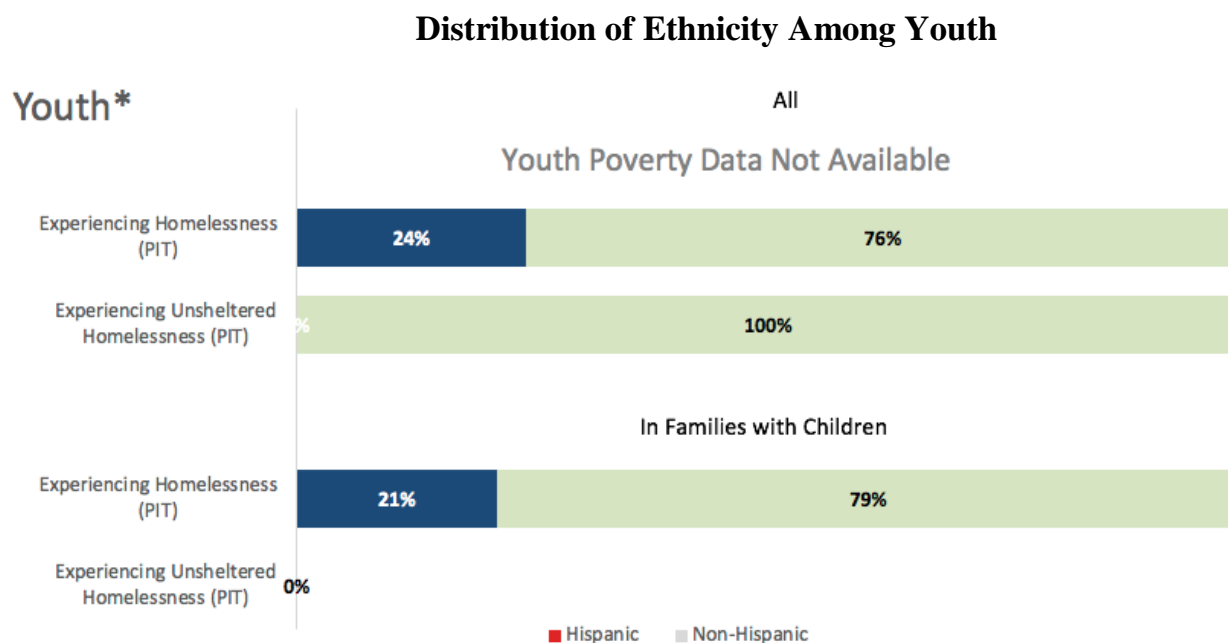


Figure 5. Distribution of ethnicity within youths who identified as experiencing homelessness, youths experiencing unsheltered homelessness, and in parenting youth (families with children experiencing homelessness).

Figure 5 illustrates ethnicity data for youths who were identified as homeless, unsheltered homeless, and as parenting youth (youth in families with children) experiencing homelessness. Due to ACS youth poverty data being unavailable; the figure above is only representative of ethnicity data for youth, and parenting youth who were experiencing sheltered or unsheltered homelessness during the night of the 2017 PIT Count.

The 2017 PIT Count data indicates that 76% of youth's experiencing homelessness in Westchester County identified as Non-Hispanic. Likewise, 24% of youths identified as Hispanic. Once again, it should also be noted that only two individuals were identified as being under the age of 25 unaided by a parent and experiencing unsheltered homeless during the 2017 PIT Count. Both individuals identified as Non-Hispanic (100%).

As mentioned previously, the 2017 PIT Count did not result in the identification of parenting youth experiencing unsheltered homelessness. However, the 2017 PIT Count data does indicate the ethnic demographics of parenting youth who were experiencing homelessness. As shown above; 79% of parenting youth who were experiencing homelessness identified as Non-Hispanic, and 21% as Hispanic.

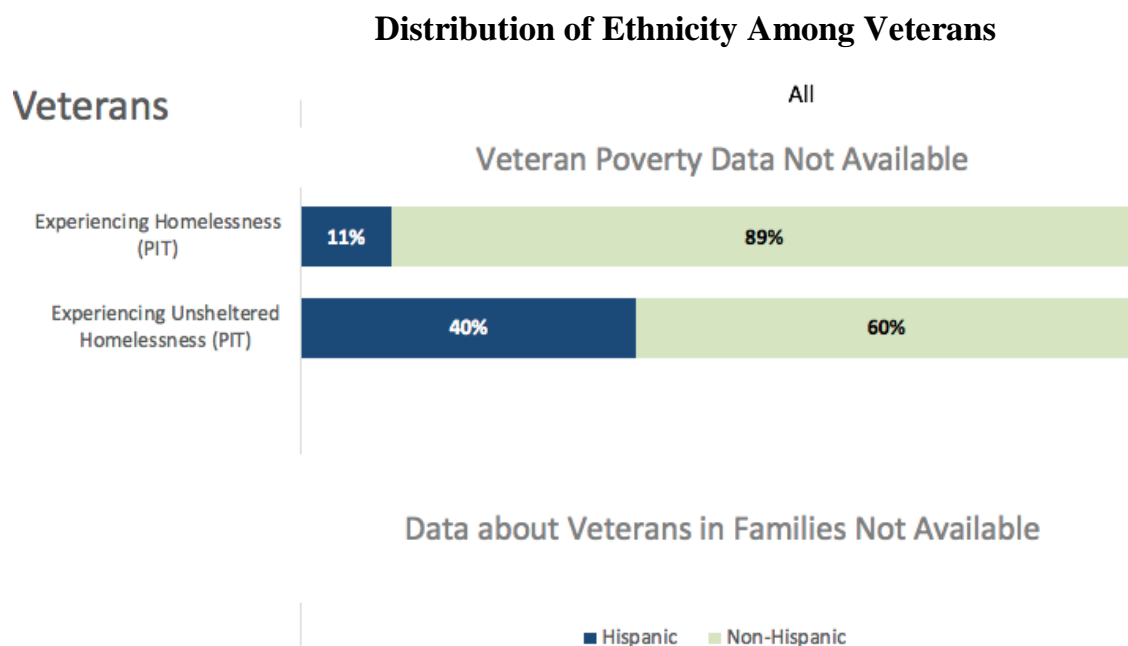


Figure 6. Distribution of ethnicity within veterans who identified as experiencing homelessness and unsheltered homelessness.

As previous stated; the ACS veteran poverty data was not available. For this reason, we were unable to compare the ethnic demographic percentages of veterans experiencing homelessness to the ethnic demographics of those in poverty. Data regarding Veterans in families was also not available during the time this report was generated.

Figure 6 represents the ethnic demographics of veterans who were experiencing homelessness during the night of the 2017 PIT Count. 11% of veterans experiencing homelessness identified as Hispanic, and 89% as Non-Hispanic. With regards to the number of Veterans who were experiencing unsheltered homelessness; 60% identified as Non-Hispanic, and 20% identified as Hispanic. The ethnic distribution shown between veterans experiencing unsheltered homelessness should be interpreted with caution due to the small sample size (n=5).

Limitations

The race categories used in this analysis may not accurately reflect the racial identities and lived experiences of all surveyed individuals. However, the availability of this data provides a starting place to examine racial disparities in each CoC.

Another limitation is that the race data for families with children who were experiencing homelessness is based on the racial identity of the head of household. This is a proxy and may not accurately represent the racial identity of all household members.¹

Lastly, PIT Count data is not perfect, and the unsheltered count is particularly challenging. PIT data may include duplications of counts due to multiple encounters, however it is more likely that PIT data is an undercount, due to not all homeless households being identified. Staffing, weather, and geography all have an impact on the data. Nevertheless, PIT Count Data is an important indicator to consider, and our best available estimate of rates of homelessness in a given community.¹

Conclusion

Racial and ethnic disparities are driven by a complex array of inequities within systems and social dynamics such as; biases and prejudices, overt discrimination, systemic and institutional racism, and many others. All of these factors impact how our community responds to homelessness, and collectively causes and creates homelessness throughout Westchester County.²

The HUD Racial Equity's Analysis Tool identified the presence of large racial and ethnic disparities in experiences of homelessness that were beyond the impact of poverty alone. The data provided in this analysis coincides with countrywide data showing minority groups experiencing homelessness at higher rates than Whites, and therefore making up a disproportionate share of the homeless population.³

Continuums of Care can't, by themselves, solve all of the dynamics and forces that create the disparities, however further examining our data and policies practices can address racial and ethnic inequities more intentionally and comprehensively.² Below are a few questions that should be considered as we continue to address disparities within Westchester County's CoC.²

References

- 1) U.S. Housing and Urban Development. [CoC Analysis Tool: Race and Ethnicity](#). Date Published: December 2018.
- 2) United States Interagency Council on Homelessness (USICH). [How to Start Addressing Racial Disparities in your Community](#). Published: July 9th 2018.
- 3) National Alliance to End Homelessness. [Racial Disparities in Homelessness in the United States](#). Published: June 6th 2018.

HUD Recommended Discussion Questions¹:

- 1) How does your CoC compare to state numbers? Are any racial groups over or under represented among the homeless population in your CoC?
- 2) Are there specific local or state conditions that might lead to these differences?
- 3) In PIT counts, are there significant differences between sheltered and unsheltered counts as far as over or under representation? Why might that be?
- 4) Are there differences in families and individuals in terms of racial distribution?
- 5) What does youth data look like compared to all households? What about youth in families with children?
- 6) What about veterans in your community? What do you know about your own community that gives context to the data?

Other Questions to Consider²:

- What current data points are most instructive?
- What other questions should we all be asking of our data to better understand access, service provision, and outcomes?
- What does the data tell us about the who is entering our system?
- What training do we need to better understand these dynamics, analyze data accordingly and make recommendations?
- Do our policies address and meet the needs of people of color?

Appendix

New York State Data

Race and Ethnicity	All (ACS) ¹				In Poverty (ACS) ¹				Experiencing Homelessness (PIT) ²			
	All		In Families with Children		All		In Families with Children		All		In Families with Children	
	#	%	#	%	#	%	#	%	#	%	#	%
All People	19,668,538		15,728,172		3,005,943		2,181,168		89,503		52,113	
Race												
White	12,700,000	65%	9,922,131	63%	1,404,979	47%	917,251	42%	19,894	22%	9,939	19%
Black	3,070,392	16%	2,458,956	16%	691,900	23%	519,516	24%	61,463	69%	38,047	73%
Native American/Alaskan	74,793	0%	60,630	0%	19,805	1%	15,246	1%	729	1%	470	1%
Asian/Pacific Islander	1,570,223	8%	1,334,863	8%	278,136	9%	213,247	10%	2,247	3%	1,279	2%
Other/Multi-Racial	2,253,130	11%	1,951,592	12%	611,123	20%	515,908	24%	5,170	6%	2,378	5%
Ethnicity												
Hispanic	3,619,658	18%	3,108,717	20%	917,179	31%	757,257	35%	29,408	33%	19,558	38%
Non-Hispanic	16,048,880	82%	12,619,455	80%	2,088,764	69%	1,423,911	65%	60,095	67%	32,555	62%
Youth <25	6,237,379		NOT AVAILABLE		1,331,958		NOT AVAILABLE		5,849		3,020	
Race												
White	3,670,002	59%	--	--	579,545	44%	--	--	1,411	24%	613	20%
Black	1,086,972	17%	--	--	319,878	24%	--	--	3,986	68%	2,163	72%
Native American/Alaskan	28,027	0%	--	--	9,209	1%	--	--	42	1%	20	1%
Asian/Pacific Islander	473,862	8%	--	--	109,428	8%	--	--	144	2%	52	2%
Other/Multi-Racial	978,516	16%	--	--	313,898	24%	--	--	266	5%	172	6%
Ethnicity												
Hispanic	1,436,647	23%	--	--	444,229	33%	--	--	1,859	32%	1,117	37%
Non-Hispanic	4,800,732	77%	--	--	887,729	67%	--	--	3,990	68%	1,903	63%
Veterans	828,586		NOT AVAILABLE		NOT AVAILABLE		NOT AVAILABLE		1,244		NOT AVAILABLE	
Race												
White	697,525	84%	--	--	--	--	--	--	542	44%	--	--
Black	89,220	11%	--	--	--	--	--	--	651	52%	--	--
Native American/Alaskan	2,968	0%	--	--	--	--	--	--	9	1%	--	--
Asian/Pacific Islander	10,127	1%	--	--	--	--	--	--	7	1%	--	--
Other/Multi-Racial	28,746	3%	--	--	--	--	--	--	35	3%	--	--
Ethnicity												
Hispanic	57,847	7%	--	--	--	--	--	--	175	14%	--	--
Non-Hispanic	770,739	93%	--	--	--	--	--	--	1,069	86%	--	--

Sources:

¹ American Community Survey (ACS) 2011-2015 5-yr estimates; Veteran CoC data comes from the ACS 2015 1-yr estimates; Total youth in the American Community Survey is a rollup of race estimates of all persons under 25.

² Point-In-Time (PIT) 2017 data

Note: Race estimates of individuals in families with children are based on the race of the householder.

Table 1. Racial and Ethnic distributions for New York state, those in poverty, and persons experiencing homelessness, with a breakout of families with children.

Westchester CoC Data

Race and Ethnicity	All (ACS) ¹				In Poverty (ACS) ¹				Experiencing Homelessness (PIT) ²				Experiencing Sheltered Homelessness (PIT) ²				Experiencing Unsheltered Homelessness (PIT) ²			
	All		In Families with Children		All		In Families with Children		All		In Families with Children		All		In Families with Children		All		In Families with Children	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
All People	967,315		816,196		90,752		65,946		1,832		1,163		1,785		1,163		47		0	
Race																				
White	644,076	67%	552,493	68%	41,308	46%	30,017	46%	497	27%	222	19%	477	27%	222	19%	20	43%	0	0%
Black	139,500	14%	110,607	14%	22,205	24%	16,136	24%	1,269	69%	896	77%	1,248	70%	896	77%	21	45%	0	0%
Native American/Alaskan	3,691	0%	2,701	0%	479	1%	348	1%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Asian/Pacific Islander	55,240	6%	49,826	6%	4,544	5%	3,282	5%	10	1%	4	0%	9	1%	4	0%	1	2%	0	0%
Other/Multi-Racial	124,808	13%	100,569	12%	22,216	24%	16,164	25%	56	3%	41	4%	51	3%	41	4%	5	11%	0	0%
Ethnicity																				
Hispanic	225,366	23%	190,817	23%	40,221	44%	29,227	44%	423	23%	267	23%	411	23%	267	23%	12	26%	0	0%
Non-Hispanic	741,949	77%	625,379	77%	50,531	56%	36,719	56%	1,409	77%	896	77%	1,374	77%	896	77%	35	74%	0	0%
Youth <25	308,057		NOT AVAILABLE				148		80		146		80		2		0			
Race																				
White	189,174	61%	--	--	--	--	--	--	30	20%	11	14%	28	19%	11	14%	2	100%	0	0%
Black	47,152	15%	--	--	--	--	--	--	112	76%	68	85%	112	77%	68	85%	0	0%	0	0%
Native American/Alaskan	1,343	0%	--	--	--	--	--	--	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Asian/Pacific Islander	15,364	5%	--	--	--	--	--	--	1	1%	0	0%	1	1%	0	0%	0	0%	0	0%
Other/Multi-Racial	55,024	18%	--	--	--	--	--	--	5	3%	1	1%	5	3%	1	1%	0	0%	0	0%
Ethnicity																				
Hispanic	91,249	30%	--	--	--	--	--	--	36	24%	17	21%	36	25%	17	21%	0	0%	0	0%
Non-Hispanic	216,808	70%	--	--	--	--	--	--	112	76%	63	79%	110	75%	63	79%	2	100%	0	0%
Veterans	66,757		NOT AVAILABLE				121		NOT AVAILABLE		116		NOT AVAILABLE		5		100%		NOT AVAILABLE	
Race																				
White	51,019	76%	--	--	--	--	--	--	63	52%	--	--	62	53%	--	--	1	20%	--	--
Black	11,495	17%	--	--	--	--	--	--	56	46%	--	--	53	46%	--	--	3	60%	--	--
Native American/Alaskan	0	0%	--	--	--	--	--	--	0	0%	--	--	0	0%	--	--	0	0%	--	--
Asian/Pacific Islander	0	0%	--	--	--	--	--	--	0	0%	--	--	0	0%	--	--	0	0%	--	--
Other/Multi-Racial	4,243	6%	--	--	--	--	--	--	2	2%	--	--	1	1%	--	--	1	20%	--	--
Ethnicity																				
Hispanic	6,078	9%	--	--	--	--	--	--	13	11%	--	--	11	9%	--	--	2	40%	--	--
Non-Hispanic	60,679	91%	--	--	--	--	--	--	108	89%	--	--	105	91%	--	--	3	60%	--	--

Sources:¹ American Community Survey (ACS) 2011-2015 5-yr estimates; Veteran CoC data comes from the ACS 2015 1-yr estimates; Total youth in the American Community Survey is a rollup of race estimates of all persons under 25.² Point-In-Time (PIT) 2017 data**Note:** Race estimates of individuals in families with children are based on the race of the householder.

Table 2. The Westchester CoC Data table that is represented in the figures above, as well as additional details including; overall racial distribution in Westchester's CoC and racial distribution among persons experiencing sheltered homelessness.

Additional Resources

- [For more information on how poverty is measured](#)
- [For more information on the PIT Count and AHAR](#)
- [For more information on homelessness definitions](#)
- [For more information about the ACS](#)

Westchester County
Continuum of Care Partnership for the Homeless

3. identify the specific project(s) that will use the funding for this purpose (up to 10 percent of the CoC total awarded) by submitting an attachment to the CoC application in e-snaps that must include all the following:

a. project name(s) as listed on the CoC Priority Listing; and

b. amount of funding in the project or per project that will be used for this purpose.

Project Name	FY2018 Project Number	Amount of funding that will be used to serve Youth defined as homeless under other Federal statues	Total Funding	Percent
Stepping Stones	NY0864L2T041807	\$164,957.50	\$329,915	50%
The Refuge	NY0624L2T041810	\$53,500.50	\$107,001	50%
TOTAL		\$218,458 (1.17% of ARA)		



Westchester County Continuum of Care: 2019 Priorities for Emergency Solutions Grant

Adopted by the Board of the Westchester County Continuum of Care on September 18, 2019

Background:

24 CFR 578.7 details the responsibilities of each Continuum of Care mandated by the Department of Housing and Urban Development. Under 578.7 (c)(5) Continuum of Care planning, HUD requires each CoC to “[Consult] with State and local government Emergency Solutions Grants program recipients within the Continuum’s geographic area on the plan for allocating Emergency Solutions Grants program funds”.

General Requirements:

All ESG recipients within the Westchester County Continuum of Care geographic area are expected to work collaboratively to coordinate funding that addresses the needs of the entire continuum.

The Westchester CoC implemented a Coordinated Entry system beginning December 2017. Homeless persons in Coordinated Entry are assessed for severity of need, length of time homeless, and specific disabilities & barriers. The Coordinated Entry Administrator then identifies the type of housing assistance appropriate to each household and refers homeless to available beds in priority order so that those with highest needs and length of time homeless are housed first.

HUD and the Westchester Continuum of Care require that all ESG projects providing Homelessness Prevention and Rapid Re-housing participate in Coordinated Entry, using the guidelines, assessment tools, and procedures established by the Board of the CoC.

The CoC expects that each ESG recipient and subrecipient provider agency within the Westchester County Continuum of Care geographic area will designate a staff member as a point of contact for Coordinated Entry staff.

ESG subrecipient agencies are required to have staff involved in the assessment, intake, referral, & transfer of clients; and attend Coordinated Entry training sessions offered by the Westchester CoC.

Funding Allocation Priorities:

The Board of the Westchester County CoC recommends that ESG recipients fund Homelessness Prevention activities during the next opportunity to distribute ESG funds within the Westchester County Continuum of Care geographic area. The rising cost of housing within Westchester has resulted in increased need for eviction prevention services including payment of rental arrears, short-medium term rental assistance, legal services, mediation, and credit repair.



WESTCHESTER COUNTY CONTINUUM
OF CARE PARTNERSHIP FOR THE
HOMELESS

c/o WC DCMH
112 East Post Road, 2nd Floor
White Plains, NY 10601
(914) 995-5220
(914) 995-6220 (fax)

Westchester County has lost significant capacity for **Street Outreach**; Therefore, ESG is identified as a significant source of new funding for these activities within the Westchester County Continuum of Care geographic area.

In addition, Westchester County CoC recommends that ESG recipients fund **Rapid Re-housing** projects with priority target participants those persons currently homeless and living in Transitional Housing for homeless persons. This population is eligible for Rapid Re-housing funded with ESG but is not currently eligible for Rapid Re-housing funded with Continuum of Care (which may only serve homeless households living on the streets, in emergency shelter, or fleeing domestic violence).

LINKAGE AGREEMENT

Early Childhood Services for Westchester County's Homeless Families

Purpose

This Linkage Agreement between the Westchester Community Opportunity Program, Inc. (WestCOP) and the Westchester County Continuum of Care Partnership for the Homeless (WCCoC) is developed to facilitate the linkage of Westchester County's homeless families to the early childhood services (Head Start and Early Head Start) services provided by WestCOP.

Background

WCCoC is the public-private partnership responsible for planning and coordinating all homeless resources and services for homeless families and individuals in Westchester. It administers \$19 million in annual HUD funding and helps coordinate tens of millions more in other county, state, local and private funding. Westchester's 2019 Homeless Point-In-Time Count identified close to 1,000 homeless households with over 1,800 family members. This included 389 families living with children under age 18. These 389 families had 729 children under the age of 18. The families were living in emergency or transitional housing provided by over two dozen distinct homeless housing programs, primarily in scattered-site housing units.

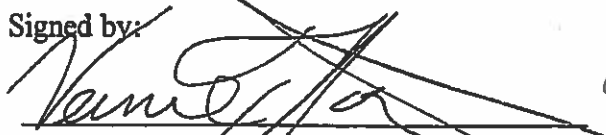
WestCOP's Early Childhood Program serves approximately 2,000 income-eligible children and families in 21 Head Start and Early Head Start centers throughout Westchester County. The centers offer several types of programs, which include a combination of 3.5 hour part-day or six-hour full-day Head Start, or 8.5 childcare, therapeutic classrooms, Universal Pre-Kindergarten, and after-school services. Homeless children are categorically eligible for Early Head Start and Head Start programs. A complete list of the centers, with addresses and contact information, is attached to this document.

The Head Start and Early Head Start programs provide comprehensive child development services for children from birth through four years old, and focuses on the goals of promoting social competence and school readiness for each child. Because Head Start believes that parents and families are a child's first and best teacher, partnerships with families are considered an important and integral part of the Head Start experience. Through these partnerships, parents are encouraged to become involved in all aspects of the Head Start program, become advocates for their children and themselves, and to pursue the life goals they have chosen. In addition to partnering with parents, WestCOP's Head Start program actively collaborates with a wide range of community agencies. These collaborations serve to ensure that resources are available for the children and families as they progress towards their goals.

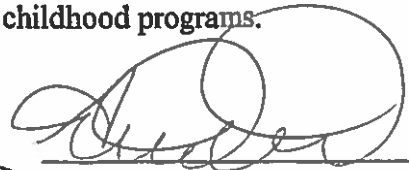
Agreement

WCCoC will ensure that all of the family housing programs participating in its CoC planning process are aware of WestCOP's early childhood programs. It will encourage each housing program to have its social workers refer homeless children under the age of 5 to Early Head Start or Head Start through WestCOP. WestCOP will facilitate these referrals to the extent possible whenever it has openings available in its early childhood programs.

Signed by:


Vernex Harding, Ms. Ed., SAS, SDA
Program Director, Early Childhood Education
Westchester Community Opportunity
Program

Date: 9.23.19.


Annette Peters-Ruvolo, LCSW
Co-Chair
Westchester County Continuum of Care
Partnership for the Homeless

Date: 9/23/19

LINKAGE AGREEMENT

Early Childhood Services for Westchester County's Homeless Families

Westchester Community Opportunity Program, Inc. Early Childhood Program Centers 2019	
Children's Center for Learning 95 Lincoln Avenue New Rochelle, NY 10801-3912 Phone: 632-0180 Fax: 632-0182	Aunt Bessie's Open Door Center 137 Union Avenue Peekskill, New York 10566-3445 Phone: 739-6368 or 737-9166
*Lois Bronz Children Center (Delegate) 30 Manhattan Avenue White Plains, New York 10607-1329 Phone: 761-6134 Fax: 761-5461	*Greenburgh Central #7 Early Childhood (Delegate) 475 West Hartsdale Avenue Hartsdale, New York 10530 -1367 Phone: 949-2745 Fax: 949-1548
Mt. Kisco Head Start 650 King Street – Rooms 103 & 104 Chappaqua, New York 10514 Phone: 861-9144 or 861-9145 Fax: 861-9146	Mamaroneck Child Development Center 134 Center Avenue Mamaroneck, New York 10543 -1804 Phone: 698-3131 Fax: 381-1801
Peekskill Head Start/Day Care Center 705 South Street Peekskill, New York 10566 Mailing Address: 137 Union Ave., Peekskill, NY 10566 Phone: 737-9166 Fax: 739-0681	Mt. Vernon CAG Day Care Center 250 South 6th Avenue Mount Vernon, New York 10550-3809 Phone: 664-8614 Fax: 664-8708
Port Chester Head Start & Therapeutic Nursery 17 Spring Street Port Chester, New York 10573-4509 Phone: 937-5863 Fax: 937-5289	Mt. Vernon Head Start 114 East 4th St. Mount Vernon, New York 10550-4251 Phone: 664-5098 Fax: 664-5151 Classrooms: 699-2557
St. Matthew's Head Start / Day Care Center 50 North Malcolm Street Ossining, New York, 10562-3242 Phone: 941-1715 Fax: 941-0308	Port Chester Children's Place 400 Westchester Avenue Port Chester, NY 10573-3604 Phone: 690-0860 Fax: 690-0883
Toddler's Park Head Start/ Day Care 260 So 4th Avenue Mount Vernon, New York 10550-3805 Phone: 699-5039 Fax: 699- 5952 ASP: 699-5937	Putnam Head Start 31 Mount Ebo Road North Brewster, New York 10509-3601 Phone: (845) 363-6270 Fax: (845) 363-6271
WestHELP—Mount Vernon 240 Franklin Avenue Mount Vernon, New York 10550-1462 Phone: 665-5401 x.821 Director's Office Ext. 822 Fax: 665-3626	*Saint Peter's Day Care Center (Delegate) 204 Hawthorne Avenue Yonkers, New York 10705-1018 Phone: 476-2152 Fax: 476-2186
Yorktown Heights Head Start 1974 Commerce Street Yorktown Heights, New York 10598 -4433 Phone: 962-9399 Fax: 245-6971	WestCOP Therapeutic Nursery School and Head Start 6 Old Tomahawk Street Granite Springs, New York 10527-0173 Phone: 243-0501 Fax: 243-0646
	Yonkers Children's Place Day Care 10 St. Joseph's Avenue Yonkers, NY 10703-6502 Phone: 375-3911 Phone: 375-4102 Fax: 966-2483

LINKAGE AGREEMENT

Child Care Services for Westchester County's Homeless Families

Purpose

This Linkage Agreement between the Child Care Council of Westchester, Inc. and the Westchester County Continuum of Care Partnership for the Homeless (WCCoC) is developed to facilitate the linkage of Westchester County's homeless families to quality child care and education services.

Background

WCCoC is the public-private partnership responsible for planning and coordinating all homeless resources and services for homeless families and individuals in Westchester. It administers \$19 million in annual HUD funding and helps coordinate tens of millions more in other county, state, local and private funding. Westchester's 2019 Homeless Point-In-Time Count identified close to 1,000 homeless households with over 1,800 family members. This included 389 families living with children under age 18. These 389 families had 729 children under the age of 18. The families were living in emergency or transitional housing provided by over two dozen distinct homeless housing programs, primarily in scattered-site housing units.

The Child Care Council of Westchester is a not-for-profit organization that champions the healthy development of children, families and the Westchester community by promoting quality early care and education. The Council accomplishes this mission by: serving as a one-stop shop for child care resources, referrals and information for parents and employers; helping child care providers implement quality improvement strategies, give the best possible care, grow their businesses, and meet their legal obligations; and by actively advocating for policies and resources that improve the quality, affordability and accessibility of care.

Agreement

WCCoC will ensure that all of the family housing programs participating in its CoC planning process are aware of the services provided by The Child Care Council of Westchester. It will encourage each housing program to have its social workers refer homeless families with children under the age of 13 years to The Child Care Council of Westchester. The Council will provide a variety of free services to help households find child care and after school programs that meet their needs. Trained counselors will provide referrals, information on child care options, sample interview questions, screening for child care subsidy eligibility and when indicated, help completing the subsidy application.

Signed by:


Kathy Halas

Executive Director

The Child Care Council of Westchester

Date: 9/23/19


Karl Bertrand, LMSW

Co-Chair

Westchester County CoC

Date: 9/23/19



George Latimer
County Executive

Sherlita Amler, M.D.
Commissioner of Health

September 23, 2019

Annette Peters-Ruvolo, LCSW
Westchester County Continuum of Care
112 East Post Road
White Plains, NY 10601

Dear Ms. Peters-Ruvolo,

On behalf of the Westchester County Department of Health (WCDOH), this letter serves to document the commitment of the WCDOH to provide Westchester County's individuals and families experiencing homelessness with healthcare services. This includes having a WCDoH representative on the CoC Board to help facilitate coordination efforts.

The WCDoH will continue to work collaboratively with the Westchester County CoC Partnership for the Homeless and their member agencies to identify individuals and families eligible for services. WCDoH services include: WIC provides nutrition education, breastfeeding support and counseling, electronic benefit cards to purchase healthy foods, and referrals to health and social services for high-risk, low income women, infants and children up to age five. It is considered one of the most successful, cost-effective and important nutrition intervention programs in the country. Immunization Program – Free immunizations are available to children from birth to age 19 to prevent childhood diseases. WCDoH has clinics in Yonkers and White Plains. Early Intervention Program – Early Intervention Services are provided to help children grow and develop. The Early Intervention Program can provide a variety of therapeutic and support services for infant/toddler with disabilities; including: evaluation services (hearing and vision screening), home visits, speech, physical and other therapies, child development groups, and family counseling. These services are provided at no cost. In addition to partnering with parents, WCDoH actively collaborates with a wide range of community agencies. These collaborations serve to ensure that resources are available for the children and families as they progress towards their goals.

We look forward to continuing our relationship with the Westchester County CoC to ensure that all CoC member agencies are aware of WCDoH's early childhood programs and services. It will encourage each housing program to have its case managers refer homeless families and children to Early Head Start or Head Start through WCDoH. WCDoH will facilitate these referrals for eligible children to the extent possible in its early childhood programs.

Signed by:

Sherlita Amler, M.D.
Commissioner
Westchester County Department of Health

Department of Health
25 Moore Avenue
Mount Kisco, New York 10549

Telephone: (914) 861-7292

Fax: (914) 813-5003

