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

Resources:
The FY 2019 CoC Application Detailed Instruction can be found at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources

1A-1. CoC Name and Number: MA-502 - Lynn CoC

1A-2. Collaborative Applicant Name: Lynn Housing Authority & Neighborhood Development

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Lynn Housing Authority & Neighborhood Development
# 1B. Continuum of Care (CoC) Engagement

## 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/

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

## 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.

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

Applicant: Lynn CoC
Project: MA-502 CoC Registration FY2019
FY2019 CoC Application Page 3 09/30/2019
<table>
<thead>
<tr>
<th><strong>Youth Advocates</strong></th>
<th>Yes</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>School Administrators/Homeless Liaisons</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>CoC Funded Victim Service Providers</strong></td>
<td>Not Applicable</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Non-CoC Funded Victim Service Providers</strong></td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Domestic Violence Advocates</strong></td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Street Outreach Team(s)</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates</strong></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>LGBT Service Organizations</strong></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Agencies that serve survivors of human trafficking</strong></td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td><strong>Other homeless subpopulation advocates</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Homeless or Formerly Homeless Persons</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>Mental Illness Advocates</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>Substance Abuse Advocates</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Other:</strong> (limit 50 characters)</td>
<td>Elder housing and services</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### 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. Lynn CoC (LCoC) holds monthly meetings which are widely advertised across the CoC via email and on partner websites. Representatives of a diversity of organizations from across the City actively participate in meetings, on subcommittees, on the Board of Directors, speak at meetings and collaborate in the NOFA process. CoC leadership personally reaches out to agencies working with underrepresented populations to encourage their participation including youth, elders and Veterans.

2. The monthly meetings provide an opportunity to identify and discuss obstacles to housing and services for homeless persons, including specific challenges such as domestic violence (DV), opioids, implementing Housing First (HF), and unaccompanied youth. Consistent outreach to new attendees and prospective members ensures the CoC continues to be apprised of trends and issues the public may want to discuss.
3. Monthly meetings and committee meetings are used to discuss different approaches, points of view and solutions. This consistent outreach and inclusion made it possible to 1) create annual scholarships for young people seeking college entrance which in turn helps us stay attuned to the needs of individuals and families facing homelessness, and to continuing outreach efforts, 2) have both funded and non-funded agencies participate in a line by line review of the CoC application, 3) engage a diverse working group from across the City to provide input into a CoC Strategic Plan to End Homelessness that is currently underway, and 4) hold a roundtable discussion of current trends and needs in the CoC.

4. All communications are available via electronic media, pdf, and if requested, can be translated into Spanish.

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. Monthly meeting invitations are emailed to a broad cross-section of interested parties across the City, announced on partner websites and held on the same day every month to allow attendees to plan ahead.
2. In addition to awarding scholarships, the annual meeting includes honoring someone in the community who has positively impacted efforts to end homelessness. The CoC makes a special effort to invite those who may be interested in membership to the annual meeting as well as those held monthly. It often has special speakers or issue-oriented meetings to provide information and to entice new members. Individual agencies have made special invitations to agencies and colleagues they've identified as interested parties.
3. All communications are available via electronic media, pdf, and if requested, can be translated into Spanish. The annual meeting is well advertised via email, websites and the local newspaper is invited to cover it.
4. The CoC solicits new members on an ongoing basis and has targeted specific populations such as unaccompanied youth, Veterans, and those with addictions. We have reached out to agencies including HAWC, which serves victims of domestic violence and sexual assault, and the Haven Project which serves unaccompanied youth. We invite new members to participate in committees addressing topics where their expertise will help the CoC be most effective. The annual meeting is well advertised via email, websites and the local newspaper is invited to cover it.
5. LCoC actively engages homeless and formerly homeless individuals to serve on the Board, attend meetings, and provide input to the strategic efforts of the CoC to end homelessness. We currently have an individual who resides at a
member agency site on the Board, and through our partner, the North Shore Housing Action Group (NSHAG), have four homeless young people under the age of 25 participating in development of a Youth Action Board.

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. In meetings prior to the FY19 NOFA release, the ongoing work to build the membership of the LCoC regularly included discussions of new applicants and projects. Following these meetings, members made special efforts to engage agencies which were not consistently part of the CoC. When the NOFA was announced, the CoC developed an RFP consistent with the NOFA that defines the amounts available, the date due, content requirements, and the method of submission. It was distributed via email and posted on the Lynn Housing Authority & Neighborhood Development (LHAND) website as well as partner websites. It was also reviewed and discussed in the monthly meeting, and members were encouraged to reach out to colleagues who have not applied in the past.

2. Upon receipt of new application concept papers, the Ranking and Review Committee meets to review these to ensure they meet HUD threshold requirements as well as the needs of the CoC. If these criteria are met and the projects do not exceed the funding available, they are invited to submit a full proposal. All renewal requests are automatically included unless there are unresolved issues from the most recent CoC monitoring.

3. LCoC emailed the FY19 RFP to the existing list serve as well as others identified as potential participants on July 25, 2019. It was posted on the LHAND website on July 26, 2019. Partner agencies also posted on their websites. It was reviewed at the monthly CoC meeting on July 18, 2019.

4. All communications are available via electronic media, pdf, and if requested, can be translated into Spanish.

5. The LCoC welcomes and strongly encourages new proposals in all CoC communications, and members likewise encourage colleagues who have not applied before.
1C. Continuum of Care (CoC) Coordination

Instructions:
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Resources:
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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.

<table>
<thead>
<tr>
<th>Entities or Organizations the CoC coordinates planning and operation of projects</th>
<th>Coordinates with Planning and Operation of Projects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Opportunities for Persons with AIDS (HOPWA)</td>
<td>Yes</td>
</tr>
<tr>
<td>Temporary Assistance for Needy Families (TANF)</td>
<td>Yes</td>
</tr>
<tr>
<td>Runaway and Homeless Youth (RHY)</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Head Start Program</td>
<td>Yes</td>
</tr>
<tr>
<td>Funding Collaboratives</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Private Foundations</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through other Federal resources</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through State Government</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and services programs funded through Local Government</td>
<td>Yes</td>
</tr>
<tr>
<td>Housing and service programs funded through private entities, including foundations</td>
<td>Yes</td>
</tr>
<tr>
<td>Other:(limit 50 characters)</td>
<td></td>
</tr>
</tbody>
</table>
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. LCoC members attend the annual ESG meeting during which ESG program recipient applications are reviewed and discussed. The public has the opportunity to ask questions of the ESG officer, as well as participating programs. Most recently, this included follow-up with the CoC membership regarding questions that had to be answered after the annual meeting. The questions were resolved, and the formal, written response was shared at the following CoC meeting.
2. and 3. The LHAND and the LCoC actively collaborate in the planning and allocation of ESG funds, in development of the Consolidated Plan and in the implementation of LCoC priorities. They work with Don Walker, Lynn Office of Economic and Community Development, which manages ESG funding for the City, a direct ESG recipient. The CoC and LHAND work in collaboration with Mr. Walker's office to provide information related to Consolidated Plan development, ESG funding allocation needs and protocols and to offer input on ESG program outcomes. The CoC provides PIT, HIC, AHAR/LSA, and other HMIS data as needed, and will share the HDX Report attached to this submission. Utilizing all data available, Mr. Walker and his staff meet with LHAND and funded CoC members annually to ensure performance standards are clear and focused on ending chronic homelessness.

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

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.
Yes to both

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

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
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. The LCoC developed a VAWA policy in 2018, two CoC member agencies, Lynn Shelter Association and Bridgewell, created a joint Transfer Plan specific to their organizations as they often have clients who utilize both agencies. The CoC has adopted the HUD-developed Domestic Violence Emergency Transfer Plan and protocols after having them reviewed by HAWC (Healing Abuse Working for Change), a CoC member whose mission is to “help abused women, children, men, and nonbinary people live free from violence and fear.” These documents, HUD-5380 to HUD-5383, are attached to this application. Each of the organizations requesting funding through this NOFA has staff trained in trauma-informed care and providing a victim-centered approach.

2) CE allows participation without identifiers; clients can avoid areas of the City where they feel at-risk and receive case management to connect them with resources and help them build networks of support. CoC members have person-centered plans and objectives are established/modified as needed by the individual being assisted. These may include but are not exclusive to, family reunification, employment, childcare, and substance abuse treatment. CoC agencies and Coordinated Entry staff partner to undertake their respective responsibilities in a manner that addresses clients needs, while ensuring client safety, including meeting daily, being sensitive to the type of facility that works best, e.g., sharing a bathroom or being in a facility with both men and women. In addition, the LHAND Integrity Officer is on the Community Engagement Committee with the Lynn PD which connects the CoC to families and individuals facing DV.

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)

1. CoC member Lynn Shelter Association (LSA) utilizes RESPOND, a safety planning tool. RESPOND training at LSA is also made available to every
agency in the CoC. In October of 2018 HAWC provided a DV training at the monthly CoC meeting for housing and service providers covering 1) the true picture of domestic violence, 2) the value and basics of trauma-informed care, and 3) the need for victim-centered engagement.

2. The CoC has been awarded funding through the recent HUD NOFA for HMIS to integrate HMIS and CE program software through which the CoC will also ensure that CE is ensuring safety to those who are survivors of domestic and/or sexual assault. A full training will then be provided to CoC members using HMIS and CE.

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 LCoC utilizes several methods to acquire and share de-identified aggregate data. Our partner, HAWC, uses a database whose sole purpose is to provide effective and secure data management support to victim service organizations (EmpowerDB). We also use the data accumulated by the Massachusetts Department of Public Health (DPH), CDC’s National Center for Injury Prevention and Control Division of Violence Prevention, and Jane Doe Inc., a statewide membership coalition that brings together organizations and people committed to ending domestic violence and sexual assault.

In recent LCoC meetings, service providers have shared concerns that they are seeing increasing numbers of women who are victims of DV and estimate that number to be 1 in 4. This anecdotal evidence is supported by FY18 data accumulated by DPH for the whole state, as well as by CDC data that shows 1 in 3 women and 1 in 5 men in MA report having experienced DV by an intimate partner. In 2018, 18% of women and 6% of men reported being sexually assaulted (CDC data).

Information from CoC APRs showed that 29% of all program participants were either fleeing or victims of DV, and that the greatest challenge for this population in our region is adequate housing. According to the last CE APR, 19% of those enrolled in the CE program had a history of DV and 12% of those who had a history of DV said that they were actively fleeing at the time of CE enrollment. Each of these sources has been vital to developing a picture of the need in the LCoC whose agencies work as a collaborative body in which each agency’s strengths are shared to ensure the strength of the whole CoC.

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

Applicants must:
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)

The LHAND is committed to the homeless population in Lynn as evidenced by this application and the numerous activities undertaken to address homelessness including achieving functional zero for Veterans, participating in the North Shore Housing Action Group (NSHAG) through which it administers funding specifically to address youth and young adult homelessness, and creation of an Elder Committee to address the increasing needs of elders. While the formal policy does not include homeless preference, housing for the most vulnerable is a priority.

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)

The CoC enforces non-discriminatory practices by CoC members in its Governance Charter, (Attachment K, Anti-discrimination Policy) which is reviewed and updated annually. All program participants across the CoC are accepted based upon how they present to the agency. Agencies in the LCoC take this very seriously and have held staff training to ensure full awareness of this topic. The current rules and regulations that have come out of the Equal Access Final Rule, which went into effect on 09.21.16, have been widely distributed and agencies continue to explore and implement best practices.

In the fall of 2018, the CoC held a fair housing training conducted by the LHAND staff attorney which emphasized this topic. In addition, as part of the monthly meeting special speaker series, Cultural Competence is slated to be a
topic in the coming year.

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

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?</td>
<td>Yes</td>
</tr>
<tr>
<td>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?</td>
<td>Yes</td>
</tr>
<tr>
<td>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?</td>
<td>No</td>
</tr>
</tbody>
</table>

*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.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Engaged/educated local policymakers:</td>
<td>X</td>
</tr>
<tr>
<td>2. Engaged/educated law enforcement:</td>
<td>X</td>
</tr>
<tr>
<td>3. Engaged/educated local business leaders:</td>
<td>X</td>
</tr>
<tr>
<td>4. Implemented communitywide plans:</td>
<td></td>
</tr>
<tr>
<td>5. No strategies have been implemented:</td>
<td></td>
</tr>
<tr>
<td>6. Other:(limit 50 characters)</td>
<td></td>
</tr>
</tbody>
</table>

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. As indicated in the attached CE Policies and Procedures, p. 3, the LCoC CE covers the entire geography, Lynn, MA.

2. LCoC has four access points throughout the City, Bridgewell, Inc., LEO, Lynn Shelter Association, and LHAND. In addition, the CE Specialist goes to My Brother’s Table every Tuesday evening to reach those who may not otherwise be engaging the system. In addition, LCoC agencies regularly do street outreach and maintain relationships with existing and previous clients in area jails, rehabilitation facilities, recuperative care, and through the court system. Greater Lynn Senior Services reviews CE at their regular breakfasts. These opportunities allow us to enroll people so that when they are ready to utilize CoC system housing and services, it can more quickly be identified for them.

2. CE is reviewed in all committee meetings as it is an integral piece of the CoC referral system. It is used in conjunction with state RAFT, CSPECH, and ESG funding. The Policies and Procedures developed by the LCoC include the Order of Priority protocols in HUD CPD-16-11 and its subsequent briefing HUD-17-01. Consequently, the most vulnerable in the CoC are always at the top of the CE list for housing. We were encountering challenges with filling vacant units quickly. To combat that, when agencies make a request to fill a vacancy, they now receive the top 5 applicants on the CE list who fit their unit, e.g. individual or family. After the unit is filled, the remaining applicants are returned to the CE list. Likewise, when an agency indicates it has an individual or family in need of a unit, the applicant(s) is connected with a housing provider immediately to seek housing and is referred to the CE access points.

The Standard Assessment tools for families and individuals are attached.
1D. Continuum of Care (CoC) Discharge Planning

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/

Resources:
The FY 2019 CoC Application Detailed Instruction can be found at:
https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources
The FY 2019 CoC Program Competition Notice of Funding Availability at:

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

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).

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Care:</td>
<td>X</td>
</tr>
<tr>
<td>Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Mental Health Care:</td>
<td>X</td>
</tr>
<tr>
<td>Correctional Facilities:</td>
<td>X</td>
</tr>
<tr>
<td>None:</td>
<td></td>
</tr>
</tbody>
</table>
1E. Local CoC Competition

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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*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


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

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)

The LCoC FY19 NOFA RFP, Ranking Policy, and Ranking Tools for New and Renewal projects each emphasize the importance of projects that take into consideration the severity of needs and vulnerabilities of the population being served. The final Ranking Tool for both renewal and new projects reviewed use of Housing First and low barrier entry processes, focus on special populations including Domestic Violence, elders, Veterans, Families with Children, and Young Adults under 25.
Additional points were given to projects in which 90-100% of the beds were dedicated to the chronically homeless and projects that specifically targeted a specific population including DV. Using the most recently submitted APRs, the Ranking Committee also evaluated housing stability (specifically the percentage who maintain or exit to PH), those placed into PH within 90 days, and those placed within 24 months. Maintenance and increase of all income, as well as earned income, were also evaluated using APRs. DV-specific considerations included the provision of Mainstream Services, which were evaluated using the project application, and capacity within the agency. The Ranking and Review process also reviewed the application regarding the project's use of community partnerships and resources to meet the needs of program participants. As the LCoC CE has been developed with severity of needs and greatest vulnerabilities as priorities, both new and renewal applications were required to participate in CE as part of the threshold review.


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.

<table>
<thead>
<tr>
<th>Public Posting of Objective Review and Ranking Process</th>
<th>Public Posting of CoC Consolidated Application Including: CoC Application, CoC Priority Listing, Project Listings</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Email</td>
<td>1. Email</td>
</tr>
</tbody>
</table>
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:** 15%


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. The LCoC membership has adopted a policy for reallocation that is included in the governance charter and attached to this application. It is reviewed bi-annually, or more frequently if needed.
2. The Reallocation Policy was developed by the Ranking and Review Committee and approved by the CoC membership.
3. This policy was reviewed and voted upon during a CoC meeting and emailed to the CoC’s list serve. It was also posted on the LHAND website.
4. and 5. The Monitoring Committee reviews all projects annually using a tool designed to evaluate project performance as well as its adherence to HUD requirements. Projects with low scores are notified of the deficiencies in their projects, and suggestions for improvement with the acknowledgment that if they do not improve, they may be reallocated. In the coming year, we are developing a Strategic Plan to End Homelessness in the LCoC, and in the course of that, we will develop an assessment of the most urgent needs in the CoC. This will be used to modify the monitoring, ranking and review tools and policies used by the CoC.
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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1F-1  DV Bonus Projects.

Applicants must indicate whether the CoC is requesting DV Bonus projects which are included on the CoC Priority Listing:

1F-1a. Applicants must indicate the type(s) of project(s) included in the CoC Priority Listing.

1. PH-RRH
   - X
2. Joint TH/RRH
   - 
3. SSO Coordinated Entry
   - 

Applicants must click “Save” after checking SSO Coordinated Entry to view questions 1F-3 and 1F-3a.

*1F-2. Number of Domestic Violence Survivors in CoC’s Geographic Area.

Applicants must report the number of DV survivors in the CoC’s geographic area that:

<table>
<thead>
<tr>
<th>Need Housing or Services</th>
<th>235.00</th>
</tr>
</thead>
</table>

FY2019 CoC Application  Page 18  09/30/2019
1F-2a. Local Need for DV Projects.

Applicants must describe:
1. how the CoC calculated the number of DV survivors needing housing or service in question 1F-2; and
2. the data source (e.g., HMIS, comparable database, other administrative data, external data source).
(limit 500 characters)

"Those currently being served" is from PIT, HMIS, and APR data. Need for housing and services was derived by consulting local DV assistance providers, the Jane Doe database at www.janedoe.org, the National Coalition Against Domestic Violence, and the US Department of Health and Human Services at www.acf.hhs.gov/fysb/resource/dv-homelessness-stats-2016. Due to the very nature of DV, the need is necessarily an estimation extrapolated from these sources and is a very conservative number.

1F-4. PH-RRH and Joint TH and PH-RRH Project Applicant Capacity.

Applicants must provide information for each unique project applicant applying for PH-RRH and Joint TH and PH-RRH DV Bonus projects which the CoC is including in its CoC Priority Listing—using the list feature below.

<table>
<thead>
<tr>
<th>Applicant Name</th>
<th>DUNS Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lynn Shelter Asso...</td>
<td>174827683</td>
</tr>
</tbody>
</table>
1F-4. PH-RRH and Joint TH and PH-RRH Project

Applicant Capacity

| DUNS Number: | 174827683 |
| Applicant Name: | Lynn Shelter Association |
| Rate of Housing Placement of DV Survivors–Percentage: | 88.00% |
| Rate of Housing Retention of DV Survivors–Percentage: | 96.00% |

1F-4a. Rate of Housing Placement and Housing Retention.

Applicants must describe:
1. how the project applicant calculated the rate of housing placement and rate of housing retention reported in the chart above; and
2. the data source (e.g., HMIS, comparable database, other administrative data, external data source). (limit 500 characters)

1. In the past year, Lynn Shelter Association (LSA) had 34 clients identified as DV survivors at intake. 30 were placed in housing, 2 left before being placed, 1 is seeking substance abuse assistance, and one is now incarcerated. 29 are still housed, and 1 left and has an unidentified location. Some clients are not comfortable revealing their DV status initially, so HMIS must be updated. This was also considered when calculating the rates.
2. HMIS, APR, CE

1F-4b. DV Survivor Housing.

Applicants must describe how project applicant ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing. (limit 2,000 characters)

DV survivors experiencing homelessness begin the process of moving to permanent housing immediately at intake. Working with their case manager (CM), survivors identify their housing goals and priorities. With safety considerations in mind, the participant identifies safe communities, schools, and neighborhoods in a housing search plan. Survivors meet with their CM weekly to conduct housing searches using internet resources and engage housing providers in a collaborative effort to locate housing. The housing specialist advocates with housing authorities and landlords. Survivors receive assistance completing housing applications and housing is reviewed to ensure competitiveness. LSA can assist with moving costs, security deposits and last month’s rent with the help of partner agencies. Case managers help the survivor to identify what supportive services would benefit them through an individualized needs assessment. This assessment provides a guide for referrals to community partners who provide needed services and a support network that will provide the foundation for long-term housing stability. Often an economic empowerment strategy is needed to help the survivor achieve her goal of moving into the community that is her priority. Income maximization and steps to achieve financial self-sufficiency are an important part of the process of
moving into permanent housing. Referrals needed most often are to providers of childcare, education services, employment assistance, food, legal services, mental health services, outpatient health services, and substance abuse treatment services. Case managers assist participants in obtaining mainstream benefits, i.e. SNAP, housing vouchers, Medicare, Medicaid, and SSI and make sure survivors are connected to life skills training (including budgeting and money management), transportation, safety planning, individual and group counseling, youth services, early childhood education, and job search help.

1F-4c. DV Survivor Safety.

Applicants must describe how project applicant:
1. ensured the safety of DV survivors experiencing homelessness by:
(a) training staff on safety planning;
(b) adjusting intake space to better ensure a private conversation;
(c) conducting separate interviews/intake with each member of a couple;
(d) working with survivors to have them identify what is safe for them as it relates to scattered site units and/or rental assistance;
(e) maintaining bars on windows, fixing lights in the hallways, etc. for congregate living spaces operated by the applicant;
(f) keeping the location confidential for dedicated units and/or congregate living spaces set-aside solely for use by survivors; and
2. measured its ability to ensure the safety of DV survivors the project served.

(limit 2,000 characters)

1.(a) Massachusetts state law requires DV counselors to be certified through a 25-hour training program that includes a safety planning component. LSA requires appropriate staff to participate in this training which is offered 2-3x/year. Safety planning is a frequent topic of conversation in monthly staff meetings and is a constant and ongoing conversation in-house among staff. (b) Every LSA facility, including emergency shelter, has multiple private spaces set aside for private conversations. (c) LSA does not conduct interviews or intakes with perpetrators. Perpetrators may be referred for abuser education. (d) Survivors lead the conversation on the creation of their own personalized safety plan. It is assumed that survivors know the perpetrator the best and they provide the guidance for what is safe for them. Each survivor creates a safety plan with assistance upon intake to emergency shelter, updates as necessary, and creates an updated plan on exit. Safe neighborhoods, schools, and communities are considered as part of the planning process before exit to scattered site units or rentals. (e) LSA facilities in which these clients are housed are ADA certified and all have emergency lights and child safety bars on the windows. Staff conducts daily safety and maintenance checks as part of their responsibilities. Maintenance promptly makes emergency repairs and is responsive to other maintenance needs in 1-2 days. (f) LSA's housing units for DV clients are 100% confidential. Residential apartment addresses are kept confidential through participation in the Massachusetts Address Confidential Program. 2. Safety planning includes using a danger assessment tool that provides a measure for risk of violence the survivor considers when developing a safety plan and assessing locations for housing and schools. Participants in RRH have 6 months of follow-up case management and safety planning and related issues continue to be raised and evaluated for response.
1F-4d. Trauma-Informed, Victim-Centered Approaches.

Applicants must describe:
1. project applicant’s experience in utilizing trauma-informed, victim-centered approaches to meet needs of DV survivors; and
2. how, if funded, the project will utilize trauma-informed, victim-centered approaches to meet needs of DV survivors by:
   (a) prioritizing participant choice and rapid placement and stabilization in permanent housing consistent with participants’ preferences;
   (b) establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
   (c) providing program participants access to information on trauma, e.g., training staff on providing program participant with information on trauma;
   (d) placing emphasis on the participant’s strengths, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans include assessments of program participants strengths and works towards goals and aspirations;
   (e) centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination;
   (f) delivering opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
   (g) offering support for parenting, e.g., parenting classes, childcare.

(2,000 characters)

1. Trauma informed, victim-centered approaches to meeting the needs of DV survivors are core to how we work and the services we offer. All staff related to the ways trauma impacts people and affects their behavior. Survivors also have access to this information. This education focuses on recognizing, appreciating, and supporting survivor’s strengths. Every survivor develops a personal plan for moving forward with their lives and takes into consideration his/her interests, skills, strengths and assets. A holistic approach to an individual’s needs is considered when services and referrals are recommended. Individual counseling and group support are available, and a wide range of programming and services are offered including financial empowerment, legal advocacy, childcare, housing search, and substance abuse treatment. 2. Every survivor’s plan for moving forward includes identifying permanent housing preferences. Staff make available information about any housing opportunity a participant is interested in and assist with the application. CMs assist the participant in locating financial resources, maximizing income through benefits they qualify for, and jobs, training or education resources that will help the participant achieve his/her goals. (b) Staff are trained to work on the basis of trauma-informed care which has at its core an approach to a relationship based on respect and appreciation for an individual’s strengths and decisions. This model is reflected in our organization’s policy and practices. LSA does not require mandatory participation in any of its services. Services are open to all, and there is transparent access to all programs. Each participant receives a Bill of Rights on entrance to the emergency shelter and that provides a process for making a complaint, filing an appeal or receiving a hearing. (c) An important aspect of our work is sharing information about the impact of and recovery from trauma with our program participants. Information is available through written materials, conversations in support groups, house meetings and wellness
groups. There are also several online learning portals that are used extensively by both participants and staff: the hotline.org (The National Domestic Violence Hotline) and nationalcenterdvtraumamh.org (National Center on Domestic Violence, Trauma & Mental Health. (d) Participants set their own goals and staff and volunteers use strength-based coaching to support them in moving forward. There are no service plans developed by staff for participants – participants identify their own goals. Tools and assessments are designed to assist participants identify and give voice to their experience, skills, strengths, opportunities to be realized, and progress achieved. (e) All staff and volunteers participate in a 25-hour training designed around cultural responsiveness and inclusivity and has components dedicated to nondiscrimination, equal access, and cultural competence. There are trainings throughout the year on these topics that focus on particular groups, for example, LGBTQ. (f) Ongoing groups are offered to provide connection for participants: emotional support groups, peer groups, wellness groups, yoga, playgroups for kids. Participants will be connected with spiritual or religious groups if requested. (g) Parents are supported and connected to local groups and organizations providing parenting support groups, education and mentoring.

1F-4e. Meeting Service Needs of DV Survivors.

Applicants must describe how the project applicant met services needs and ensured DV survivors experiencing homelessness were assisted to quickly move into permanent housing while addressing their safety needs, including:

- Child Custody
- Legal Services
- Criminal History
- Bad Credit History
- Education
- Job Training
- Employment
- Physical/Mental Healthcare
- Drug and Alcohol Treatment
- Childcare

(limit 2,000 characters)

LSA provides wrap-around services to ensure survivors needs can be met and they can accomplish their goal of establishing safe, permanent housing where they and/or their family can thrive. Some of these are provided in-house and others through trusted partners with sensitivity to the needs of DV survivors. They will link survivors to legal representation as needed and to assist in child custody cases. Some participants have criminal records that may make employment and housing placement more difficult. LSA partners with the Essex County District Attorney’s Office and Lynn Police Department to understand probation requirements for employment and to clear criminal histories from the CORI system. CMs work with participants who are coached about how to speak about employment gaps, or negative findings on CORIs. Case managers provide Life Skills training to participants that include job search and updating resumes; creating and managing budgets; and working with non-profit partners to address bad credit histories. LSA ensures transportation needs are met that
will enable a participant to commute to their employment, participate in job training, or have access to uniforms or an appropriate work wardrobe. An extensive network of partner providers of job training and education opportunities is utilized to match the needs of survivors to increase their incomes and pursue financial independence. Mental health services are available and referrals are made to local providers of physical healthcare and to drug and alcohol treatment facilities. Childcare is available for participants during our support groups and referrals are made to local childcare providers as appropriate, including Headstart programs.
2A. Homeless Management Information System (HMIS) Implementation

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/

Resources:
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2A-1. HMIS Vendor Identification.
Applicants must review the HMIS software vendor name brought forward from FY 2018 CoC Application and update the information if there was a change.

Social Solutions (ETO)

2A-2. Bed Coverage Rate Using HIC and HMIS Data.
Using 2019 HIC and HMIS data, applicants must report by project type:

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Total Number of Beds in 2019 HIC</th>
<th>Total Beds Dedicated for DV in 2019 HIC</th>
<th>Total Number of 2019 HIC Beds in HMIS</th>
<th>HMIS Bed Coverage Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelter (ES) beds</td>
<td>971</td>
<td>0</td>
<td>971</td>
<td>100.00%</td>
</tr>
<tr>
<td>Safe Haven (SH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Transitional Housing (TH) beds</td>
<td>24</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Rapid Re-Housing (RRH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Permanent Supportive Housing (PSH) beds</td>
<td>305</td>
<td>0</td>
<td>261</td>
<td>85.57%</td>
</tr>
<tr>
<td>Other Permanent Housing (OPH) beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

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)

The single TH project is operated by a vendor who chooses not to contribute to the LCoC HMIS. We will continue to encourage them to participate.


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).

05/01/2019
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. 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.

2B-1. PIT Count Date. 01/27/2019
Applicants must enter the date the CoC conducted its 2019 PIT count (mm/dd/yyyy).

2B-2. PIT Count Data–HDX Submission Date. 05/01/2019
Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).

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)
There were no changes.

*2B-4. Sheltered PIT Count–Changes Due to Presidentially-declared Disaster.
Applicants must select whether the CoC added or removed emergency shelter, No
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)

There were no changes.

*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. As one of the first CoCs in the state to implement a youth-specific count, the LCoC has an established process for acquiring data on homeless youth and is now a respected resource for those seeking to implement effective youth counts. The LCoC Youth Committee defined specific measures for reaching youth as part of the 2019 HUD PIT count based upon these 5 years of experience. The committee includes agencies and stakeholders that serve youth experiencing homelessness as well as youth who are unstably housed. Committee members engage youth and young adults in their own programs to obtain critical input into this process from these stakeholders.
2. Identifying the locations where youth were most likely to be found was spearheaded by the youth and young adults in our CoC programs, as well as by the youths’ participation in the annual MA Homeless Youth Count which is undertaken in May/June of each year. During that process, youth and young adults participated as volunteers and stipend ambassadors to facilitate outreach efforts.
3. Youth experiencing homelessness and youth who are unstably housed were integral to ensuring accuracy during the 2019 PIT Count. These youth were specifically responsible for the count of youth and young adults, in part because we understand that youth are often more likely to trust their peers. These youth went into the community and relied on word-of-mouth to find/connect with homeless youth and ensure they were included in the PIT.

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.

In the 2018 PIT count, a number of efforts were made to improve count accuracy and implementation. Those changes increased the accuracy of our PIT, and we used the same approach in the FY19 Count which ensured implementation integrity and accuracy.

1. and 2. Prior to the PIT count, the parameters of the count were reviewed with the CoC membership to ensure an understanding of definitions, including "chronic". The CoC continued to use the strength of its networks to reach out to all service providers in Lynn, regardless of their previous level of participation in the PIT or CoC, in order to gain the most accurate data. This was particularly useful in ensuring that all unsheltered locations were identified including camps and regular hang-outs. In addition, this helped us identify those who were unable to maintain housing after using HomeBASE and/or RAFT funding. One CoC member is a legal advocate who consistently provides input about this population to help us identify them. The CoC worked with local organizations - including law enforcement, meal programs, and faith communities to establish PIT working groups to plan outreach and focus on unsheltered homeless populations who have a higher incidence of CH. LCoC worked with emergency shelters to differentiate families with unaccompanied youth heads of household from those with older heads of household to ensure their unique needs were met.
3. We continue to implement the procedures and processes to ensure we retain our Functional Zero Veteran status.
3A. Continuum of Care (CoC) System Performance

Instructions

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The FY 2019 CoC Program Competition Notice of Funding Availability at:

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

Applicants must:

Report the Number of First Time Homeless as Reported in HDX. 443


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. The CoC uses the Coordinated Entry (CE) process, data trends, and the experience of agencies and front-line staff to determine the risk factors that would be used to identify persons becoming homeless for the first time. These risk factors include DV, families with young children, single heads of household under 25, untreated mental illness, chronic substance abuse, high rent burden, lack of familial resources, lack of affordable housing, and lack of income/low income.
2. It also uses the CE program to identify, assess, and triage households at imminent risk of homelessness to proactively and quickly link them to resources that can help them stabilize their housing. The CE Specialists reach out to
community-based agencies throughout the region to connect with those experiencing a housing crisis. The CoC works with community-based providers and state agencies to connect these households with RRH funds, TBRA, and other short-term subsidies. The CoC relies on state programs such as RAFT, HomeBase, and Tenancy Preservation Program; federal programs such as SSVF, HOPWA, and ESG that are administered by community-based nonprofits; and private foundation funds that can be used for TBRA and prevention (administered by community action agencies and other nonprofits in the region). The CoC partners with nonprofits and state agencies to ensure clients have access to eviction and foreclosure prevention services (Northeast Justice Center offers legal services, the Family Success Center offers counseling); re-entry services (through partnerships with DOJ and Essex County Sheriff’s Department); and RRH prevention services (through the Department of Transitional Assistance).

3. The Lynn Housing Authority & Neighborhood Development is responsible for overseeing the CoC’s strategy to reduce or end first time homelessness in the CoC.

*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. | 1,248 |


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)

1. The CoC’s strategy to reduce the length-of-time homeless involves increasing access to housing opportunities in the region and providing outreach to homeless individuals/families. CSPECH is a well-utilized resource which facilitates rapid housing placement for those who also need case management support. For those seeking medical care while chronically homeless, the respite care program provides an opportunity to collect documentation and finalize any outstanding needs. GLSS (Greater Lynn Senior Services) has two housing search workers who actively help elders identify housing. The CoC has Coordinated Entry (CE) intake staff, who provide targeted outreach to ensure homeless persons are on the CE list and all other housing lists in the region. The CoC also prioritizes its housing resources in ways that intend to reduce the length-of-time homeless (i.e., using ESG to rapidly rehouse those who can be quickly rehoused with short term assistance and using PSH for those who are experiencing chronic homelessness).
2. The CoC identifies and houses individuals and persons with the longest
length of time homeless by utilizing the Coordinated Entry (CE) process. Agencies pull names from the top of the CE list in accordance with the CoC’s CE policy to assure the longest-time homeless individuals are prioritized for housing.

3. LHAND is responsible for overseeing the CoC’s strategy to reduce length-of-time homeless in Lynn.

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

Applicants must:

<table>
<thead>
<tr>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

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. The percentages in our HDX report are problematic due to HMIS challenges. Many of these have been addressed, and others will be addressed with use of the HUD HMIS NOFA funding awarded to the LCoC. We hope to one day report 100%. In the interim, the LCoC has developed a number of strategies to increase exits and has begun work on a Strategic Plan to End Homelessness in the LCoC which will also include a Moving On Strategy.

Through CE, the CoC undertakes outreach at the community level to inform individuals, families, and agencies of available housing and services. The CoC embedded CE into emergency shelters and other systems serving the most vulnerable populations through the intake process in order to reach households...
least likely to seek assistance. All four access points provide housing and/or housing search, and services to families and individuals. CoC members have built a strong network to ensure that clients who come to the top of the CE list are quickly housed, regardless of which agency was their first contact point within the CoC.

2. LHAND is 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. Client-based efforts within all agencies include providing voluntary, intensive case management, increasing collaboration with health insurance and CSPECH and with case managers at the State level (i.e. those at DMH and DCF), utilizing health insurance case managers to identify resources, working with landlords to educate them, and use of master leasing to encourage landlords to participate.

4. LHAND is 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.

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

Applicants must:

<table>
<thead>
<tr>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Report the percentage of individuals and persons in families returning to homelessness over a 6-month period as reported in HDX. 10%</td>
</tr>
<tr>
<td>2. Report the percentage of individuals and persons in families returning to homelessness over a 12-month period as reported in HDX. 1%</td>
</tr>
</tbody>
</table>

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. The CoC regularly reviews HMIS and CE data, local trends and the experience of agencies and front-line staff to identify individuals and persons in families who are most likely to return to homelessness.
2. The LCoC strategy includes use of a multitude of resources and approaches to meet the individual needs of all clients. Among these are: Housing First, Rep Payee, clinical support through the Lynn Community Health Center and the Respite Center, development of support plans and use of recovery coaches for those exiting rehab, Open Door policies within agencies that allow former clients to return before the situation is dire, use of CSPECH which stays involved with clients after they are housed, ongoing relationships with landlords, and use of State-funded programs such as HomeBASE and RAFT.
3. LHAND is the organization responsible for overseeing the CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.

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

Applicants must:

<table>
<thead>
<tr>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>25%</td>
</tr>
</tbody>
</table>

| 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. |

| 75% |

| 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. |


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. Individual programs within the CoC help clients access employment by providing short-term, time-limited employment opportunities within their own agencies which help connect unemployed clients with employment to build their skills, confidence, and ability to provide future employers with an employee reference. The CoC also works with LEO, the local community action agency, which offers job training, job counseling, and other employment-related services to low-income individuals and families. Agencies partner with Massachusetts Rehabilitation Commission, Workforce Investment Board, and other state and federal agencies that help increase clients' employment.

2. Programs also work with multiple CoC partner agencies that provide job training, counseling, and job search assistance such as the North Shore Career Center. To assist clients in maintaining employment agencies are using creative solutions including trauma-informed yoga which makes people more relaxed and in turn, helps them stay employed.

3. Agencies will also work with private employers to seek trial periods of employment to provide opportunities to demonstrate reliability and capacity. Mainstream employment agencies, such as the North Shore Career Center are invited to and participate in regular CoC meetings, and a member is currently on the Youth Committee while another is on the Executive Committee. The FSC has an American Career Center office within its own offices dedicated specifically to youth. The FSC also has a full-time position through the Jobs PLUS program.

4. LHAND is the organization responsible for overseeing the CoC’s strategy to increase jobs and income from employment.

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. and 2. The CoC strives to ensure all programs provide clients with access to nonemployment cash resources and employment assistance by first using an intake form with multiple mainstream resources. Case managers are trained in income maximization techniques and assist clients with applying for all mainstream benefits or refer clients to other staff who are better equipped to assist (i.e., agencies have SOAR-trained staff who can assist with difficult SSDI situations). The Family Success Center (FSC) does workshops led by local wealth management companies to discuss improving a poor credit report. Workshops related to budgeting and use of current resources to make them go further are also a key strategy.

3. LHAND is the organization responsible for overseeing the CoC's strategy to increase non-employment cash income.


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. The CoC regularly emails the membership with notices and announcements regarding job fairs, internship and scholarship opportunities, employer partner notices, job openings, and announcements made by the local Workforce Investment Board and other employment organizations in the CoC. These opportunities are also shared in the monthly meetings.
2. LCoC partnerships with organizations and educational institutions like the Siemer Institute, North Shore Community College, and Salem State University, are utilized to increase the ability of CoC program participants to finish high school, go to college or a trade school, and obtain the appropriate credentials for well-paying professions.


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:

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

3A-6. System Performance Measures 06/24/2019

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
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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The FY 2019 CoC Program Competition Notice of Funding Availability at:

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.

<table>
<thead>
<tr>
<th>Factor</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. History of or Vulnerability to Victimization (e.g. domestic violence, sexual assault, childhood abuse)</td>
<td>X</td>
</tr>
<tr>
<td>2. Number of previous homeless episodes</td>
<td>X</td>
</tr>
<tr>
<td>3. Unsheltered homelessness</td>
<td>X</td>
</tr>
<tr>
<td>4. Criminal History</td>
<td></td>
</tr>
<tr>
<td>5. Bad credit or rental history</td>
<td></td>
</tr>
<tr>
<td>6. Head of Household with Mental/Physical Disability</td>
<td>X</td>
</tr>
</tbody>
</table>

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
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)

1. The LCoC takes a comprehensive approach to rapidly rehousing households of families with children by using all resources available. The Family Success Center is a primary venue for connections to a multitude of resources and to the agencies in the CoC network. Designed as a one-stop resource, it has built partnerships across the City which accept referrals for a variety of needs. One of these resources is a robust diversion program offered by (HomeBASE, RAFT) to rapidly rehouse families with children who have become homeless. This is accessed when families have been identified as at-risk for homelessness, they are referred to State resources. Additional enhanced diversion assistance is provided/available for families with barriers to being rehoused quickly (eg, families with 5+ members or medical issues). Many families are referred to the CoC via the state's Department of Housing & Community Development (DHCD) and are able to take advantage of DHCD programs and other state agency resources. The CoC is also a partner in the North Shore Housing Action Group through which funding from EOHHS is used specifically for youth and young adults under the age of 25 to provide needed resources.

2. Families are provided with housing and support services to increase their stability during the rapid rehousing process. The CoC ensures clients are connected to mainstream organizations that provide ongoing supports so families will have access to continuous support services that can help them maintain their housing and stability after once assistance ends.

3. LHAND and the Executive Committee are responsible for overseeing the CoC’s strategy to rapidly rehouse families with children.

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. | □ |
| 2. CoC conducts optional training for all CoC- and ESG-funded housing and service providers on these topics. | ☑ |
| 3. CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients. | □ |
| 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. | □ |
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 | No  |
| 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 | Yes |

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) | X   |
| 2. Number of Previous Homeless Episodes             | X   |
| 3. Unsheltered Homelessness                         | X   |
| 4. Criminal History                                 | X   |
| 5. Bad Credit or Rental History                     | X   |

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. and 2. The LCoC has made considerable progress in creating youth-focused projects and housing opportunities. The Lynn Shelter Association (LSA) received private funding to convert a section of its Emergency Shelter...
specifically for youth and young adults under 25 (YYA), thus separating them from the older adult population. LSA was instrumental in making emergency beds available for the YYA population during the winter by holding four beds for them through an agreement with the North Shore Housing Action Group and funding provided by EOHHS, the Executive Office of Health and Human Services. The Lynn Shelter Association also set aside four units of PH at the Osmund specifically for this age group. These units are available for referral by any agency in the City through CE.

LHAND also opened a house on Newhall St. for this population that includes 6 SROs with case management.

The Haven Project, an agency devoted solely to youth and young adults is in the process of developing congregate housing with 24 units. The first phase of this project will include 11 units managed by an in-house resident manager. It is slated for an October, 2021 opening. The Haven Projects offers daily drop-in services and referrals, and manages a coffee house that includes staff who were previously homeless, providing them with new skills and employment opportunities.

The CoC also took advantage of funding provided through the MA EOHHS for unaccompanied youth age 18-24 who were homeless or at risk of homelessness. This funding covered rent arrearage, first and last month rent, utility deposits and arrears, and basic set up such as furniture, linens, and dishes.

The CoC also participated in a Community Needs Assessment (CNA) undertaken in Essex County, also in partnership with NSHAG and funded through EOHHS. This assessment is now being used to guide the development of specific strategies to address the needs of sheltered and unsheltered YYA, as well as the development of a regional Youth Action Board (YAB) which will include homeless and formerly homeless young people who will ultimately lead this group. YAB members will participate in the youth committee of the LCoC, providing input into the housing and services needed and assisting in the federal PIT and the Massachusetts Homeless Youth Count, both undertaken annually.

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 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. Attached to this application are excerpts from the CNA mentioned in 3B-1d., demonstrating the considerable outreach undertaken to identify the needs of YYA throughout Essex County. In the LCoC geographic area in particular, three
focus groups were held, two with YYA and one with service providers. Multiple interviews with YYA and service providers were also part of the CNA, as well as an evaluation of all data available. This included education reports compiled by the McKinney-Vento Liaison in Lynn, the Department of Children and Families, and the Department of Mental Health.

2. As indicated, the CNA is being used as a tool for developing a comprehensive action plan which will include specific measures to identify whether actions are resulting in fewer homeless YYA. Among these measures are, the number of YYA who are unsheltered, the number couch-surfing, programs developed to address their needs, specific actions taken to facilitate YYA engagement with the YAB and their contributions to it. Other measures anticipated are increases in employment and/or acquisition of mainstream benefits, increase in the number housed for one year or more, and the number who graduate from high school or receive the equivalent certification.

3. The focus groups, interviews, and survey responses received during the CNA process informed the measures identified. These measures are reflective of what the YYA in this region and in this CoC geographic area tell us they need. By addressing those and including YYA in the effort to create solutions, we are confident we will be creating a picture and process that provide a clear path to initial steps in addressing YYA homelessness.

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 an MOU with the McKinney-Vento liaison who is also the Chair of the Youth Committee for the CoC.
2. Our in-house legal counsel developed a presentation for area schools on fair housing for both staff and students. CoC member Bridgewell has developed a middle school presentation regarding substance abuse avoidance. In Lynn we are fortunate to have the Siemer Institute in Lynn Schools to prepare students at risk for college, helping them build the confidence and academic capacity to succeed. The Lynn Public Schools McKinney-Vento representative is an active member of the CoC Youth Committee. Two CoC members also provide early childhood education for those of limited income.

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)

The Lynn CoC has adopted a comprehensive Education Policy which is defined on pages 22-24 of the Governance Charter. The CoC invites local State Educational Liaisons to monthly meetings and CoC members regularly attend their meetings to maintain open lines of communication and to take advantage of mutually beneficial funding opportunities. Each CoC-funded project serving households with children has a staff member dedicated to education and is in regular contact with local and State educational providers as required by the CoC’s Education Policy. As indicated, the CoC has strong relationships with McKinney-Vento Liaisons and use those regularly to ensure that children are attending school during times of housing crisis. Educational needs are consistently explored across the CoC at intake and in the development of Client Plans. The agencies in the CoC also regularly refer clients to our area CAP agency LEO, as well as the Family Success Center which each have specific programs related to increasing and attaining education and employment.

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.

<table>
<thead>
<tr>
<th>Early Childhood Providers</th>
<th>MOU/MOA</th>
<th>Other Formal Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Start</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Early Head Start</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Child Care and Development Fund</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Federal Home Visiting Program</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Healthy Start</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Public Pre-K</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Birth to 3 years</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Tribal Home Visiting Program</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Other: (limit 50 characters)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.

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


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.

2. People of different races or ethnicities are less likely to receive homeless assistance.

3. People of different races or ethnicities are more likely to receive a positive outcome from homeless assistance.

4. People of different races or ethnicities are less likely to receive a positive outcome from homeless assistance.

5. There are no racial or ethnic disparities in the provision or outcome of homeless assistance.

6. The results are inconclusive for racial or ethnic disparities in the provision or outcome of homeless assistance.

7. The CoC did not conduct a racial disparity assessment.

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

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/

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

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.

<table>
<thead>
<tr>
<th>Type of Health Care</th>
<th>Assist with Enrollment</th>
<th>Assist with Utilization of Benefits?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Private Insurers:</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Non-Profit, Philanthropic:</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Other: (limit 50 characters)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


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. CoC members are highly knowledgeable in the variety of mainstream benefits including CSPECH, Food Stamps, SSI, TANF, Medicaid and Medicare. CoC members use single forms at assessment to identify needs and benefit eligibility, help clients access these and follow up through case management. The Financial Stability program at the regional Family Success Center which is utilized by all CoC agencies provides benefits maximization, and partnership with the Career Center, also located in the Family Success Center.
2. The Collaborative Applicant, LHAND, shares opportunities that it becomes aware of throughout the CoC network via email and in monthly meetings.
3. All agencies are encouraged to attend benefits meetings and review benefit program websites and social media. In addition, the CoC has built strong relationships with state agencies and resource providers which adds another layer of access for CoC members.
4. The CoC is fortunate to have SOAR-trained staff in all funded agencies as well as street outreach workers through the Lynn Community Health Center who are knowledgeable about Medicaid and comparable benefits.
5. LHAND is the organization responsible for overseeing the CoC’s strategy for mainstream benefits.

4A-2. Lowering Barriers to Entry Data:
Applicants must report:

| 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. | 8 |
| 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. | 8 |
| 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. | 100% |

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. One of the greatest assets of the LCoC is the level of street outreach that is done. The Lynn Community Health Center has two outreach staff who work with this segment of the homeless population daily to identify their needs, help them survive on the street if they are not ready to move into housing, refer them to resources that will be helpful and build the trust that allows them to identify others who are unsheltered. The Recuperative Care center provides assistance to those who are being discharged from the hospital but still need a level of ongoing care. To reach YYA, the Haven Project is available on-site at local schools for 6 hours per week, hosts a table at local high schools, and participates in at least 1 community fair monthly. The CE Coordinator is available at My Brother’s Table most Tuesday evenings, and is well-known among those who have dinner there regularly.

2. The CoC street outreach covers 100% of the CoC’s geographic area.

3. The CoC conducts street outreach weekly, and sometimes daily. At minimum five days per week.

4. Listening to the clients being served, building relationships with those who are homeless or have a history of homelessness has provided the greatest level of instruction in developing an effective outreach effort. Involving the police department, the health clinic, member agencies, and recuperative care staff have likewise been incredibly helpful. Weaving the information together has resulted in an ability to reach those who are hardest to find and the most difficult to house.

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.

<table>
<thead>
<tr>
<th>RRH beds available to serve all populations in the HIC</th>
<th>2018</th>
<th>2019</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>245</td>
<td>0</td>
<td>-245</td>
</tr>
</tbody>
</table>

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. No

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.
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

<table>
<thead>
<tr>
<th>Document Type</th>
<th>Required?</th>
<th>Document Description</th>
<th>Date Attached</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2019 CoC Competition Report (HDX Report)</td>
<td>Yes</td>
<td>FY 2019 CoC Compe...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>1C-4.PHA Administration Plan–Moving On Multifamily Assisted Housing Owners’ Preference.</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1C-4. PHA Administrative Plan Homeless Preference.</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1C-7. Centralized or Coordinated Assessment System.</td>
<td>Yes</td>
<td>CE Assessment Tool</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Accepted.</td>
<td>Yes</td>
<td>Projects Accepted...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>1E-1. Public Posting–15-Day Notification Outside e-snaps–Projects Rejected or Reduced.</td>
<td>Yes</td>
<td>Project Rejected/...</td>
<td>09/30/2019</td>
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<tr>
<td>1E-1. Public Posting–30-Day Local Competition Deadline.</td>
<td>Yes</td>
<td>Local Competition...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>1E-1. Public Posting–Local Competition Announcement.</td>
<td>Yes</td>
<td>Local Competition...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>1E-4. Public Posting–CoC-Approved Consolidated Application</td>
<td>Yes</td>
<td>Consolidated Appl...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>3A. Written Agreement with Local Education or Training Organization.</td>
<td>No</td>
<td>Written Agreement...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>3A. Written Agreement with State or Local Workforce Development Board.</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3B-3. Summary of Racial Disparity Assessment.</td>
<td>Yes</td>
<td>Summary of Racial...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>4A-7a. Project List-Homeless under Other Federal Statutes.</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>No</td>
<td>3A.5c Employment ...</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>Other</td>
<td>No</td>
<td>HMIS Documentation</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>Other</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Attachment Details

Document Description: FY 2019 CoC Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description:

Attachment Details

Document Description: CE Assessment Tool

Attachment Details

Document Description: Projects Accepted Notification

Attachment Details

Document Description: Project Rejected/Reduced Notification
Attachment Details

Document Description: Local Competition Deadline

Attachment Details

Document Description: Local Competition Public Announcement

Attachment Details

Document Description: Consolidated Application

Attachment Details

Document Description: Written Agreement with Local Education or Training Organization

Attachment Details

Document Description:
Document Description: Summary of Racial Disparity Assessment

Attachment Details

Document Description:

Attachment Details

Document Description: 3A.5c Employment Opportunities and Outreach

Attachment Details

Document Description: HMIS Documentation

Attachment Details

Document Description:
Submission Summary

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

<table>
<thead>
<tr>
<th>Page</th>
<th>Last Updated</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A. Identification</td>
<td>09/18/2019</td>
</tr>
<tr>
<td>1B. Engagement</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>1C. Coordination</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>1D. Discharge Planning</td>
<td>No Input Required</td>
</tr>
<tr>
<td>1E. Local CoC Competition</td>
<td>09/22/2019</td>
</tr>
<tr>
<td>1F. DV Bonus</td>
<td>09/24/2019</td>
</tr>
<tr>
<td>2A. HMIS Implementation</td>
<td>09/22/2019</td>
</tr>
<tr>
<td>2B. PIT Count</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>3A. System Performance</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>3B. Performance and Strategic Planning</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>4A. Mainstream Benefits and Additional Policies</td>
<td>09/22/2019</td>
</tr>
<tr>
<td>4B. Attachments</td>
<td>09/30/2019</td>
</tr>
<tr>
<td>Submission Summary</td>
<td>No Input Required</td>
</tr>
</tbody>
</table>
Total Population PIT Count Data

<table>
<thead>
<tr>
<th></th>
<th>2016 PIT</th>
<th>2017 PIT</th>
<th>2018 PIT</th>
<th>2019 PIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count</td>
<td>541</td>
<td>582</td>
<td>1061</td>
<td>1035</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>490</td>
<td>489</td>
<td>958</td>
<td>1030</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>47</td>
<td>42</td>
<td>61</td>
<td>0</td>
</tr>
<tr>
<td>Total Sheltered Count</td>
<td>537</td>
<td>531</td>
<td>1019</td>
<td>1030</td>
</tr>
<tr>
<td>Total Unsheltered Count</td>
<td>4</td>
<td>51</td>
<td>42</td>
<td>5</td>
</tr>
</tbody>
</table>

Chromatically Homeless PIT Counts

<table>
<thead>
<tr>
<th></th>
<th>2016 PIT</th>
<th>2017 PIT</th>
<th>2018 PIT</th>
<th>2019 PIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count of Chronically Homeless Persons</td>
<td>6</td>
<td>57</td>
<td>66</td>
<td>78</td>
</tr>
<tr>
<td>Sheltered Count of Chronically Homeless Persons</td>
<td>6</td>
<td>6</td>
<td>38</td>
<td>74</td>
</tr>
<tr>
<td>Unsheltered Count of Chronically Homeless Persons</td>
<td>0</td>
<td>51</td>
<td>28</td>
<td>4</td>
</tr>
</tbody>
</table>
# Homeless Households with Children PIT Counts

<table>
<thead>
<tr>
<th></th>
<th>2016 PIT</th>
<th>2017 PIT</th>
<th>2018 PIT</th>
<th>2019 PIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children</td>
<td>124</td>
<td>124</td>
<td>390</td>
<td>287</td>
</tr>
<tr>
<td>Sheltered Count of Homeless Households with Children</td>
<td>124</td>
<td>123</td>
<td>390</td>
<td>287</td>
</tr>
<tr>
<td>Unsheltered Count of Homeless Households with Children</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

# Homeless Veteran PIT Counts

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Sheltered and Unsheltered Count of the Number of Homeless Veterans</td>
<td>15</td>
<td>2</td>
<td>0</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Sheltered Count of Homeless Veterans</td>
<td>15</td>
<td>2</td>
<td>0</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Unsheltered Count of Homeless Veterans</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>
### HMIS Bed Coverage Rate

<table>
<thead>
<tr>
<th>Project Type</th>
<th>Total Beds in 2019 HIC</th>
<th>Total Beds in 2019 HIC Dedicated for DV</th>
<th>Total Beds in HMIS</th>
<th>HMIS Bed Coverage Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Shelter (ES) Beds</td>
<td>957</td>
<td>0</td>
<td>957</td>
<td>100.00%</td>
</tr>
<tr>
<td>Safe Haven (SH) Beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td>Transitional Housing (TH) Beds</td>
<td>24</td>
<td>0</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Rapid Re-Housing (RRH) Beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td>Permanent Supportive Housing (PSH) Beds</td>
<td>270</td>
<td>0</td>
<td>247</td>
<td>91.48%</td>
</tr>
<tr>
<td>Other Permanent Housing (OPH) Beds</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Total Beds</strong></td>
<td><strong>1,251</strong></td>
<td><strong>0</strong></td>
<td><strong>1204</strong></td>
<td><strong>96.24%</strong></td>
</tr>
</tbody>
</table>
# 2019 HDX Competition Report

## HIC Data for MA-502 - Lynn CoC

### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

<table>
<thead>
<tr>
<th>Chronically Homeless Bed Counts</th>
<th>2016 HIC</th>
<th>2017 HIC</th>
<th>2018 HIC</th>
<th>2019 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC</td>
<td>53</td>
<td>67</td>
<td>36</td>
<td>232</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Households with Children</th>
<th>2016 HIC</th>
<th>2017 HIC</th>
<th>2018 HIC</th>
<th>2019 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH units available to serve families on the HIC</td>
<td>116</td>
<td>85</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Rapid Rehousing Beds Dedicated to All Persons

<table>
<thead>
<tr>
<th>All Household Types</th>
<th>2016 HIC</th>
<th>2017 HIC</th>
<th>2018 HIC</th>
<th>2019 HIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>RRH beds available to serve all populations on the HIC</td>
<td>280</td>
<td>245</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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.

<table>
<thead>
<tr>
<th></th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Submitted FY 2017</td>
<td>FY 2018</td>
<td>Submitted FY 2017</td>
</tr>
<tr>
<td>1.1 Persons in ES and SH</td>
<td>1498</td>
<td>334</td>
<td>368</td>
</tr>
<tr>
<td>1.2 Persons in ES, SH, and TH</td>
<td>1565</td>
<td>562</td>
<td>370</td>
</tr>
</tbody>
</table>

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.
### FY2018 - Performance Measurement Module (Sys PM)

<table>
<thead>
<tr>
<th></th>
<th>Universe (Persons)</th>
<th>Average LOT Homeless (bed nights)</th>
<th>Median LOT Homeless (bed nights)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Submitted FY 2017</td>
<td>FY 2018</td>
<td>Submitted FY 2017</td>
</tr>
<tr>
<td></td>
<td>FY 2017</td>
<td>FY 2018</td>
<td>FY 2018</td>
</tr>
<tr>
<td></td>
<td>FY 2017</td>
<td>FY 2018</td>
<td>FY 2018</td>
</tr>
<tr>
<td></td>
<td>FY 2017</td>
<td>FY 2018</td>
<td>FY 2018</td>
</tr>
<tr>
<td>1.1 Persons in ES, SH, and PH (prior to &quot;housing move in&quot;)</td>
<td>1498</td>
<td>394</td>
<td>486</td>
</tr>
<tr>
<td>1.2 Persons in ES, SH, TH, and PH (prior to &quot;housing move in&quot;)</td>
<td>1585</td>
<td>442</td>
<td>502</td>
</tr>
</tbody>
</table>
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.

<table>
<thead>
<tr>
<th>Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)</th>
<th>Returns to Homelessness in Less than 6 Months</th>
<th>Returns to Homelessness from 6 to 12 Months</th>
<th>Returns to Homelessness from 13 to 24 Months</th>
<th>Number of Returns in 2 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exit was from SO</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Exit was from ES</td>
<td>112</td>
<td>13</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Exit was from TH</td>
<td>15</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Exit was from SH</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Exit was from PH</td>
<td>191</td>
<td>17</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>TOTAL Returns to Homelessness</td>
<td>318</td>
<td>31</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts
This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

<table>
<thead>
<tr>
<th></th>
<th>January 2017 PIT Count</th>
<th>January 2018 PIT Count</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Total PIT Count of sheltered and unsheltered persons</td>
<td>582</td>
<td>1061</td>
<td>479</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>489</td>
<td>958</td>
<td>469</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>42</td>
<td>61</td>
<td>19</td>
</tr>
<tr>
<td>Total Sheltered Count</td>
<td>531</td>
<td>1019</td>
<td>488</td>
</tr>
<tr>
<td>Unsheltered Count</td>
<td>51</td>
<td>42</td>
<td>-9</td>
</tr>
</tbody>
</table>

Metric 3.2 – Change in Annual Counts

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Unduplicated Total sheltered homeless persons</td>
<td>1700</td>
<td>562</td>
<td>-1138</td>
</tr>
<tr>
<td>Emergency Shelter Total</td>
<td>1650</td>
<td>334</td>
<td>-1316</td>
</tr>
<tr>
<td>Safe Haven Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Transitional Housing Total</td>
<td>210</td>
<td>229</td>
<td>19</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>130</td>
<td>128</td>
<td>-2</td>
</tr>
<tr>
<td>Number of adults with increased earned income</td>
<td>15</td>
<td>26</td>
<td>11</td>
</tr>
<tr>
<td>Percentage of adults who increased earned income</td>
<td>12%</td>
<td>20%</td>
<td>8%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>130</td>
<td>128</td>
<td>-2</td>
</tr>
<tr>
<td>Number of adults with increased non-employment cash income</td>
<td>5</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>4%</td>
<td>8%</td>
<td>4%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults (system stayers)</td>
<td>130</td>
<td>128</td>
<td>-2</td>
</tr>
<tr>
<td>Number of adults with increased total income</td>
<td>15</td>
<td>28</td>
<td>13</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>12%</td>
<td>22%</td>
<td>10%</td>
</tr>
</tbody>
</table>
2019 HDX Competition Report  
**FY2018 - Performance Measurement Module (Sys PM)**

Metric 4.4 – Change in earned income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>12</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Number of adults who exited with increased earned income</td>
<td>0</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Percentage of adults who increased earned income</td>
<td>0%</td>
<td>25%</td>
<td>25%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>12</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Number of adults who exited with increased non-employment cash income</td>
<td>10</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>Percentage of adults who increased non-employment cash income</td>
<td>83%</td>
<td>75%</td>
<td>-8%</td>
</tr>
</tbody>
</table>

Metric 4.6 – Change in total income for adult system leavers

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Number of adults who exited (system leavers)</td>
<td>12</td>
<td>16</td>
<td>4</td>
</tr>
<tr>
<td>Number of adults who exited with increased total income</td>
<td>10</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>Percentage of adults who increased total income</td>
<td>83%</td>
<td>75%</td>
<td>-8%</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th>Universe: Person with entries into ES, SH or TH during the reporting period.</th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>785</td>
<td>443</td>
<td>-342</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td>326</td>
<td>198</td>
<td>-128</td>
</tr>
<tr>
<td>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)</td>
<td>459</td>
<td>245</td>
<td>-214</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Universe: Person with entries into ES, SH, TH or PH during the reporting period.</th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>858</td>
<td>890</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td>123</td>
<td>98</td>
<td>-25</td>
</tr>
<tr>
<td>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.)</td>
<td>735</td>
<td>792</td>
<td>57</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th></th>
<th>Submitted FY 2017</th>
<th>FY 2018</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons who exit Street Outreach</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Of persons above, those who exited to temporary &amp; some institutional destinations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>% Successful exits</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Metric 7b.1 – Change in exits to permanent housing destinations
### FY2018 - Performance Measurement Module (Sys PM)

<table>
<thead>
<tr>
<th>Metric 7b.2 – Change in exit to or retention of permanent housing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Submitted FY 2017</strong></td>
</tr>
<tr>
<td>Universe: Persons in all PH projects except PH-RRH</td>
</tr>
<tr>
<td>Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations</td>
</tr>
<tr>
<td>% Successful exits/retention</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Submitted FY 2017</strong></th>
<th><strong>FY 2018</strong></th>
<th><strong>Difference</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing</td>
<td>812</td>
<td>1</td>
</tr>
<tr>
<td>Of the persons above, those who exited to permanent housing destinations</td>
<td>402</td>
<td>1</td>
</tr>
<tr>
<td>% Successful exits</td>
<td>50%</td>
<td>100%</td>
</tr>
</tbody>
</table>
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

<table>
<thead>
<tr>
<th></th>
<th>All ES, SH</th>
<th>All TH</th>
<th>All PSH, OPH</th>
<th>All RRH</th>
<th>All Street Outreach</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Number of non-DV Beds on HIC</td>
<td>438</td>
<td>438</td>
<td>438</td>
<td>957</td>
<td>97</td>
</tr>
<tr>
<td>2. Number of HMIS Beds</td>
<td>438</td>
<td>438</td>
<td>438</td>
<td>957</td>
<td>57</td>
</tr>
<tr>
<td>3. HMIS Participation Rate from HIC (%)</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
<td>58.76</td>
</tr>
<tr>
<td>4. Unduplicated Persons Served (HMIS)</td>
<td>1369</td>
<td>1515</td>
<td>1565</td>
<td>1483</td>
<td>74</td>
</tr>
<tr>
<td>5. Total Leavers (HMIS)</td>
<td>444</td>
<td>665</td>
<td>678</td>
<td>842</td>
<td>25</td>
</tr>
<tr>
<td>6. Destination of Don’t Know, Refused, or Missing (HMIS)</td>
<td>183</td>
<td>39</td>
<td>42</td>
<td>68</td>
<td>10</td>
</tr>
<tr>
<td>7. Destination Error Rate (%)</td>
<td>41.22</td>
<td>5.86</td>
<td>6.19</td>
<td>8.08</td>
<td>40.00</td>
</tr>
</tbody>
</table>
## Date of PIT Count

| Date CoC Conducted 2019 PIT Count | 1/27/2019 |

## Report Submission Date in HDX

<table>
<thead>
<tr>
<th>Submitted On</th>
<th>Met Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019 PIT Count Submittal Date</td>
<td>5/1/2019</td>
</tr>
<tr>
<td>2019 HIC Count Submittal Date</td>
<td>5/1/2019</td>
</tr>
<tr>
<td>2018 System PM Submittal Date</td>
<td>6/24/2019</td>
</tr>
</tbody>
</table>
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1.0 - Introduction
In accordance with the requirements of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, the Continuum of Care Interim Rule, and Department of Housing and Urban Development (HUD) notice CPD-17-01, the Lynn Continuum of Care (CoC) has developed and implemented a Coordinated Entry System (CES). As defined at 24 CFR 578.3, Coordinated Entry (CE), also known as Centralized or Coordinated Assessment, is “...a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.” Further provisions provided at 24 CFR 578.7(a)(8) establish that, “in consultation with recipients of Emergency Solutions Grants program funds within the geographic area” the designed CES should be one that “provides an initial, comprehensive assessment of the needs of individuals and families for housing and services.”

The Lynn CoC’s CES has been designed to meet the core requirements established by HUD and to meet the specific needs of individuals and families within the City of Lynn experiencing, or at risk of experiencing, homelessness. Specifically, the CES has been designed around the following core principles:

- **Low-Barrier Access** – Access to the CES should be available without preconditions based on perceived barriers to housing or services, including substance use, lack of employment or income, or having a criminal record. Participating programs and agencies should adopt low-barrier access to the maximum extent feasible based on their individual program and agency needs or requirements.

- **Collaboration** – A central component of the CES is collaboration among housing and service providers. The CES should encourage further collaboration, facilitating a systematic approach to the delivery of housing and services to individuals and families experiencing homelessness or at-risk of experiencing homelessness in the City of Lynn.

- **Housing First** – The CES should adopt a Housing First approach, seeking to house consumers without preconditions. Participating providers should be encouraged to adopt a Housing First model when appropriate, and consonant with their individual agency and program requirements.

- **Prioritization** – Limited resources should be allocated in the most efficient and effective manner possible. Resources should first be directed to households with the most severe service needs. Severity of service need shall be defined locally, and additional prioritization factors, such as existing level of engagement with a provider, may be considered in conjunction with service need.

- **Consumer Choice** – Clients should be offered opportunities to participate in their service plan. Consumers should also be offered ongoing opportunities to participate in the development, oversight, and evaluation of the CES.

- **Client Focus** – The CES should promote client-centered practices ensuring that all are treated with respect and recognized as an individual.
- **Transparency** – The CES should offer clear and concise directives with open communication.
- **Diversity** – The CES must acknowledge and honor tribal sovereignty; respect cultural, regional, programmatic, linguistic, and philosophical differences.
- **Informed Decision Making** – On an ongoing basis, the CES should inform CoC decision making to identify best system practices and promote collaborative and inclusive planning and decision making.
- **Continuous Quality Improvement** – The CES should be a dynamic system that is able to adapt to the evolving needs of the community. The CoC shall alter and improve upon the CES as appropriate using a collaborative planning process.

This manual provides the policies and procedures for operation of the Lynn CoC’s CES, as well as the roles and responsibilities of participant agencies.

### 2.0 - Geographic Coverage
The Lynn Continuum of Care geographic service area is comprised of the City of Lynn. The Coordinated Entry System serves households throughout the CoC’s entire geographic area and is additionally available to households experiencing homelessness that have been displaced from the CoC’s geographic area.

### 3.0 - Target Population
The Coordinated Entry System is accessible and available to all households that are homeless, or at imminent risk of experiencing homelessness (as defined by HUD), who either reside in, or have been displaced from, the CoC’s service area. The CES targets resources to households with the most severe service needs and longest histories of homelessness (see Section 8.3 - Prioritization).

### 4.0 - Equal Access and Non-Discrimination
The CES is available to all eligible persons regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status. The CES process and all participating agencies are required to comply with all applicable nondiscrimination and equal opportunity provisions of Federal civil rights laws as specified at 24 CFR 5.105(a), as well as all applicable state and/or local civil rights laws, including, but not limited to the Fair Housing Act, section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Title II of the Americans with Disabilities Act.

### 5.0 - Governance and Roles
The CES is governed by the Lynn Continuum of Care, with oversight from the CoC’s Executive Committee. Day to day operation of the CES is the responsibility of the **CE project manager**, staffed by Lynn Economic Opportunity, Inc. Further responsibilities of the **project manager** are detailed throughout
the CES policies and procedures and include, conducting intake and assessment, agency and client outreach, and data management and reporting for the CES.

Minor changes to the CES to improve efficacy and efficiency may be made on a pilot or trial basis by the project manager in consultation with participating agencies, provided that any such changes be presented to, reviewed, and approved, altered, or declined by the CoC Executive Committee, Board, and/or full membership within 90 days of implementation. Significant changes to the CES, such as those impacting what households may be eligible for housing and/or services, or how uniform decision-making is conducted must be reviewed and approved by one of the above-mentioned bodies prior to implementation.

6.0 - Participation
All member agencies of the Lynn CoC receiving funds from CoC grants are required to participate in the CES, and agencies not receiving funding from the CoC are encouraged to participate through ongoing outreach. Agencies operating CoC-funded permanent supportive housing programs are required to fill all vacancies in such programs via the CE process.

Agencies operating access points are required to follow all CE policies and procedures in such operation, including those related to participant access, intake, and assessment, as detailed in Section 8.0 - System Process.

7.0 - HMIS
As available, the CES shall utilize the Lynn CoC’s Homeless Management Information System (HMIS) for data collection and reporting purposes. Participating agencies operating access points shall maintain client records in the HMIS and follow all applicable CoC policies related to the utilization of HMIS (see Section 9.5 - Data Collection and Privacy Protections for further details).

8.0 - System Process
8.1 - Access
Interested parties may access the CES through one of several access points throughout the CoC’s service area. These access points are:

Lynn Housing Authority and Neighborhood Development (LHAND)
Family Success Center
29 Curwin Terrace
Lynn, MA 01905

Lynn Economic Opportunity, Inc. (LEO)
156 Broad Street
Lynn, MA 01901
Agencies operating access points are responsible for determining hours of operation for their CE site, as well as ensuring adequate assessment staffing during such times. Except in instances where a household is seeking emergency services (e.g., emergency shelter) or presents outside of normal hours of operation, households presenting at an access point, seeking housing and/or services, shall receive an initial intake, administered by access point staff upon initial contact. In instances where a household has accessed emergency services or presented outside of normal hours of operation, initial intake shall be offered, and if accepted, conducted within 24 hours of resumption of CE operations. Initial intake consists of pages one (1) and two (2) of the CE assessment form (Appendix B), gathering pertinent information regarding household composition and the household's current housing crisis and history of homelessness.

All access points shall provide CE intake and assessment to any household presenting for services, regardless of household composition or characteristics. Though agencies operating access points may have a focus on specific sub-populations, exclusivity to such sub-populations is not permitted in administration of CE assessments. All people in different populations and subpopulations in the CoC’s geographic area, including households experiencing chronic homelessness, veteran households, families with children, unaccompanied youth, and survivors of domestic violence, shall have equal access to the CES regardless of which access point they seek services through. Additionally, households may not be screened out of the coordinated entry process due to perceived barriers to housing or services (lack of income, substance use, domestic violence history, etc.).

Emergency Services

The CES process shall not disrupt access to emergency services by households seeking housing and/or services and participation in the CES may not be a precondition to access of emergency services, including emergency shelter, at any access point.

Access via Outreach

To ensure that all potentially eligible households are able to access the CES with ease, intake and assessment may be conducted outside of regular access points provided that the assessor conducting the intake and assessment has met the training requirements outlined in Section 9.7 - Training. Examples of instances in which outreach intake and assessment may be appropriate include, but not be limited to, providing accommodation for persons with disabilities, engaging with unsheltered
households reluctant to seek services via an access point, or for households reluctant to engage in services who may have existing service connections with agencies not operating an access point.

8.2 - Intake and Assessment
Access points are staffed with assessors trained in conducting intake and assessment, and utilize a standardized, multi-tiered assessment process. The assessment gathers pertinent information to establish a client record, identify programs and services for which household may be eligible, and, if applicable, establish the severity of a household’s service need via a vulnerability index.

As noted in section 8.1 - Access, engagement with the CES begins with the completion of an initial intake form. Based on the information obtained via the initial intake, in cases where a household is either not eligible for CoC housing or services (e.g., the household is not homeless, but is facing an upcoming acute housing crisis), or would be best served via mainstream resources (e.g., state-funded prevention or Emergency Assistance programs), an appropriate referral is made directly by assessing staff. For households experiencing homelessness, assessing staff shall administer the CE vulnerability index (VI-SPDAT or Family VI-SPDAT). Efforts to complete the vulnerability index shall be made at the time of initial intake, however, the vulnerability index may be completed in multiple sessions or at a later date as appropriate based on the household's level of engagement.

All access points shall utilize the same standardized assessment tool, varying only for households of adults accompanied by children and persons at-risk of experiencing homelessness. For households composed of individuals a standard VI-SPDAT vulnerability assessment is utilized to determine severity of service need, while for households composed of multiple persons, a separate Family VI-SPDAT is utilized.

Intake and assessments shall be forwarded to the project manager by the access point within two (2) business days of completion. The project manager shall ensure all client records are entered and maintained in the HMIS, score prioritization for households, and either refer households to available programs or place them on the CE wait list.

Participant Autonomy

Participants in the CES should be afforded the maximum amount of autonomy and participation in service-planning practical when access the CES. This includes declining to answer intake and/or assessment questions without penalty to housing and service options, as well as declining specific referral options without penalty to the availability of other housing or service options. The assessment process may not require disclosure of specific disabilities or diagnosis; such disclosures may only be obtained for purposes of determining program eligibility to make appropriate referrals. Participant choice shall be incorporated throughout all stages of the CES to the maximum extent practical.

8.3 - Prioritization
Households assessed via the CES are prioritized for referral to permanent supportive housing (PSH) and rapid re-housing programs. Access to emergency service interventions, such as emergency shelter will
not be based upon CE prioritization. Prioritization follows policy set forth in the CoC’s Policy to End Chronic Homelessness and Adoption of CPD-16-11 (Section 6.6 of CoC Governance Charter and Bylaws).

Households are ranked by the following factors (in order):

- Whether or not the household is *chronically homeless*.
- The severity of service need exhibited by the household, as determined by the CE assessment’s vulnerability index (VI-SPDAT).
- The length of time the household has experienced homelessness.

Data collected from the assessment process may not be utilized to discriminate or prioritize households for housing and services on any federal, state, or local protected basis. Once given a priority ranking, active CES clients are referred to housing and service programs as availability presents. The CES *project manager* is responsible for maintaining the prioritized wait list. When a vacancy occurs in a permanent supportive housing program, the highest priority household meeting the program’s criteria (unit size, etc.) is referred by the *project manager* for eligibility screening by the program. Area rapid re-housing resources are targeted to high priority households that do not meet programmatic eligibility criteria for permanent supportive housing, as well as homeless households not meeting the definition of *chronic homeless* with the longest histories of homelessness and severe service needs.

### 8.4 - Referrals

Based on a household’s assessment, priority ranking, and individual preferences, referrals will be made to programs as availability presents. When availability in a program is reported, the reporting program shall specify any specific eligibility requirements, which shall then be cross-referenced by the *project manager*. Final eligibility determinations are the responsibility of individual programs, and the CES shall not screen clients out of the process during intake, assessment, or prioritization.

**Permanent Supportive Housing Referrals**

PSH programs fill vacancies exclusively through CE referrals. Participating PSH programs shall report upcoming availability to the *project manager* via an online reporting form within two (2) business days of an actual or anticipating vacancy being identified. Based on the specifics of the vacancy, a list of potentially eligible households is generated, ranked by priority. The highest priority household is then referred to the reporting program within two (2) business days of vacancy notification.

The *project manager* shall make efforts to determine if a household meets project eligibility requirements and is able to produce the documentation required by the project for entry, prior to referral. In cases where a household will not meet eligibility requirements, or be unable to document that the household meets eligibility requirements, the household shall not be referred, but will retain their position on the CE list while efforts to acquire documentation continue, or until availability opens in an appropriate project.

Once referred, the receiving program is responsible for contacting and screening the household for eligibility. Receiving programs may only reject referrals in limited circumstances including:

- the vacancy was erroneously reported (i.e., there is no available vacancy);
• the household is unreachable for five (5) consecutive business days and three (3) distinct outreach attempts;
• the household misses two (2) scheduled intake appointments;
• the household is denied by an independent third-party involved with the eligibility screening process (property owner, etc.);
• the household presents for eligibility screening with characteristics inconsistent with those reported to the CES (additional household members, not meeting the definition of chronically homeless, homeless, etc.);
• the household would present a detrimental impact to the health and/or safety of other program participants and could not be reasonably housed in the program; and/or
• the program determines for other reasons, documented and reported to the CES, that the household does not meet programmatic eligibility criteria.

In the case of a rejection, the receiving program is responsible for contacting the project manager within two (2) business days citing the reason for rejection and requesting a new referral.

Rapid Re-Housing Referrals

Within the Lynn CoC’s service area, rapid re-housing assistance is available via a variety of sources, including Emergency Solutions Grant funded programs, as well as mainstream state-funded sources. Emergency Solutions Grant rapid re-housing programs accept clients exclusively via the CES, while mainstream sources, depending on the specific program, may take clients via a combination of CES referrals and internal protocols or exclusively via internal protocols.

Referrals to rapid re-housing programs shall be made by the project manager utilizing the pool of CE clients generated via the prioritization process. Referrals shall target the following households:

• chronically homeless households who do not meet programmatic eligibility criteria for available PSH placement; and
• homeless households not meeting the criteria of chronic homelessness with the longest histories of homelessness and severe service needs.

Consumer Choice

Households may decline a referral while maintaining their current priority ranking if the program does not meet the households indicated needs and/or preferences as documented via assessment (e.g., a household with a high priority ranking may decline referral to PSH in order to pursue assistance via a RRH program).

8.5 - Placement

Once a household has been referred and determined eligible by the accepting program, placement into the applicable program shall be made as soon as logistically possible. If a household is unresponsive after having been determined eligible, defined as unreachable for five (5) consecutive business days and three (3) distinct outreach attempts, the accepting program may opt to reject the referral and move to
the next household awaiting referral. In such cases, the originally referred household will retain their priority ranking upon re-engagement with the CES.

8.6 - Appeals and Grievances
Clients may appeal adverse eligibility determinations directly to the agency issuing the adverse action. CES referral decisions may be appealed in writing by households to either the access point which conducted the original assessment, or directly to the CES project manager. Reconsideration of the initial determination will include a case conference with the project manager and agency that conducted the assessment.

All clients must be informed of their right to appeal, as well as their right to file non-discrimination complaints at the point of intake by the assessing agency.

9.0 - Additional Policies

9.1 - Access to Coordinated Entry for Households Experiencing Domestic Violence
In accordance with 24 CFR 578.7(a)(8), the Lynn CoC’s Coordinated Entry System (CES) requires that households experiencing domestic violence be provided: immediate referral and connection to victim service providers (if desired), full access to the housing and services available through the CES, and accommodation in procedures for intake and assessment to protect household safety.

Referral to Victim Service Provider—Households identified as experiencing domestic violence who seek services via the CES are to be provided information on, and offered referral to, a local victim service provider by the agency conducting the assessment.

Full CES Access—Regardless of whether a household pursues and/or receives services from a victim service provider, they will be provided full access to the housing and services available via the CES. Households experiencing domestic violence must not be ‘steered’ towards or away from participation in any particular program or service, but should be presented with all available options, except insofar as an evidence-based assessment tool may indicate a higher level of service need for households experiencing domestic violence and insofar as all households experiencing domestic violence will be offered referral to a victim service provider.

Alternative Assessment Procedures—In situations where seeking services in-person at a CES access point would pose or create a safety risk for the household, participating agencies may conduct assessment via virtual means (e.g., phone or email), provided that data is collected and stored in a manner consistent with applicable CoC and HMIS confidentiality requirements (for non-victim service providers) or VAWA confidentiality requirements (for victim service providers).

1 The phrase ‘households experiencing domestic violence’ shall be used to encompass households fitting category 4 of HUD’s Definition of ‘Homeless’ (24 CFR 578.3), as well as those at-risk of experiencing homelessness who are fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, or stalking (including human trafficking).
9.2 - Access to Coordinated Entry for Veteran Households
Through the standardized assessment tool utilized with the CES, veteran households are identified at intake. All veteran households experiencing, or at-risk of experiencing, homelessness shall be referred to the Lynn CoC’s Veteran’s Sub-Committee for connection with all applicable veteran specific resources, including those offered through the Department of Veterans Affairs (VA) and the City of Lynn Department of Veterans Services.

All veteran households shall also have full access to the housing and services available through the CES and related programs.

9.3 - Coordination with Emergency Solutions Grants
Within the Lynn CoC’s geographic service area, Emergency Solutions Grants (ESG) funds are utilized for housing and services via two funding streams, one directly via the City of Lynn and one via the Massachusetts Department of Housing and Community Development. Funds are utilized for a variety of activities supporting rapid re-housing programs, homelessness prevention programs, and the operation of street outreach, among others.

The Lynn CoC coordinates activities with ESG recipients and has established linkages for CES clients to and from ESG funded activities. All local sub-recipients of ESG funding are participating agencies in the CES. Clients are referred directly to the CES from ESG sub-recipient outreach activities. In instances where a household seeking assistance through the Coordinated Entry System is at-risk of experiencing homelessness, a referral is made to the appropriate homelessness prevention resources for the household’s situation, including ESG prevention assistance (see Coordination with Homelessness Prevention Programs for further details).

Rapid Re-Housing (RRH) Assistance
RRH assistance is available within the CoC’s geographic service area for households experiencing homelessness as defined under paragraphs 1 and/or 4 of the HUD definition. Clients for this assistance are taken exclusively through the CES according to CoC/ESG recipient priority ranking guidelines. Currently, the households prioritized for assistance via ESG RRH funding are:

- chronically homeless households who do not meet programmatic eligibility criteria for available PSH placement; and
- homeless households not meeting the criteria of chronic homelessness with the longest histories of homelessness and severe service needs.

To direct assistance to the above noted priority groups, referrals will be pulled from the full CE client list, sorted by system-wide priority indicators (see Section 8.3 - Prioritization). All potentially eligible households may be referred for ESG RRH assistance, including those not in a high priority group, and assistance may be distributed on a first-come-first-serve basis.

9.4 - Coordination with Homelessness Prevention Programs
In addition to RRH assistance programs, the Lynn CoC’s geography is served by several homelessness prevention programs, via both ESG programs as well as mainstream, state-funded programs.
Coordination between these programs and the CES provide linkages for households to be referred either from the CES to applicable prevention programs or from prevention programs to the CES.

The Lynn Housing Authority and Neighborhood Development administers homelessness prevention programs via ESG funding and state-funding (e.g., RAFT). Households being assessed as part of Coordinated Entry that are not experiencing homelessness, but are at-risk of experiencing homelessness shall be referred to homelessness prevention resources at the LHAND after initial intake and before a vulnerability assessment is conducted. Referral shall be made directly by the staff conducting assessments at the applicable access point. Due to the LHAND’s role in operating an access point as part of the CES, households seeking assistance through homelessness prevention programs who are experiencing homelessness may access the CES directly through LHAND’s Family Success Center access point.

9.5 - Data Collection and Privacy
All data collected from any individual or family applying for and/or receiving assistance via the Coordinated Entry System shall be kept secure and confidential by any participating agency collecting, receiving, or transmitting such information. Data collection, storage, and access practices shall comply with applicable HMIS standards, namely the ‘Homeless Management Information Systems (HMIS); Data and Technical Standards Final Notice’ or any subsequent technical rules and/or regulations, as well as applicable local, state, and federal laws.

9.6 - Marketing and Outreach
Marketing of the CES and outreach at the client and agency level is the responsibility of the project manager, who shall:

- conduct ongoing outreach to local organizations serving households that may benefit from the CES; and
- conduct ongoing outreach throughout the community to ensure awareness of the CES among the general public, in particular those households that may benefit from the CE process.

This includes the development and distribution of marketing materials in formats most commonly utilized, and languages most commonly spoken within the CoC’s geographic service area.

Marketing efforts shall specifically focus on ensuring that eligible household are aware of, and have access to, the CES regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity, or marital status.

9.7 - Training
All staff conducting assessments at access points, or through outreach, must complete a training on the CES process as well as the administration of assessments at least annually. Ongoing development of trainings is the responsibility of the project manager and opportunities for training shall be provided at least annually. Trainings may be conducted in-person, via online ‘webinars’, or self-administered protocols and shall be updated annually.
Training materials must cover the assessment process, including when and how assessments should be administered, as well as the prioritization and referral process, including the criteria for uniform decision making.

9.8 - Ongoing Planning and Stakeholder Consultation
At least quarterly, a review of the CES shall be conducted and reported to the CoC by the project manager including the efficacy of the overall system, emerging trends and needs within the consumer base of the CES, and any proposed changes to the policies and procedures of the CES.

At least annually, feedback from provider agencies and consumers shall be solicited through surveys and/or in-person interviews to determine efficacy of the system and potential improvements to the CES process.
Appendix A – Definitions and Key Terms
This section defines key terms related to the Lynn CoC’s Coordinated Entry System. For terms defined statutorily, in instances where an official change has been made resulting in a discrepancy with the definitions listed below, the statutory definition shall prevail.

Access Point
An access point is a location designated by the CoC to serve as an entry point to the CES. All eligible clients may access the CES at any such location. Access points are staffed with trained assessors who provide intake, assessment, and/or referral for clients seeking services.

Chronically Homeless (HUD Definition)
(1) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
   (i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
   (ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;
(2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
(3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

Homeless (HUD Definition)
(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
   (i) 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;
   (ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:
   (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
   (ii) No subsequent residence has been identified; and
   (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
   (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
   (iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
   (iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or

(4) Any individual or family who:
   (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
   (ii) Has no other residence; and
   (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.
**Homeless Management Information System (HMIS)**

HUD provides that “[a] Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD’s data collection, management, and reporting standards.”

The Lynn Continuum of Care utilizes the MAHMIS as the CoC’s HMIS. Throughout this document references to HMIS shall refer to this system. Further information regarding the CoC’s HMIS can be found in Continuum Governance documents.

**Prioritization**

Prioritization refers to the process by which client assessment data is ranked to direct the most intensive services to the households with the highest service need. The process takes into account whether a household is chronically homeless, the length of time the household has experienced homelessness, and severity of service need as determined by a uniform vulnerability index. Under no circumstances does prioritization take into account specific diagnoses or disabilities when ranking households for referral to housing and/or services.
Appendix B – Assessment Tools
### COORDINATED ENTRY INTAKE

**NAME AND LONG TERM CONTACT/MAILING INFORMATION**

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<td>FIRST NAME</td>
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<td>LAST NAME</td>
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<td>PHONE</td>
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<td>STREET AND APT #</td>
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<td>CITY</td>
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**SOCIAL SECURITY NUMBER**

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**DATE OF BIRTH (MM/DD/YYYY)**

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**IDENTITY VERIFIED?**

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**U.S. CITIZEN OR LEGAL RESIDENT?**

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**U.S. MILITARY SERVICE?**

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**TYPE OF DISCHARGE**

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**GENDER**

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**ETHNICITY**

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**RACE(S)**

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**HOUSEHOLD INCOME**

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**IS HOUSEHOLD INCOME...**

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<td>IS HOUSEHOLD INCOME...</td>
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**WHAT SERVICES IS THE HOUSEHOLD SEEKING?**

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<td>WHAT SERVICES IS THE HOUSEHOLD SEEKING?</td>
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**RELATIONSHIP TO HoH:**

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<tr>
<td>RELATIONSHIP TO HoH</td>
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**ZIP CODE OF LAST PERMANENT ADDRESS:**

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<th>Detail</th>
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<tr>
<td>ZIP CODE OF LAST PERMANENT ADDRESS</td>
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</table>
**Basic Triage for Placement and/or Referral**

**Where did you stay last night?**

<table>
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<tr>
<th>Option</th>
<th>Description</th>
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<tbody>
<tr>
<td>☐ Shelter/Safe Haven</td>
<td>In a car, on the street, or other place not meant for human habitation</td>
</tr>
<tr>
<td>☐ Jail/Prison</td>
<td>Hospital/Treatment Facility</td>
</tr>
<tr>
<td>☐ With family/friends (doubled up)</td>
<td>In housing rented/owned by client</td>
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</table>

**What has caused, or contributed to, the current housing crisis?**

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
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<tbody>
<tr>
<td>☐ Unable to pay rent</td>
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<tr>
<td>☐ Problems with landlord</td>
<td></td>
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<tr>
<td>☐ Personal/family dispute</td>
<td></td>
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<tr>
<td>☐ Fire/Natural disaster</td>
<td></td>
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<tr>
<td>☐ Domestic violence</td>
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<tr>
<td>☐ For cause eviction</td>
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<tr>
<td>☐ High overcrowding</td>
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<tr>
<td>☐ Building condemned</td>
<td></td>
</tr>
<tr>
<td>☐ Other:</td>
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</table>

**What barriers exist to obtaining and retaining permanent housing?**

- [ ]

**Does the household meet the HUD definition of ‘homeless’?**

- ☐ Yes
- ☐ No
- ☐ Unknown/Refused

If ‘yes’, total length of time household has experienced homelessness: ________________

If ‘yes’, number of times household has experienced homelessness in past three (3) years: ________________

I, ________________________________ (print name), hereby authorize the Lynn Continuum of Care (CoC), including any and all member agencies, to obtain and/or release information related to my case, including that of a personal or confidential nature, as is needed for the provision of services to my household. I also authorize the entry of data pertaining to my case into the CoC’s Homeless Management Information Systems as applicable, and consent to the release of anonymous information from my case to the Department of Housing and Urban Development for the purpose of reporting on the degree of homelessness in this area. This authorization covers both the release of information contained in this form and information to be compiled during the course of service. Further, I understand that a copy of this release is as valid as the original, that I have a right to receive a copy of this authorization, and that this authorization may be revoked at any time by written request.

___________________________________________  ________________
Signature                                              Date

**VI-SPDAT Score:**

- ☐ Chronically Homeless
- ☐ Severe Service Need

**Length of Homelessness:**

**Outcome:**
Pre-Survey Questions
Name: ____________________________________________________
Consent to participate: □ Y □ N

If the person is 60 years of age or older, then score 1.

A. History of Housing and Homelessness
1. Where do you sleep most frequently?
   □ Shelters  □ Safe Haven
   □ Transitional Housing  □ Outdoors
   □ Other  □ Refused

   If the person answers anything other than 'shelter', 'transitional housing', or 'safe haven', then score 1.

2. How long has it been since you lived in permanent stable housing?
   ______  □ 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 totaling 12+ months, then score 1.

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 a 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.

5. Have you been attacked or beaten up since you've become homeless?
   □ Y □ N □ Refused

6. Have you threatened to or tried to harm yourself or anyone else in the last year?
   □ Y □ N □ Refused

   If 'YES' to any of the above, then score 1 for Risk of Harm.
7. Do you have any legal stuff going on right now that may result in your being locked up, having to pay fines, or that make it more difficult to rent a place to live? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ Refused
11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? □ Y □ N □ Refused

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? □ Y □ N □ 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? □ Y □ N □ 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 relationship, or because family or friends caused you to become evicted? □ Y □ N □ Refused

If 'YES', then score 1 for Social Relationships. Score: 

D. Wellness

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health? □ Y □ N □ Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs, or heart? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ Refused
19. When you are sick or not feeling well, do you avoid getting help? □ Y □ N □ Refused
20. For female respondents only: Are you currently pregnant? □ Y □ N □ Refused
VI-SPDAT
for Individuals

If 'YES' to any of the above, then score 1 for Physical Health.

21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past? □ Y □ N □ Refused
22. Will drinking or drug use make it difficult for your to stay housed or afford your housing? □ Y □ N □ 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? □ Y □ N □ Refused
   b) A past head injury? □ Y □ N □ Refused
   c) A learning disability, developmental disability, or other impairment? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ Refused
26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication? □ Y □ N □ 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? □ Y □ N □ Refused

If 'YES', score 1 for Abuse and Trauma.

Score:

Scoring Summary

Pre-Survey
A. History of Housing & Homelessness
B. Risks
C. Socialization & Daily Functions
D. Wellness

Total
Interviewer Name: __________________________________________
Interviewer Agency: _________________________________________

Pre-Survey Questions
Name:______________________________________________________
Consent to participate: □ Y □ N

Additional Adult Household Member: _______________________________________
Consent to participate: □ Y □ N

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? □ Y □ N □ Refused
4. Please provide a list of children's names and ages:
   First Name/Last Name        Age        Date of Birth


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

A. History of Housing and Homelessness
5. Where do you and your family sleep most frequently? (check one) □ Shelters □ Safe Haven
   □ Transitional Housing □ Outdoors □ Other □ 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? _____ □ Refused
7. In the last three years, how many times have you and your family been homeless? _____ □ Refused

If the family has experienced 1 or more consecutive years of homelessness, and/or 4+ episodes of homelessness totaling 12+ months, then score 1.    Score:  

Lynn CoC
Rev. Jan 2018
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 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 a 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 you've become homeless? □ Y □ N □ Refused
10. Have you or anyone in your family threatened to or tried to harm themself or anyone else in the last year? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ 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 you don't know, share a needle, or anything like that? □ Y □ N □ 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? □ Y □ N □ Refused
15. 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? □ Y □ N □ Refused

If 'YES' to question 14 or 'No' to question 15, then score 1 for Money Management. Score: 

Lynn CoC Rev. Jan 2018
16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled?  

<table>
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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?  

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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 family or friends caused your family to become evicted?  

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<th>Refused</th>
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If 'YES', then score 1 for Social Relationships.  

Score:  

---

**D. Wellness**

19. 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?  

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20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs, or heart?  

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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?  

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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?  

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23. When someone in your family is sick or not feeling well, does your family avoid getting medical help?  

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<th>Refused</th>
</tr>
</thead>
</table>

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?  

<table>
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</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Y</th>
<th>N</th>
<th>Refused</th>
</tr>
</thead>
</table>

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?  

<table>
<thead>
<tr>
<th></th>
<th>Y</th>
<th>N</th>
<th>Refused</th>
</tr>
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</table>

   b) A past head injury?  

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<th></th>
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<th>Refused</th>
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   c) A learning disability, developmental disability, or other impairment?  

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*Lynn CoC*  
*Rev. Jan 2018*
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? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ 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? □ Y □ N □ Refused

33. 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? □ Y □ N □ Refused

If '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? □ Y □ N □ Refused

35. Has any child in the family experienced abuse or trauma in the last 180 days? □ Y □ N □ Refused

36. If there are school-aged children: Do your children attend school more often than not each week? □ Y □ N □ Refused

If '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? □ Y □ N □ Refused
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed?  

☐ Y ☐ N ☐ Refused

If '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?  

☐ Y ☐ N ☐ 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?  

☐ Y ☐ N ☐ Refused

b.) 2 or more hours per day for children aged 12 or younger?  

☐ Y ☐ N ☐ Refused

41. 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?  

☐ Y ☐ N ☐ Refused

If 'NO' to question 39, or 'YES' to any of questions 40 or 41, score 1 for Parental Engagement.

Score:
**COORDINATED ENTRY INTAKE**

**NAME AND LONG TERM CONTACT/MAILING INFORMATION**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
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<tbody>
<tr>
<td><strong>FIRST NAME</strong></td>
<td></td>
</tr>
<tr>
<td><strong>LAST NAME</strong></td>
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<tr>
<td><strong>PHONE</strong></td>
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<td><strong>STREET AND APT #</strong></td>
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<tr>
<td><strong>CITY</strong></td>
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<td><strong>STATE</strong></td>
<td></td>
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<tr>
<td><strong>ZIP (9 DIGIT PREFERRED)</strong></td>
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</tbody>
</table>

**MOTHER’S MAIDEN NAME (HMIS PASSWORD)**

**SOCIAL SECURITY NUMBER**

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<th>Card</th>
<th>Card</th>
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</thead>
</table>

**DATE OF BIRTH (MM/DD/YYYY)**

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<tr>
<th>Month</th>
<th>Day</th>
<th>Year</th>
</tr>
</thead>
</table>

**IDENTITY VERIFIED?**

- [ ] Yes
- [ ] No

**SSN ASSESSED**

- [ ] Full SSN
- [ ] Partial SSN
- [ ] Doesn’t Know/Doesn’t Have
- [ ] CR

**DOB ASSESSED**

- [ ] Full DOB
- [ ] Partial/Approximate DOB
- [ ] CDNK
- [ ] CR

**U.S. CITIZEN OR LEGAL RESIDENT?**

- [ ] Yes
- [ ] No
- [ ] CDNK
- [ ] CR

**U.S. MILITARY SERVICE?**

- [ ] Yes
- [ ] No
- [ ] CDNK
- [ ] CR

**TYPE OF DISCHARGE**

- [ ] Honorable
- [ ] Other than dishonorable
- [ ] Dishonorable
- [ ] Did not ask

**GENDER**

- [ ] Male
- [ ] Female
- [ ] Transgendered M to F
- [ ] Transgendered F to M
- [ ] Gender Non-Conforming
- [ ] CDNK
- [ ] CR

**RACE(S) (CHECK ALL THAT APPLY)**

- [ ] Hispanic / Latino
- [ ] Non-Hispanic / Non-Latino
- [ ] American Indian or Alaskan Native
- [ ] Asian
- [ ] Black / African American
- [ ] Native Hawaiian or Other Pacific Islander
- [ ] White
- [ ] CDNK
- [ ] CR

*Hispanic = "Spanish, Cuban, Mexican, Puerto Rican, South or Central American, Other Spanish culture of origin."

**ETHNICITY * **

**HISPANIC / LATINO**

**NON-HISPANIC / NON-LATINO**

**CDNK**

**CR**

**DOES THE HOH HAVE A DISABLING CONDITION?**

- [ ] Yes
- [ ] No
- [ ] CDNK
- [ ] CR

**HOUSEHOLD INCOME**

**TOTAL HOUSEHOLD SIZE, INCLUDING HOH**

**INCOME**

**PER**

**INCOME SOURCES**

**IS HOUSEHOLD INCOME...**

- [ ] Below 115% of FPL?
- [ ] Below 30% AMI?
- [ ] Below 50% AMI?
- [ ] Below 80% AMI?

**WHAT SERVICES IS THE HOUSEHOLD SEEKING?**

- [ ] Relationship to HoH: ____________________________
- [ ] Zip code of last permanent address: ________________

1
**BASIC TRIAGE FOR PLACEMENT AND/OR REFERRAL**

**WHERE DID YOU STAY LAST NIGHT?**

- [ ] SHELTER/SAFE HAVEN
- [ ] IN A CAR, ON THE STREET, OR OTHER PLACE NOT MEANT FOR HUMAN HABITATION
- [ ] JAIL/PRISON
- [ ] HOSPITAL/TREATMENT FACILITY
- [ ] WITH FAMILY/FRIENDS (DOUBLED UP)
- [ ] IN HOUSING RENTED/OWNED BY CLIENT

**WHAT HAS CAUSED, OR CONTRIBUTED TO, THE CURRENT HOUSING CRISIS?**

- [ ] UNABLE TO PAY RENT
- [ ] PROBLEMS WITH LANDLORD
- [ ] PERSONAL/FAMILY DISPUTE
- [ ] FIRE/NATURAL DISASTER
- [ ] DOMESTIC VIOLENCE
- [ ] FOR CAUSE EVICTION
- [ ] HIGH OVERCROWDING
- [ ] BUILDING CONdemned
- [ ] OTHER:

**WHAT BARRIERS EXIST TO OBTAINING AND RETAINING PERMANENT HOUSING?**


**DOES THE HOUSEHOLD MEET THE HUD DEFINITION OF ‘HOMELESS’?**

- [ ] Yes
- [ ] No
- [ ] Unknown/Refused

- If ‘yes’, total length of time household has experienced homelessness?

- If ‘yes’, number of times household has experienced homelessness in past three (3) years?

---

I, _____________________________ (PRINT NAME), hereby authorize the LYNN CONTINUUM OF CARE (CoC), including any and all member agencies, to obtain and/or release information related to my case, including that of a personal or confidential nature, as is needed for the provision of services to my household. I also authorize the entry of data pertaining to my case into the CoC’S HOMELESS MANAGEMENT INFORMATION SYSTEMS as applicable, and consent to the release of anonymous information from my case to the DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT FOR THE PURPOSE OF REPORTING ON THE DEGREE OF HOMELESSNESS IN THIS AREA. THIS AUTHORIZATION COVERS BOTH THE RELEASE OF INFORMATION CONTAINED IN THIS FORM AND INFORMATION TO BE COMPILED DURING THE COURSE OF SERVICE. FURTHER, I UNDERSTAND THAT A COPY OF THIS RELEASE IS AS VALID AS THE ORIGINAL, THAT I HAVE A RIGHT TO RECEIVE A COPY OF THIS AUTHORIZATION, AND THAT THIS AUTHORIZATION MAY BE REVOKED AT ANY TIME BY WRITTEN REQUEST.

______________________________________
Signature

______________________________________
Date

**VI-SPDAT Score:**

- [ ] Chronically Homeless
- [ ] Severe Service Need
- [ ] Length of Homelessness:

Outcome:
VI-SPDAT
for Families

Interviewer Name: __________________________________________
Interviewer Agency: _________________________________________

Pre-Survey Questions

Name: _______________________________________________________
Consent to participate: □ Y □ N

Additional Adult Household Member: _______________________________
Consent to participate: □ Y □ N

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? □ Y □ N □ Refused
4. Please provide a list of children's names and ages:
First Name/Last Name Age Date of Birth

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

A. History of Housing and Homelessness

5. Where do you and your family sleep most frequently? (check one)
   □ Shelters □ Safe Haven
   □ Transitional Housing
   □ Outdoors □ Other
   □ 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? _____ □ Refused
7. In the last three years, how many times have you and your family been homeless? _____ □ Refused

If the family has experienced 1 or more consecutive years of homelessness, and/or 4+ episodes of homelessness totaling 12+ months, then score 1. Score: 

Lynn CoC
Rev. Jan 2018
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
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If the total number of interactions equals 4 or more, then score 1 for Emergency Service Use. Score: 

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Lynn CoC
Rev. Jan 2018
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25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? □ Y □ N □ 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? □ Y □ N □ Refused
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Lynn CoC Rev. Jan 2018
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☐ Y ☐ N ☐ 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?  

☐ Y ☐ N ☐ 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?  

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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?  

☐ Y ☐ N ☐ Refused

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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?  

☐ Y ☐ N ☐ Refused

If 'YES', score 1 for Abuse and Trauma.  

Score:

32. Are there any children that have been removed from the family by a child protection service within the last 180 days?  

☐ Y ☐ N ☐ Refused

33. 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?  

☐ Y ☐ N ☐ Refused

If '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?  

☐ Y ☐ N ☐ Refused

35. Has any child in the family experienced abuse or trauma in the last 180 days?  

☐ Y ☐ N ☐ Refused

36. If there are school-aged children: Do your children attend school more often than not each week?  

☐ Y ☐ N ☐ Refused

If '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?  

☐ Y ☐ N ☐ Refused

Lynn CoC  
Rev. Jan 2018
38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed? □ Y □ N □ Refused

If '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? □ Y □ N □ 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? □ Y □ N □ Refused

b.) 2 or more hours per day for children aged 12 or younger? □ Y □ N □ Refused

41. 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? □ Y □ N □ Refused

If 'NO' to question 39, or 'YES' to any of questions 40 or 41, score 1 for Parental Engagement.

Score:

Scoring Summary

Pre-Survey

A. History of Housing & Homelessness

B. Risks

C. Socialization & Daily Functions

D. Wellness

E. Family Unit

Total
# COORDINATED ENTRY INTAKE

<table>
<thead>
<tr>
<th>Name and Long Term Contact/Mailing Information</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name</td>
<td>Middle Name</td>
<td></td>
</tr>
<tr>
<td>Last Name</td>
<td>Suffix</td>
<td>☐ Name(s) are partial, incomplete, or code</td>
</tr>
<tr>
<td>Phone</td>
<td>Mother’s Maiden Name (HMIS Password)</td>
<td>☐ Client definitely does not have</td>
</tr>
<tr>
<td>Street and Apt #</td>
<td></td>
<td>☐ Client has no long-term mailing address</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
<td>Zip (9 digit preferred)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social Security Number</th>
<th>Date of Birth (mm/dd/yyyy)</th>
<th>Identity Verified?</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>/</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SSN Assessed</th>
<th>DOB Assessed</th>
<th>HOH Signed a Release?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Full SSN ☐ Partial SSN</td>
<td>☐ Full DOB ☐ Partial/approximate DOB</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>☐ Doesn’t know/doesn’t have ☐ CR</td>
<td>☐ CDNK ☐ CR</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>U.S. Citizen or Legal Resident?</th>
<th>U.S. Military Service?</th>
<th>Type of Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Honorable ☐ Other than dishonorable ☐ Dishonorable</td>
</tr>
<tr>
<td>☐ CDNK ☐ CR</td>
<td>☐ CDNK ☐ CR</td>
<td>☐ CDNK ☐ CR ☐ Did not ask</td>
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</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Male ☐ Female ☐ Transgendered M to F ☐ Transgendered F to M</td>
<td>☐ Gender Non-conforming</td>
<td>☐ CDNK ☐ CR</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ethnicity *</th>
<th>Race(s) (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Hispanic / Latino ☐ Non-Hispanic / Non-Latino</td>
<td>☐ American Indian or Alaskan Native ☐ Native/Hawaiian or Other Pac Islander</td>
</tr>
<tr>
<td>☐ CDNK ☐ CR</td>
<td>☐ Asian ☐ White</td>
</tr>
<tr>
<td>☐ Black / African American</td>
<td>☐ CDNK ☐ CR</td>
</tr>
</tbody>
</table>

*Hispanic = "Spanish, Cuban, Mexican, Puerto Rican, South or Central American, Other Spanish Culture of Origin."

<table>
<thead>
<tr>
<th>Does the HoH Have a Disabling Condition?</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td></td>
<td>☐ CDNK ☐ CR</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Household Income</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Household Size, including HoH</td>
<td>Income</td>
<td>PER</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income sources</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Is Household Income...</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Below 115% of FPL?</td>
<td>☐ Below 30% AMI?</td>
<td>☐ Below 50% AMI? ☐ Below 80% AMI?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What Services is the Household Seeking?</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relationship to HoH:</th>
<th>Zip Code of Last Permanent Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Basic Triage for Placement and/or Referral

### Where did you stay last night?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter/Safe Haven</td>
<td>In a car, on the street, or other place not meant for human habitation</td>
</tr>
<tr>
<td>Jail/Prison</td>
<td>Hospital/Treatment Facility</td>
</tr>
<tr>
<td>With family/friends (doubled up)</td>
<td>In housing rented/owned by client</td>
</tr>
</tbody>
</table>

### What has caused, or contributed to, the current housing crisis?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unable to pay rent</td>
<td>Problems with landlord</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>For cause eviction</td>
</tr>
<tr>
<td>Fire/Natural disaster</td>
<td>High overcrowding</td>
</tr>
<tr>
<td>Other:</td>
<td>Building condemned</td>
</tr>
</tbody>
</table>

### What barriers exist to obtaining and retaining permanent housing?


### Does the household meet the HUD definition of ‘homeless’?

- [ ] Yes
- [ ] No
- [ ] Unknown/Refused

If ‘yes’, total length of time household has experienced homelessness: _______________________

If ‘yes’, number of times household has experienced homelessness in past three (3) years? _______________________

I, _____________________________ (Print name), hereby authorize the Lynn Continuum of Care (CoC), including any and all member agencies, to obtain and/or release information related to my case, including that of a personal or confidential nature, as is needed for the provision of services to my household. I also authorize the entry of data pertaining to my case into the CoC’s Homeless Management Information Systems as applicable, and consent to the release of anonymous information from my case to the Department of Housing and Urban Development for the purpose of reporting on the degree of homelessness in this area. This authorization covers both the release of information contained in this form and information to be compiled during the course of service. Further, I understand that a copy of this release is as valid as the original, that I have a right to receive a copy of this authorization, and that this authorization may be revoked at any time by written request.

________________________________________   ____________________________
Signature                               Date

### VI-SPDAT Score:

- [ ] Chronically Homeless
- [ ] Severe Service Need
- [ ] Length of Homelessness:

<table>
<thead>
<tr>
<th>VI-SPDAT Score:</th>
<th>Chronically Homeless</th>
<th>Severe Service Need</th>
<th>Length of Homelessness:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Interviewer Name:** __________________________________________

**Interviewer Agency:** _________________________________________

**Pre-Survey Questions**

Name:______________________________________________________

Consent to participate: □ Y □ N

---

<table>
<thead>
<tr>
<th>If the person is 60 years of age or older, then score 1.</th>
<th>Score:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>A. History of Housing and Homelessness</th>
<th>Score:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Where do you sleep most frequently?</td>
<td>□ Shelters □ Safe Haven □ Transitional Housing □ Outdoors □ Other □ Refused</td>
<td></td>
</tr>
<tr>
<td>If the person answers anything other than 'shelter', 'transitional housing', or 'safe haven', then score 1.</td>
<td>Score:</td>
<td></td>
</tr>
<tr>
<td>2. How long has it been since you lived in permanent stable housing?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>3. In the last three years, how many times have you been homeless?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>If the person has experienced 1 or more consecutive years of homelessness, and/or 4+ episodes of homelessness totaling 12+ months, then score 1.</td>
<td>Score:</td>
<td></td>
</tr>
</tbody>
</table>

---

<table>
<thead>
<tr>
<th>B. Risks</th>
<th>Score:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4. In the past six months, how many times have you...</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>a) Received health care at an emergency department/room?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>b) Taken an ambulance to the hospital?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>c) Been hospitalized as an inpatient?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like a drunk tank, a longer stay for a more serious offence, or anything in between?</td>
<td>□ Refused</td>
<td></td>
</tr>
<tr>
<td>If the total number of interactions equals 4 or more, then score 1 for Emergency Service Use.</td>
<td>Score:</td>
<td></td>
</tr>
</tbody>
</table>

---

| 5. Have you been attacked or beaten up since you've become homeless? | □ Y □ N □ Refused |  |
| 6. Have you threatened to or tried to harm yourself or anyone else in the last year? | □ Y □ N □ Refused |  |

**If 'YES' to any of the above, then score 1 for Risk of Harm.**

---
7. Do you have any legal stuff going on right now that may result in your being locked up, having to pay fines, or that make it more difficult to rent a place to live?  □ Y □ N □ 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?  □ Y □ N □ 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?  □ Y □ N □ 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?  □ Y □ N □ Refused
11. Do you get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that?  □ Y □ N □ Refused

**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?  □ Y □ N □ 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?  □ Y □ N □ 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 relationship, or because family or friends caused you to become evicted?  □ Y □ N □ Refused

**If 'YES', then score 1 for Social Relationships.**  
**Score:**

**D. Wellness**

15. Have you ever had to leave an apartment, shelter program, or other place you were staying because of your physical health?  □ Y □ N □ Refused
16. Do you have any chronic health issues with your liver, kidneys, stomach, lungs, or heart?  □ Y □ N □ 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?  □ Y □ N □ 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?  □ Y □ N □ Refused
19. When you are sick or not feeling well, do you avoid getting help?  □ Y □ N □ Refused
20. **For female respondents only:** Are you currently pregnant?  □ Y □ N □ Refused
If 'YES' to any of the above, then score 1 for **Physical Health**.

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>21. Has your drinking or drug use led you to being kicked out of an apartment or program where you were staying in the past?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
<tr>
<td>22. Will drinking or drug use make it difficult for you to stay housed or afford your housing?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
</tbody>
</table>

If 'YES' to any of the above, then score 1 for **Substance Use**.

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>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:</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
<tr>
<td>a) A mental health issue or concern?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
<tr>
<td>b) A past head injury?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
<tr>
<td>c) A learning disability, developmental disability, or other impairment?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
</tbody>
</table>

If 'YES' to any of the above, then score 1 for **Mental Health**.

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>25. Are there any medications that a doctor said you should be taking that, for whatever reason, you are not taking?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
<tr>
<td>26. Are there any medications like painkillers that you don't take the way the doctor prescribed or where you sell the medication?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
</tbody>
</table>

If 'YES' to any of the above, score 1 for **Medications**.

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td>□ Y □ N □ Refused</td>
<td></td>
</tr>
</tbody>
</table>

If 'YES', score 1 for **Abuse and Trauma**.

| Score |
Dear Elaine,

The Ranking and Review Committee reviewed your subrecipient submissions for inclusion in the FY19 CoC NOFA response. I am pleased to share with you that they have voted to include each of your projects, for the full amounts requested, in the Priority Listing and Consolidated Application. Your projects are listed below, and the final ranking is attached.

Bridgewell Dedicated PLUS $172,188
Bridgewell, LSA, PSH $246,695 (in partnership with the Lynn Shelter Association and the LHAND)
Bridgewell Project COPE $102,042
Lynn Shelter Plus Care $903,064 (in partnership with the Lynn Shelter Association, the LHAND, and AHL)
Lynn Shelter Plus Care II $274,106 (in partnership with Eliot and the LHAND)

Thank you for the time and effort you put into these submissions and to your work daily to serve those who are homeless.

Karen

*My working hours may not be your working hours. Please do not feel obligated to reply outside of your normal work schedule.*
Dear Mark,

The Ranking and Review Committee reviewed your subrecipient submissions for inclusion in the FY19 CoC NOFA response. I am pleased to share with you that they have voted to include each of your projects, for the full amounts requested, in the Priority Listing and Consolidated Application. Your projects are listed below, and the final ranking is attached.

Lynn Shelter PSH $49,184
Bridgewell, LSA, PSH $246,695 (in partnership with Bridgewell and the LHAND)
Lynn Shelter Plus Care $903,064 (in partnership with Bridgewell, the LHAND, and AHL)
Lynn Shelter Association DV Bonus $176,336

Thank you for the time and effort you put into these submissions and to your work daily to serve those who are homeless.

Karen

My working hours may not be your working hours. Please do not feel obligated to reply outside of your normal work schedule.

Karen R. Byron, CGS
Pronoun: she/her
206 Humphrey Street
Marblehead, MA 01945-1621

781.405.9009 phone and text
www.byrongrantconsulting.com
Dear Jason and Birgitta,

The Ranking and Review Committee reviewed your subrecipient submissions for inclusion in the FY19 CoC NOFA response. I am pleased to share with you that they have voted to include each of your projects, for the full amounts requested, in the Priority Listing and Consolidated Application. Your projects are listed below, and the final ranking is attached.

LEO AHL PH $52,038  
Lynn Shelter Plus Care $903,064 (AHL only in partnership with Bridgewell, Lynn Shelter Association, and the LHAND)

Thank you for the time and effort you put into these submissions and to your work daily to serve those who are homeless.

Karen

My working hours may not be your working hours. Please do not feel obligated to reply outside of your normal work schedule.

Karen R. Byron, CGS  
Pronoun: she/her  
206 Humphrey Street  
Marblehead, MA 01945-1621  

781.405.9009 phone and text  
www.byrongrantconsulting.com
## LCoC FY19 Ranking and Review Decisions

**Tier 1** is equal to 100 percent of the combined Annual Renewal Amounts for all projects eligible for renewal for the first time plus 94 percent of the combined Annual Renewal Amounts for all other projects eligible for renewal $1,741,146

The amount in **Tier 2** is the difference between Tier 1 and the CoC’s ARD plus any amount available for CoC Bonus projects (not including amounts available for DV Bonus projects)

<table>
<thead>
<tr>
<th>Rank</th>
<th>Committee Score</th>
<th>Project</th>
<th>Component</th>
<th>Amount</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>88.0%</td>
<td>Lynn Shelter</td>
<td>PSH</td>
<td>$49,184</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>80.3%</td>
<td>Dedicated PLUS</td>
<td>PSH</td>
<td>$172,188</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>78.8%</td>
<td>Bridgewell, LSA, PSH</td>
<td>PSH</td>
<td>$246,695</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>75.0%</td>
<td>Bridgewell - Project COPE PH</td>
<td>PSH</td>
<td>$102,042</td>
<td></td>
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<tr>
<td>5</td>
<td>50.0%</td>
<td>Lynn Shelter Plus Care</td>
<td>PSH</td>
<td>$903,064</td>
<td></td>
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<tr>
<td>6</td>
<td>N/A</td>
<td>LCoC - Coordinated Entry</td>
<td>CE</td>
<td>$40,614</td>
<td>Per the Ranking Policy, CE is placed in this position.</td>
</tr>
<tr>
<td>7</td>
<td>N/A</td>
<td>HMIS</td>
<td>HMIS</td>
<td>$12,352</td>
<td>Per the Ranking Policy, HMIS is placed in this position.</td>
</tr>
<tr>
<td>8</td>
<td>46.7%</td>
<td>Lynn Shelter Plus Care II</td>
<td>PSH</td>
<td>$215,007</td>
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**Total Amount:** $1,741,146
<table>
<thead>
<tr>
<th>Rank</th>
<th>Score</th>
<th>Committee</th>
<th>Project</th>
<th>Address</th>
<th>Component</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>88.0%</td>
<td>Lynn Shelter PSH</td>
<td>33 High Street</td>
<td>PSH</td>
<td>$49,184</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>80.3%</td>
<td>Dedicated PLUS</td>
<td>8 Rogers Avenue</td>
<td>PSH</td>
<td>$172,188</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>78.8%</td>
<td>Bridgewell, LSA, PSH</td>
<td>Multiple addresses throughout Lynn</td>
<td>PSH</td>
<td>$246,695</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>75.0%</td>
<td>Bridgewell - Project COPE PH</td>
<td>534 Essex Street, 75 Silsbee, 86 Silsbee</td>
<td>PSH</td>
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<tr>
<td>5</td>
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<td>Lynn Shelter Plus Care</td>
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<td>PSH</td>
<td>$903,064</td>
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<tr>
<td>6</td>
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<td>7</td>
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<tr>
<td>8</td>
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<td>$215,007</td>
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<tr>
<td>9</td>
<td>41.0%</td>
<td>LEO AHL PH</td>
<td>50 Andrew Street</td>
<td>PSH</td>
<td>$52,038</td>
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<tr>
<td>10</td>
<td>84.8%</td>
<td>LSA DV</td>
<td>Confidential address; agency is at 100 Willow Street, Lynn</td>
<td>RRH</td>
<td>$176,336</td>
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**Tier 1 Total** $1,741,146

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<tr>
<th>Rank</th>
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<th>Project</th>
<th>Address</th>
<th>Component</th>
<th>Amount</th>
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<tbody>
<tr>
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<tr>
<td>9</td>
<td>41.0%</td>
<td>LEO AHL PH</td>
<td>50 Andrew Street</td>
<td>PSH</td>
<td>$52,038</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>84.8%</td>
<td>LSA DV</td>
<td>Confidential address; agency is at 100 Willow Street, Lynn</td>
<td>RRH</td>
<td>$176,336</td>
<td></td>
</tr>
</tbody>
</table>

**Tier 2 Total** $287,473

Planning, not scored, 10 Church Street $55,568
Lynn Housing Authority & Neighborhood Development

Welcome to the website of the Lynn Housing Authority & Neighborhood Development (LHAND).

Since 1948 the Lynn Housing Authority & Neighborhood Development (LHAND) has had a mission of assisting low and moderate-income families and individuals with safe and affordable housing.

Our emphasis is on fostering economic independence and providing homeownership opportunities. The agency has continually changed and since 1998 the LHAND has grown to include neighborhood services and administrators programs on behalf of the office of Mayor Tom McGee and the City of Lynn Massachusetts.

LHAND continues to be committed to enhancing the quality of our community and building stronger, healthier neighborhoods by providing a wide range of neighborhood services and funding a variety of grant and loan programs that address the needs of renters, owners, homeowners, and nonprofit housing providers.

Public Notices
- FSS Brochure
- FSS Literature
- FSS Pre-Enrollment Form

Release on Closure
- Release on Closure

Lynn Continuum of Care (LCoC) FY19 CoC Competition NOFA
- LCoC Request for Proposals
- LCoC RFP NOFA 2019
- Application #1
- Reallocation Policy
- Ranking and Review 2019

Public Hearing
Lynn Continuum of Care Public Hearing on Homelessness and Fiscal Year 2019
July 18, 2019

Lynn CoC Meeting

Minutes

In attendance: Olivia Lyons – LHAND; Yuribe Sanchez – CCAB; Linda Anderson – CCAB; Tracey Scherrer – LPS; Merlinda Marseille – LHAND; Michelle D’Amico – LHAND; Karen Byron – BGC; Dianne Kuzia-Hills – MBT; Laura Gallant – NJC; Artia Harris – Bridgewell; Kelly Callahan – GLSS; Debbie Smith-Walsh – LCHC; Brandy Rodriguez – YCC; Elaine White – Bridgewell; Sara Johnson – LHAND; Emily Herzig – NJC; Lilian Romero – LEO; Jennifer Dinan – Bridgewell; Andrew Gilroy – LEO; Mark Evans – LSA; Melissa Glassman – Eliot; Dottie Davies – GLSS

Meeting Call to order/Introductions:

• Meeting was called to order by Elaine White at 1:PM. Attendance was great for the month of July – thanks to everyone for coming!! Everyone present introduced themselves.
• The minutes from the 5/16/19 and 6/20/19 meetings were presented. Sara Johnson noted that the 5/16/19 minutes should be corrected to take the word “annual” out of the heading. Sara then made the motion to accept the minutes / Mark Evans seconded the motion. All voted in favor.
• Elaine thanked everyone who attended the Annual Meeting on 6/20/19 – it was a great meeting. Four scholarships were presented and three of the students were able to attend. Thinking ahead, we will need to do fundraising to continue this activity.

2019 CoC NOFA

Karen Byron led the discussion and provided two handouts (Working Calendar and Highlights/Changes in the 2019 NOFA).

• Karen asked participants to take a look at the Calendar and keep in mind that it’s always a work in progress – updates will be provided.
• The USICH webinar (stressed that it is NOT a HUD sponsored webinar) will be forwarded to the group for those that weren’t able to view it live.
• There is a general push to move people out of. Also, HUD negatively views recidivism.
• Let’s consider which projects are returning money – keeping in mind that this could be systemic OR it could be due to an unforeseen event/circumstance. The Executive Committee will discuss reallocating (keeping in mind no agency or program has expressed a willingness at this time).
• Karen will be contacting the Renewal Program agencies to complete the necessary steps.
• Concept papers for NEW projects will likely be due 8/2/19 (this may have to be amended).
• The Ranking & Review Committee will be contacted appropriately.
• One of the biggest changes is the ability to expand a project with either Reallocation / Bonus or a combination. You MUST be able to show a need.
• **Annual Renewal Demand:** $1,852,283 / **Tier 1:** $1,741,146 (94% of ARD) / **Bonus:** $92,614 / **DV Bonus:** $182,828 / **Planning:** $55,568

• Elaine added that it’s important to note that any other agency could choose to submit a proposal for the DV bonus – they don’t have to be sitting at the table right now. Agencies are encouraged to reach out to any domestic violence agencies they work closely with.

• HUD will be looking at EMPLOYMENT for clients served – this is something we struggle with.

**Massachusetts Data Warehouse**

• Sara Johnson gave an update – the efforts are full steam ahead. The State is working on the Release of Information as well as finalizing the three levels of security settings that users will have. Clients can always opt to remove themselves. As a CoC, we will have to determine specifically WHO will have access. Confidentiality trainings will be required for all users.

**Youth Conference**

• Sara Johnson also gave an update on the Youth Conference that she and Merlinda Marseille attended in June in NYC. The conference had over 800 attendees!! As the majority of attendees were agencies that serve homeless youth, the topics varied. There was a big focus on the concept of “adultism” – make sure to listen to the youth you serve. Also, we must find ways to use existing resources in creative ways.

**Sub-Committees**

• Veterans (OL) – a meeting was held in June...attendance was disappointing. Any updates on the registry, please contact Rita Paulino.

• Youth (OL) – there was no meeting in July. The next meeting is 8/1/19 at 10:AM...Floyd will send out the reminder.

• Elders (LG) – Laura Gallant provided two letters she would like to send regarding the Union Hospital property (one to the owners and one to the Mayor). The group voted to send the letters.

**New Business**

• Regarding the RAFT program, Sara informed us that while there is still no signed contract, we should be ramping up soon again for the new fiscal year. There is a new Pilot Program (for both the Traditional and Expanded populations) for “Up-Stream” prevention for clients that have a 14 Notice to Quit (as opposed to a Summary Process through the courts). Also, DHCD is working to have an on-line application that clients can access themselves.

• Elaine referenced a helpful website – the National Healthcare for the Homeless Council.

• The meeting was adjourned at 2:30 PM.
<table>
<thead>
<tr>
<th>Item</th>
<th>Dates in bold are required by the NOFA</th>
<th>Who Responsible</th>
<th>Done</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In progress</td>
<td></td>
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<td></td>
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OL=Olivia Lyons  
BGC=Byron Grant Consulting

<table>
<thead>
<tr>
<th>Item</th>
<th>Dates in bold are required by the NOFA</th>
<th>Who Responsible</th>
<th>Done</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOFA Release</td>
<td>07.03.19</td>
<td>HUD</td>
<td>X</td>
<td>Applications are available in esnaps, but instructions are not yet available.</td>
</tr>
<tr>
<td>Applications available in e-snaps; instructions available in HUD Exchange</td>
<td></td>
<td>HUD</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Review NOFA-relevant webinars as they become available</td>
<td>TBD</td>
<td>Interested parties</td>
<td></td>
<td>BGC will notify CoC of dates and times as webinars become available, and will provide links to registration if possible.</td>
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<tr>
<td>Meeting to review NOFA changes from previous years, what is new, CoC-required tasks, discuss reallocations proposed (if any), new projects, DV projects and the Ranking and Review Tool.</td>
<td>07.18.19</td>
<td>Interested parties</td>
<td>X</td>
<td>This is part of the monthly CoC meeting.</td>
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<tr>
<td>RFP issued for New, Bonus, DV Bonus, Reallocated concept papers</td>
<td>07.25.19</td>
<td>BGC, OL</td>
<td>X</td>
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<tr>
<td>BGC meets with Renewal projects</td>
<td>Week of 07.29 and week of 08.05.19</td>
<td>BGC</td>
<td>X</td>
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<tr>
<td>New project concept papers due</td>
<td>08.02.19</td>
<td>Applicants</td>
<td>X</td>
<td>None received</td>
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<tr>
<td>Transition request to LCoC</td>
<td>08.02.19</td>
<td>Interested parties</td>
<td>X</td>
<td>None received</td>
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<td>Ranking and Review Committee meets to review concept papers and accept or reject new applications</td>
<td>08.05.19</td>
<td>Committee, BGC, OL</td>
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<td>Cancelled</td>
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<td>New project concept papers Extension</td>
<td>08.09.19</td>
<td>Applicants</td>
<td>X</td>
<td>This deadline has been extended one week.</td>
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<tr>
<td>Ranking and Review Committee conference call to review concept papers and accept or reject new applications.</td>
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<td>Committee, BGC, OL</td>
<td>X</td>
<td>As only one paper was submitted, a vote was taken by email and approved.</td>
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<tr>
<td>Review of Consolidated Application line-by-line</td>
<td>08.15.19</td>
<td>All interested parties</td>
<td>X</td>
<td>Please note this will potentially be a 2-3 hour meeting. Participants should review the blank Consolidated Application Karen will send out prior to meeting.</td>
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<tr>
<td>Event Description</td>
<td>Date</td>
<td>Responsible Party</td>
<td></td>
<td></td>
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<tr>
<td>----------------------------------------------------------------------------------</td>
<td>------------</td>
<td>-----------------------------</td>
<td></td>
<td></td>
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<tr>
<td>New and Renewal Applicants present their projects to the Ranking and Review Committee</td>
<td>08.19.19</td>
<td>All parties submitting requests</td>
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<tr>
<td>First draft of applications and attachments in esnaps</td>
<td>08.23.19</td>
<td>BGC and Applicants</td>
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<tr>
<td>Comments from Applicants to BGC re: first draft</td>
<td>08.27.19</td>
<td>Applicants</td>
<td></td>
<td></td>
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<tr>
<td>Final applications and all attachments in esnaps</td>
<td>08.29.19</td>
<td>BGC</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>All Applications received by CoC in esnaps</strong></td>
<td><strong>08.30.19</strong></td>
<td><strong>BGC</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ranking and Review Committee meets to determine final ranking</td>
<td>09.09.19</td>
<td>Committee, BGC, OL</td>
<td></td>
<td></td>
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<tr>
<td>Ranking and Review Decisions presented to CoC electronically for approval</td>
<td>09.09.19</td>
<td>BGC, OL</td>
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<tr>
<td>Draft of Consolidated Application Section 1</td>
<td>09.09.19</td>
<td>BGC</td>
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<td>Comments on Consolidated Application Section 1</td>
<td>09.11.19</td>
<td>LCoC Membership</td>
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<td>Draft of Consolidated Application section 2</td>
<td>09.11.19</td>
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<td>Comments on Consolidated Application Section 2</td>
<td>09.13.19</td>
<td>LCoC membership</td>
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<td>Draft of Consolidated Application section 3</td>
<td>09.13.19</td>
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<td>Comments on Consolidated Application Section 3</td>
<td>09.16.19</td>
<td>LCoC membership</td>
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<td>09.16.19</td>
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<td>Comments on Consolidated Application Section 4</td>
<td>09.18.19</td>
<td>LCoC membership</td>
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<td>Final draft of Consolidated Application for review</td>
<td>09.19.19</td>
<td>BGC</td>
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<tr>
<td>Event Description</td>
<td>Date</td>
<td>Responsible Party</td>
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<tr>
<td>----------------------------------------------------------------------------------</td>
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<td></td>
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<tr>
<td>All applications accepted or rejected by CoC</td>
<td>09.14.19</td>
<td>LCoC membership</td>
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<td>Notification of acceptance, rejection or reduction of project applications in the Priority Listing in writing</td>
<td>09.14.19</td>
<td>BGC</td>
<td></td>
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<tr>
<td>Final comments on Consolidated Application</td>
<td>09.20.19</td>
<td>LCoC membership</td>
<td></td>
<td></td>
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<tr>
<td><strong>Full NOFA response available on LHAND website and partner websites for public review</strong></td>
<td>09.23.19</td>
<td>BGC, OL, LCoC members</td>
<td></td>
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<tr>
<td>Electronic vote to accept or reject the Consolidated Application, Priority Listing and Project Applications</td>
<td>09.25.19</td>
<td>LCoC membership</td>
<td></td>
<td></td>
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<tr>
<td>Final Consolidated Application, Priority Listings and Project Applications with additional comments from public</td>
<td>09.27.19</td>
<td>BGC</td>
<td></td>
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<td>NOFA submitted</td>
<td>09.27.19</td>
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<td></td>
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<td><strong>NOFA responses due</strong></td>
<td>09.30.19</td>
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Lynn Continuum of Care
FY2019 Continuum of Care Program Competition
Request for Proposals – ADDENDUM #1

New Projects Created Through Bonus
New Projects for Domestic Violence Bonus
Expansion Projects for Eligible Renewal Projects
Consolidated Projects of Eligible Renewal Projects
Transition Grants to Change from One CoC Component to Another

Maximum Available Funding
Bonus $92,614
Domestic Violence Bonus $182,828

RFP Released: July 25, 2019
Concept Papers due: August 02, 2019. August 09, 2019
Deadline for Submission in esnaps: August 29, 2019
I. **Introduction and Purpose**

This Request for Proposals (RFP) is being issued by the Lynn Continuum of Care (NS CoC) and the Lynn Housing Authority & Neighborhood Development (LHAND), the Collaborative Applicant (CA) for the LCoC for new projects seeking funding available through HUD Continuum of Care for:

- Bonus
- Domestic violence bonus
- Expansion of eligible renewal projects

This funding is for projects which are to be undertaken in the geographic region covered by the LCoC, MA-502. Concept papers describing the proposed project must be submitted as instructed in this RFP.

All concept papers will be reviewed and accepted or rejected by the Monitoring Committee which will present those decisions to the full membership of the LCoC. Projects chosen to be included in LCoC NOFA response will then be required to submit full proposals. Technical Assistance is available to assist applicants in preparing and submitting their proposals.

This RFP also requests proposals for consolidation of two or more eligible renewal projects or project transition as described in this RFP. **These do not require concept papers.** However, requests for project component transition, must submit a letter of request to the LCoC by August 2, 2019.

**ADDENDUM #1 –**

CONCEPT PAPERS WILL BE RECEIVED UNTIL AUGUST 09, 2019. ALL OTHER ASPECTS OF THIS RFP REMAIN THE SAME.

Additional information and definitions can be found in the Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2019 Continuum of Care Program Competition, FR-6200-N-25 which can be found at:


*Please note that this RFP is based upon the best information that is currently available and the LCoC may need to revise the requirements described below and/or request additional information when all relevant information is released by HUD.*

II. **Concept Papers for new projects created with Bonus, Domestic Violence Bonus, or Expansion**

Applicants who wish to submit proposal(s) for new project(s) as defined in this RFP must first submit a concept paper. Concept papers are due August 2, 2019 August 9, 2019 and should include the following:
Name, address, contact information for agency representative
Amount being requested
Describe the geographical locations to be served, the type of project; if for housing, the number of units generated, rents to be charged, who will be served: individuals, families, veterans, elders, survivors of domestic violence or youth.

Description of your use of Housing First or low barrier housing.

Indicate if the agency currently participates in HMIS and Coordinated Entry. If not, please note it is a requirement, and make a statement in the concept paper acknowledging that the project will be entered into HMIS and program participants will be in Coordinated Entry.

III. Eligible Project Components

A) New Projects proposing use of bonus funds up to $92,614 may be created as:

a. Permanent housing-permanent supportive housing (PH-PSH) projects.
b. Permanent housing-rapid rehousing (PH-RRH) projects.
c. Joint TH and PH-RRH component projects.
d. Dedicated HMIS project for the costs at 24 CFR 578.37(a)(2) that can only be carried out by the HMIS Lead, which is the recipient or subrecipient of an HMIS grant, and that is listed on the HMIS Lead form in the CoC Applicant Profile in e-snaps. Additionally, if the CoC has organizations within its geographic area that are victim service providers, the HMIS Lead, or subrecipient, may request HMIS funds for a comparable database. Victim service providers may also request HMIS funds in their project application budgets to enter data into a comparable database.
e. Supportive services only (SSO-CE) project to develop or operate a centralized or coordinated assessment system.

A new project may only use reallocated funds from eligible renewal project(s) that have previously been renewed under the CoC Program.

B) New Projects for DV Bonus. New projects proposing use of up to $182,828 may be:

a. Permanent Housing-Rapid Re-housing projects dedicated to serving survivors of domestic violence, dating violence, or stalking that are defined as homeless at 24 CFR 578.3;
b. Joint TH and PH-RRH component projects as defined in Section III.C.2.n of this NOFA dedicated to serving survivors of domestic violence, dating violence, or stalking that are defined as homeless at 24 CFR 578.3; or
c. Supportive services only - coordinated entry project to implement policies, procedures, and practices that equip the CoC’s coordinated entry to better meet the needs of survivors of domestic violence, dating violence, or stalking.

C) Expansion Project. HUD will allow project applicants to apply for a new expansion project (see Section III.C.2.j of the NOFA) under the DV Bonus and CoC bonus processes to expand existing projects that will increase the number of units, persons served, services provided to existing
program participants, or to add additional activities to HMIS and SSO-Coordinated Entry projects. If the new expansion project will expand an existing eligible CoC Program renewal project HUD will not fund capital costs (i.e., new constructions, rehabilitation, or acquisition) and HUD will only allow a 1-year funding request.

Project applicants may expand an existing renewal project that is not currently dedicated to serving survivors of domestic violence, dating violence, or stalking that meet the definition of homeless in 24 CFR 578.3 to dedicate additional beds, units, persons served, or services provided to existing program participants to this population.

D) Applicants have the opportunity in this competition to consolidate two or more eligible renewal projects into one project application.

To apply for a consolidated grant, applicants must submit separate renewal project applications for each of the eligible renewal project grants that are proposed to be consolidated, and an application for the new consolidated grant with the combined budget and information of all grants proposed for consolidation.

E) Eligible renewal project applicants may transition from one CoC Program component to another by transitioning an eligible renewal project being eliminated through reallocation from one program component to another eligible new component over a 1-year period. Requests for project component transition, must submit a letter of request to the LCoC by August 2, 2019.

Grant Term

The initial grant term for new project applications may be 1-year, 2-years, 3-years, 4-years, 5-years, or 15-years. However, the following exceptions apply:

a. HUD will allow new projects to request a 1 year of funding with a longer initial grant term not to exceed 18 months. HUD has determined that most new projects requesting 1 year of funding normally take approximately 3 to 6 months to begin fully operating the new project (e.g., hiring staff, developing partnerships with landowners if leasing or renting). Therefore, a new project requesting 1 year of funding may request a grant term of 12 months to 18 months that will allow for the additional start-up process. Any new projects requesting capital costs (i.e., new construction, acquisition, or rehabilitation) are not eligible for 1-year requests. If 1-year of funding is requested for new projects with capital costs, HUD will increase the grant term to 3-years and the new project will be required to spend the funds requested over a 3-year period, assuming the project is conditionally selected for award.

b. Any new expansion project that is submitted to expand an eligible renewal CoC Program-funded project may only request a 1-year grant term, regardless of the project type.
b. Any new project that requests tenant-based rental assistance may request a 1-year, 2-year, 3-year, 4-year, or 5-year grant term.

c. Any new project that requests leasing costs–either leasing costs only or leasing costs plus other costs (e.g., supportive services, HMIS.)–may only request up to a 3-year grant term.

d. Any new project that requests project-based rental assistance or sponsor-based rental assistance, or operating costs may request up to a 15-year grant term; however, the project applicants may only request up to 5 years of funds. Funding for the remainder of the term is subject to availability. Applicants must apply for additional funds as a renewal project application prior to the anniversary of the first expenditure of grant funds by which date the grant funds should have been expended, or if the date upon which funds must be expended has been extended by HUD, the date upon which the extension ends. CoC Program funds are not guaranteed past the initial 5-year grant term, if conditionally awarded.

e. Any new project that requests operating costs, Supportive Services Only, HMIS, and project administration may request 1-year, 2-year, 3-year, 4-year, or 5-year grant terms with funding for the same number of years.

f. Any new project that requests new construction, acquisition, or rehabilitation must request a minimum of a 3-year grant term and may request up to a 5-year grant term.

g. If an applicant requests funds for new construction, acquisition, or rehabilitation in addition to requesting funds for operating, supportive services, or HMIS, the funding will be for the 3 years requested, and the grant term will be 3 years plus the time necessary to acquire the property, complete construction, and begin operating the project. HUD will require recordation of a HUD-approved use and repayment covenant (a form can be obtained from the local HUD CPD Field Office) for all grants of funds for new constructions, acquisition, and rehabilitation. (24 CFR 578.81)

h. Any new project that is requesting consideration under the DV Bonus (see Section III.C.2.h of this NOFA more information) may only request a 1-year grant term, regardless of project type.

D) Matching

The applicant must match all grant funds, except for leasing funds, with no less than 25% of funds or in-kind contributions from other sources. 24 CFR 578.73 provides the information regarding match requirements. Project applicants that intend to use program income as match must provide an estimate of how much program income will be used for match.

E) Eligibility

To be eligible, applicants must meet threshold requirements on page 33 of the FY19 NOFA, V. C.3.b.(1) and (2) and V. C.3.c.

Eligible renewal projects applicants are defined below.

A) Renewal Projects - Awards made under the CoC Program and S+C project-based rental assistance with rehabilitation 10-year grants, are eligible for renewal for FY 2019 funds if they
are currently in operation and have an executed grant agreement that is dated no later than December 31, 2019 and expires in Calendar Year (CY) 2020 (the period from January 1, 2020 through December 31, 2020).

(1) HUD will not select renewal projects for an award of FY 2019 funds in this Competition unless the project meets one of the following additional eligibility requirements:
   (a) Any CoC Program grant or S+C project-based rental assistance grant with funds for rehabilitation awarded in a preceding Competition that expire in CY 2019.
   (b) Any S+C grant awarded prior to FY 2002 for which funding is expected to run out in CY 2019, and which has never applied for renewal funding.
   (c) Any grant awarded as S+C grant that included rehabilitation that has a 10-year grant term.

(2) The total request for each renewing project may not exceed the ARA. Additionally, where two or more eligible projects are being consolidated through the project application, the total ARA of the consolidated project must be equal to, or less than the sum of the original renewal projects. Because funds for acquisition, new construction, and rehabilitation may not be renewed, grants being renewed whose original expiring award included those funds may only renew leasing, supportive services, rental assistance, operating, and HMIS costs and may not exceed 10 percent in administrative costs. For information on ARA, see Section III.C.1.a of the NOFA.

F) Timeline
   RFP distributed July 25, 2019
   Concept papers for new projects due August 02, 2019
   Transitions grants Letter of Intent August 02, 2019
   Application deadline in e-snaps August 29, 2019
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G) Proposal Submission and Questions
   Concept papers should be submitted to Olivia Lyons, olyons@lhand.org, with a cc: to Karen Byron at krbyron@byrongrantconsulting.com

   In addition, technical questions can be submitted to Karen R. Byron, Byron Grant Consulting, at krbyron@byrongrantconsulting.com with a cc: to Olivia Lyons, olyons@lhand.org
Lynn Housing Authority & Neighborhood Development

Welcome to the website of the Lynn Housing Authority & Neighborhood Development (LHAND).

Since 1948 the Lynn Housing Authority & Neighborhood Development (LHAND) has had a mission of assisting low and moderate-income families and individuals with safe and affordable housing.

Our emphasis is on fostering economic independence and providing homeownership opportunities. The agency has continually changed and since 1998 the LHAND has grown to include neighborhood services and administers programs on behalf of the office of Mayor Tom McGee and the City of Lynn Massachusetts.

LHAND continues to be committed to enhancing the quality of our community and building stronger, healthier neighborhoods by providing a wide range of neighborhood services and funding a variety of grant and loan programs that address the needs of renters, owners, homebuyers, and nonprofit housing providers.

It is my sincere hope that you find the resources you are in need of from the Lynn Housing Authority & Neighborhood Development.
2019 HUD CoC NOFA Ranking Policy
Lynn Continuum of Care

It is the policy of the Lynn Continuum of Care (LCoC), to select annually a Ranking and Review Committee. This committee has the responsibility of reviewing the Ranking Policy annually, make recommendations regarding revisions to the LCoC, review and issue the RFP on behalf of the LCoC, and perform the Ranking and Review of project applications in the annual HUD Notice of Funding Availability process used to fund CoC projects.

It is also the policy of the LCoC to use the application ranking process to achieve success in pursuit of the following LCoC and HUD priorities:

1. End homelessness for all persons in the LCoC geography.
   a. Using local data, the LCoC will focus on subpopulations identified including, but not limited to, individuals and families who are chronically homeless, unaccompanied youth and young adults under 25, Veterans, individuals and families of diverse races, ethnicities and cultural identities, and those who are survivors of domestic violence or currently fleeing.
   b. The LCoC will support outreach strategies designed to identify and engage unsheltered individuals and families.
   c. The LCoC Ranking and Review Committee will use local system performance measures data in evaluating new and renewal projects to identify those with the strongest performance and demonstrated ability to prevent homelessness, shorten the length of time program participants are homeless and demonstrate an ability to tailor services and housing to participant need.

2. Create a systemic response to homelessness by:
   a. Coordinating system planning efforts throughout the LCoC;
   b. Encourage and support participation from persons with lived homeless experiences;
   c. Ensure equal and fair access to all CoC Program-funded projects;
   d. Promote participant choice, privacy, and dignity;
   e. Implement and operate an effective Coordinated Entry process;
   f. Measure system performance; and
   g. Continue to support and encourage the delivery of homeless assistance within the CoC in an open, inclusive and transparent manner.
3. Strategically allocate resources within the LCoC region.
   a. The LCoC will undertake comprehensive and regular reviews of CoC project quality, performance and cost-effectiveness.
   b. The LCoC membership will support and encourage the achievement of self-sufficiency for households experiencing homelessness by maximizing the use of mainstream and other community-based resources (housing, employment/income, non-cash benefits), and resource- and referral-sharing among LCoC members.

4. Implement Low Barrier Practices (CoC Program participants will not be screened out based on the following):
   a. Having too little or no income;
   b. Active or history of substance use;
   c. Having a criminal record with exceptions for state-mandated restrictions;
   d. History of victimization (e.g. domestic violence, dating violence, sexual assault, human trafficking and/or stalking); or
   e. Having a history of eviction from rental housing.

5. Implement a Housing First Approach (CoC Program participants will not be terminated for the following reasons):
   a. Failure to participate in supportive services;
   b. Failure to make progress on a service plan;
   c. Loss of income or failure to improve income; or
   d. Any other activity not covered in a lease agreement typically found for unassisted persons in the project’s geographic area.

6. Quickly house and rehouse persons experiencing homelessness.

7. Develop and maintain relationships with property owners/managers and landlords.

8. Prioritize CoC Program funds to serve populations based upon the severity of needs and vulnerability. This includes, but is not limited to:
   a. Individuals and families experiencing chronic homelessness;
   b. Persons with one or more disabling conditions of long duration;
   c. Persons fleeing and/or with a history of domestic violence, dating violence, sexual assault, human trafficking and/or stalking;
   d. Households with children under 18 years of age;
   e. Unaccompanied youth and young adults under 25;
f. Households with low or no income;
g. Current or past substance use; or
h. Criminal histories.

Threshold Requirements

In order to be included, all projects, both renewal and new, must meet the threshold requirements in the FY19 CoC NOFA for project applicant eligibility, project component eligibility, project quality threshold and project renewal threshold.

In addition, applications must be submitted in eSNAPS no later than August 28, 2019. Applications must be consistent with the Plan to End Homelessness and the Consolidated Plan. The agency can have no outstanding HUD monitoring or OIG Audit findings that are overdue. The Project must comply with the requirements of the CoC Interim rule (24 CFR part 578), including requirements to participate in the Coordinated Entry (CE) System and the LCoC HMIS.

The project ranking tools for new and renewal projects will be developed in consultation with the LCoC membership. The Ranking and Review Committee will develop the final tool which will be made available through email distribution and on the Collaborative Applicant’s (CA), (the Lynn Housing Authority & Neighborhood Development) website as well as on partner websites.

Ranking Tools

The following elements will be present in new and renewal project ranking tools:

1) Severity of needs and vulnerabilities of populations served
2) Project performance results
3) Housing type and cost-effectiveness
4) Target population and HMIS Data Quality
5) Implementation of Housing First and Low Barrier Entry

All renewal applicants will be required to submit the following for use by the Ranking Committee, no later than August 30, 2019.

1) The most recent APR for the renewal being requested.
2) A current eLOCCS report showing drawdowns for the last 12 months (August 01, 2018 through July 31, 2019).

If a new applicant has no experience with Housing First or a similar model of housing, a detailed narrative describing how the applicant will implement Housing First should be included. This should include, but not be limited to a timeline for full implementation and training plans for staff, management and agency Board of Directors. The LCoC will offer technical assistance as needed if this is the case.

New applicants who have not participated in HMIS must also submit a copy of their Workplace Information Security Policy and commit to using the LCoC HMIS, ETO.

The sources of information to complete the ranking tool may include, but are not limited to, HUD Priorities, this Ranking Policy, HMIS, Annual Performance Reports, match documentation, bed/unit
utilization, HMIS Data Quality Reports, Annual CoC PIT counts and other need-based reports, CoC project applications, Request for Proposals, concept papers, and calls with project applicants during Ranking Committee meetings.

The LCoC has defined the following ranking priorities for funding under the FY19 HUD CoC NOFA.

Upon review of LCoC continued need, applicant performance and compliance with LCoC monitoring policies and procedures, a renewal project application for Coordinated Entry (CE) will also be reviewed for threshold criteria as defined in the FY19 HUD NOFA. If there are no issues, it will be placed as the last project in Tier 1. New CE applications will be placed after the last renewal project in Tier 2.

Upon review of LCoC continued need, applicant performance and compliance with LCoC monitoring policies and procedures, a Homeless Management Information System (HMIS) renewal project application will also be reviewed for threshold criteria as defined in the FY19 HUD NOFA. If there are no issues it will be placed as the first fully funded project in Tier 2. New HMIS project applications will be ranked in Tier 2 after renewal projects and new Coordinated Entry projects.

The FY2019 HUD NOFA is still using a 2-Tier approach, with 94% of the LCoC ARD plus 100% of first time renewals going into Tier 1, and the remaining 6% into Tier 2. The score received on the ranking tool will determine the position of the project in Tiers 1 and 2, as well as in the Priority Listing which accompanies the Consolidated application.

The LCoC places housing projects as the first priority for CoC funding. In case two or more projects receive the same score, they will be ranked in order of preference as indicated in the LCoC Priority Ranking Preference project components listed below.

- Permanent Housing-Rapid Rehousing with Housing First
- Permanent Supportive Housing with either 90% of beds dedicated to chronically homeless, or classified as Dedicated PLUS
- Permanent Supportive Housing renewal with Housing First and low barrier entry focus
- Domestic Violence housing
- Transitional Housing for individuals and families

Should two or more project component types receive the same score, they will be ranked in order of their score for:

- Housing first,
- Low barrier entry,
- Subpopulation, and
- HMIS.

New Core Services, because they are not housing, will be placed in Tier 2.
The last funded project in Tier 1 may 'straddle' Tiers 1 and 2 if that project causes the amount of Tier 1 to exceed 94% of the LCoC ARD plus 100% of the first time renewal amount, with the portion in excess of 94% going into Tier 2.

**Project Determinations and Appeals Process:**

Applications which do not meet the minimum threshold requirements will not be ranked or included in the CoC Consolidated Application submitted to HUD.

If the CoC receives more Requests for Proposals (RFP) responses than can be supported with available CoC funding, the CoC Ranking and Review Committee will rank the grants in order of priority as approved by the LCoC.

New projects that have not yet begun or completed their grant term will be held harmless and ranked in Tier 1, unless determined otherwise by the CoC Ranking and Review Committee due to special circumstances (i.e. non-compliance of HUD regulations and/or CoC policies, violation of state/federal laws, withdrawal, etc.), or, due to their ranking with other projects, they fall below the 94% cutoff.

The Collaborative Applicant (CA) will send formal notification of a preliminary determination made by the LCoC Monitoring, Ranking, and Review Committee to each project applicant along with individual project ranking summary, individual project ranking number, and any potential budget reduction or increase.

The CA will provide all appeals to the LCoC Ranking and Review Committee to make a final determination that will be sent to the LCoC full membership for a review, vote (minus any and all voting members with a bias or conflict of interest) and posting to the CA and partner websites.
Lynn Continuum of Care
FY2019 Continuum of Care Program Competition
Request for Proposals – ADDENDUM #1

New Projects Created Through Bonus
New Projects for Domestic Violence Bonus
Expansion Projects for Eligible Renewal Projects
Consolidated Projects of Eligible Renewal Projects
Transition Grants to Change from One CoC Component to Another

Maximum Available Funding
Bonus $92,614
Domestic Violence Bonus $182,828

RFP Released: July 25, 2019
Concept Papers due: August 02, 2019, August 09, 2019
Deadline for Submission in esnaps: August 29, 2019
I. **Introduction and Purpose**
This Request for Proposals (RFP) is being issued by the Lynn Continuum of Care (NS CoC) and the Lynn Housing Authority & Neighborhood Development (LHAND), the Collaborative Applicant (CA) for the LCoC for new projects seeking funding available through HUD Continuum of Care for:

- Bonus
- Domestic violence bonus
- Expansion of eligible renewal projects

This funding is for projects which are to be undertaken in the geographic region covered by the LCoC, MA-502. Concept papers describing the proposed project must be submitted as instructed in this RFP.

All concept papers will be reviewed and accepted or rejected by the Monitoring Committee which will present those decisions to the full membership of the LCoC. Projects chosen to be included in LCoC NOFA response will then be required to submit full proposals. Technical Assistance is available to assist applicants in preparing and submitting their proposals.

This RFP also requests proposals for consolidation of two or more eligible renewal projects or project transition as described in this RFP. **These do not require concept papers.** However, requests for project component transition, must submit a letter of request to the LCoC by August 2, 2019.

**ADDENDUM #1 –**
**CONCEPT PAPERS WILL BE RECEIVED UNTIL AUGUST 09, 2019. ALL OTHER ASPECTS OF THIS RFP REMAIN THE SAME.**

Additional information and definitions can be found in the Notice of Funding Availability (NOFA) for the Fiscal Year (FY) 2019 Continuum of Care Program Competition, FR-6200-N-25 which can be found at:


*Please note that this RFP is based upon the best information that is currently available and the LCoC may need to revise the requirements described below and/or request additional information when all relevant information is released by HUD.*

II. **Concept Papers for new projects created with Bonus, Domestic Violence Bonus, or Expansion**

Applicants who wish to submit proposal(s) for new project(s) as defined in this RFP must first submit a concept paper. Concept papers are due **August 2, 2019** and should include the following:
Name, address, contact information for agency representative
Amount being requested
Describe the geographical locations to be served, the type of project; if for housing, the number of units generated, rents to be charged, who will be served: individuals, families, veterans, elders, survivors of domestic violence or youth.

Description of your use of Housing First or low barrier housing.

Indicate if the agency currently participates in HMIS and Coordinated Entry. If not, please note it is a requirement, and make a statement in the concept paper acknowledging that the project will be entered into HMIS and program participants will be in Coordinated Entry.

III. Eligible Project Components

A) New Projects proposing use of bonus funds up to $92,614 may be created as:

a. Permanent housing-permanent supportive housing (PH-PSH) projects.
b. Permanent housing-rapid rehousing (PH-RRH) projects.
c. Joint TH and PH-RRH component projects.
d. Dedicated HMIS project for the costs at 24 CFR 578.37(a)(2) that can only be carried out by the HMIS Lead, which is the recipient or subrecipient of an HMIS grant, and that is listed on the HMIS Lead form in the CoC Applicant Profile in e-snaps. Additionally, if the CoC has organizations within its geographic area that are victim service providers, the HMIS Lead, or subrecipient, may request HMIS funds for a comparable database. Victim service providers may also request HMIS funds in their project application budgets to enter data into a comparable database.
e. Supportive services only (SSO-CE) project to develop or operate a centralized or coordinated assessment system.

A new project may only use reallocated funds from eligible renewal project(s) that have previously been renewed under the CoC Program.

B) New Projects for DV Bonus. New projects proposing use of up to $182,828 may be:

a. Permanent Housing-Rapid Re-housing projects dedicated to serving survivors of domestic violence, dating violence, or stalking that are defined as homeless at 24 CFR 578.3;
b. Joint TH and PH-RRH component projects as defined in Section III.C.2.n of this NOFA dedicated to serving survivors of domestic violence, dating violence, or stalking that are defined as homeless at 24 CFR 578.3; or
c. Supportive services only - coordinated entry project to implement policies, procedures, and practices that equip the CoC’s coordinated entry to better meet the needs of survivors of domestic violence, dating violence, or stalking.

C) Expansion Project. HUD will allow project applicants to apply for a new expansion project (see Section III.C.2.j of the NOFA) under the DV Bonus and CoC bonus processes to expand existing projects that will increase the number of units, persons served, services provided to existing
program participants, or to add additional activities to HMIS and SSO-Coordinated Entry projects. If the new expansion project will expand an existing eligible CoC Program renewal project HUD will not fund capital costs (i.e., new constructions, rehabilitation, or acquisition) and HUD will only allow a 1-year funding request.

Project applicants may expand an existing renewal project that is not currently dedicated to serving survivors of domestic violence, dating violence, or stalking that meet the definition of homeless in 24 CFR 578.3 to dedicate additional beds, units, persons served, or services provided to existing program participants to this population.

D) Applicants have the opportunity in this competition to consolidate two or more eligible renewal projects into one project application.

To apply for a consolidated grant, applicants must submit separate renewal project applications for each of the eligible renewal project grants that are proposed to be consolidated, and an application for the new consolidated grant with the combined budget and information of all grants proposed for consolidation.

E) Eligible renewal project applicants may transition from one CoC Program component to another by transitioning an eligible renewal project being eliminated through reallocation from one program component to another eligible new component over a 1-year period. Requests for project component transition, must submit a letter of request to the LCoC by August 2, 2019.

Grant Term
The initial grant term for new project applications may be 1-year, 2-years, 3-years, 4-years, 5-years, or 15-years. However, the following exceptions apply:

a. HUD will allow new projects to request a 1 year of funding with a longer initial grant term not to exceed 18 months. HUD has determined that most new projects requesting 1 year of funding normally take approximately 3 to 6 months to begin fully operating the new project (e.g., hiring staff, developing partnerships with landowners if leasing or renting). Therefore, a new project requesting 1 year of funding may request a grant term of 12 months to 18 months that will allow for the additional start-up process. Any new projects requesting capital costs (i.e., new construction, acquisition, or rehabilitation) are not eligible for 1-year requests. If 1-year of funding is requested for new projects with capital costs, HUD will increase the grant term to 3-years and the new project will be required to spend the funds requested over a 3-year period, assuming the project is conditionally selected for award.

b. Any new expansion project that is submitted to expand an eligible renewal CoC Program-funded project may only request a 1-year grant term, regardless of the project type.
b. Any new project that requests tenant-based rental assistance may request a 1-year, 2-year, 3-year, 4-year, or 5-year grant term.

c. Any new project that requests leasing costs—either leasing costs only or leasing costs plus other costs (e.g., supportive services, HMIS)—may only request up to a 3-year grant term.

d. Any new project that requests project-based rental assistance or sponsor-based rental assistance, or operating costs may request up to a 15-year grant term; however, the project applicants may only request up to 5 years of funds. Funding for the remainder of the term is subject to availability. Applicants must apply for additional funds as a renewal project application prior to the anniversary of the first expenditure of grant funds by which date the grant funds should have been expended, or if the date upon which funds must be expended has been extended by HUD, the date upon which the extension ends. CoC Program funds are not guaranteed past the initial 5-year grant term, if conditionally awarded.

e. Any new project that requests operating costs, Supportive Services Only, HMIS, and project administration may request 1-year, 2-year, 3-year, 4-year, or 5-year grant terms with funding for the same number of years.

f. Any new project that requests new construction, acquisition, or rehabilitation must request a minimum of a 3-year grant term and may request up to a 5-year grant term.

g. If an applicant requests funds for new construction, acquisition, or rehabilitation in addition to requesting funds for operating, supportive services, or HMIS, the funding will be for the 3 years requested, and the grant term will be 3 years plus the time necessary to acquire the property, complete construction, and begin operating the project. HUD will require recordation of a HUD-approved use and repayment covenant (a form can be obtained from the local HUD CPD Field Office) for all grants of funds for new constructions, acquisition, and rehabilitation. (24 CFR 578.81)

h. Any new project that is requesting consideration under the DV Bonus (see Section III.C.2.h of this NOFA more information) may only request a 1-year grant term, regardless of project type.

D) Matching
The applicant must match all grant funds, except for leasing funds, with no less than 25% of funds or in-kind contributions from other sources. 24 CFR 578.73 provides the information regarding match requirements. Project applicants that intend to use program income as match must provide an estimate of how much program income will be used for match.

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To be eligible, applicants must meet threshold requirements on page 33 of the FY19 NOFA, V. C.3.b.(1) and (2) and V. C.3.c.

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are currently in operation and have an executed grant agreement that is dated no later than December 31, 2019 and expires in Calendar Year (CY) 2020 (the period from January 1, 2020 through December 31, 2020).

(1) HUD will not select renewal projects for an award of FY 2019 funds in this Competition unless the project meets one of the following additional eligibility requirements:
   (a) Any CoC Program grant or S+C project-based rental assistance grant with funds for rehabilitation awarded in a preceding Competition that expire in CY 2019.
   (b) Any S+C grant awarded prior to FY 2002 for which funding is expected to run out in CY 2019, and which has never applied for renewal funding.
   (c) Any grant awarded as S+C grant that included rehabilitation that has a 10-year grant term.

(2) The total request for each renewing project may not exceed the ARA. Additionally, where two or more eligible projects are being consolidated through the project application, the total ARA of the consolidated project must be equal to, or less than the sum of the original renewal projects. Because funds for acquisition, new construction, and rehabilitation may not be renewed, grants being renewed whose original expiring award included those funds may only renew leasing, supportive services, rental assistance, operating, and HMIS costs and may not exceed 10 percent in administrative costs. For information on ARA, see Section III.C.1.a of the NOFA.

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Lynn Continuum of Care
FY2019 Continuum of Care Program Competition
Request for Proposals – ADDENDUM #1

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New Projects for Domestic Violence Bonus
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Domestic Violence Bonus $182,828

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All concept papers will be reviewed and accepted or rejected by the Monitoring Committee which will present those decisions to the full membership of the LCoC. Projects chosen to be included in LCoC NOFA response will then be required to submit full proposals. Technical Assistance is available to assist applicants in preparing and submitting their proposals.

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https://www.hudexchange.info/resource/5842/fy-2019-coc-program-nofa/ and

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Description of your use of Housing First or low barrier housing.

Indicate if the agency currently participates in HMIS and Coordinated Entry. If not, please note it is a requirement, and make a statement in the concept paper acknowledging that the project will be entered into HMIS and program participants will be in Coordinated Entry.

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b. Permanent housing-rapid rehousing (PH-RRH) projects.
c. Joint TH and PH-RRH component projects.
d. Dedicated HMIS project for the costs at 24 CFR 578.37(a)(2) that can only be carried out by the HMIS Lead, which is the recipient or subrecipient of an HMIS grant, and that is listed on the HMIS Lead form in the CoC Applicant Profile in e-snaps. Additionally, if the CoC has organizations within its geographic area that are victim service providers, the HMIS Lead, or subrecipient, may request HMIS funds for a comparable database. Victim service providers may also request HMIS funds in their project application budgets to enter data into a comparable database.
e. Supportive services only (SSO-CE) project to develop or operate a centralized or coordinated assessment system.

A new project may only use reallocated funds from eligible renewal project(s) that have previously been renewed under the CoC Program.

B) New Projects for DV Bonus. New projects proposing use of up to $182,828 may be:

a. Permanent Housing-Rapid Re-housing projects dedicated to serving survivors of domestic violence, dating violence, or stalking that are defined as homeless at 24 CFR 578.3;
b. Joint TH and PH-RRH component projects as defined in Section III.C.2.n of this NOFA dedicated to serving survivors of domestic violence, dating violence, or stalking that are defined as homeless at 24 CFR 578.3; or
c. Supportive services only - coordinated entry project to implement policies, procedures, and practices that equip the CoC’s coordinated entry to better meet the needs of survivors of domestic violence, dating violence, or stalking.

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program participants, or to add additional activities to HMIS and SSO-Coordinated Entry projects. If the new expansion project will expand an existing eligible CoC Program renewal project HUD will not fund capital costs (i.e., new constructions, rehabilitation, or acquisition) and HUD will only allow a 1-year funding request.

Project applicants may expand an existing renewal project that is not currently dedicated to serving survivors of domestic violence, dating violence, or stalking that meet the definition of homeless in 24 CFR 578.3 to dedicate additional beds, units, persons served, or services provided to existing program participants to this population.

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To apply for a consolidated grant, applicants must submit separate renewal project applications for each of the eligible renewal project grants that are proposed to be consolidated, and an application for the new consolidated grant with the combined budget and information of all grants proposed for consolidation.

E) Eligible renewal project applicants may transition from one CoC Program component to another by transitioning an eligible renewal project being eliminated through reallocation from one program component to another eligible new component over a 1-year period. Requests for project component transition, must submit a letter of request to the LCoC by August 2, 2019.

Grant Term

The initial grant term for new project applications may be 1-year, 2-years, 3-years, 4-years, 5-years, or 15-years. However, the following exceptions apply:

a. HUD will allow new projects to request a 1 year of funding with a longer initial grant term not to exceed 18 months. HUD has determined that most new projects requesting 1 year of funding normally take approximately 3 to 6 months to begin fully operating the new project (e.g., hiring staff, developing partnerships with landowners if leasing or renting). Therefore, a new project requesting 1 year of funding may request a grant term of 12 months to 18 months that will allow for the additional start-up process. Any new projects requesting capital costs (i.e., new construction, acquisition, or rehabilitation) are not eligible for 1-year requests. If 1-year of funding is requested for new projects with capital costs, HUD will increase the grant term to 3-years and the new project will be required to spend the funds requested over a 3-year period, assuming the project is conditionally selected for award.

b. Any new expansion project that is submitted to expand an eligible renewal CoC Program-funded project may only request a 1-year grant term, regardless of the project type.
b. Any new project that requests tenant-based rental assistance may request a 1-year, 2-year, 3-year, 4-year, or 5-year grant term.

c. Any new project that requests leasing costs—either leasing costs only or leasing costs plus other costs (e.g., supportive services, HMIS)—may only request up to a 3-year grant term.

d. Any new project that requests project-based rental assistance or sponsor-based rental assistance, or operating costs may request up to a 15-year grant term; however, the project applicants may only request up to 5 years of funds. Funding for the remainder of the term is subject to availability. Applicants must apply for additional funds as a renewal project application prior to the anniversary of the first expenditure of grant funds by which date the grant funds should have been expended, or if the date upon which funds must be expended has been extended by HUD, the date upon which the extension ends. CoC Program funds are not guaranteed past the initial 5-year grant term, if conditionally awarded.

e. Any new project that requests operating costs, Supportive Services Only, HMIS, and project administration may request 1-year, 2-year, 3-year, 4-year, or 5-year grant terms with funding for the same number of years.

f. Any new project that requests new construction, acquisition, or rehabilitation must request a minimum of a 3-year grant term and may request up to a 5-year grant term.

g. If an applicant requests funds for new construction, acquisition, or rehabilitation in addition to requesting funds for operating, supportive services, or HMIS, the funding will be for the 3 years requested, and the grant term will be 3 years plus the time necessary to acquire the property, complete construction, and begin operating the project. HUD will require recordation of a HUD-approved use and repayment covenant (a form can be obtained from the local HUD CPD Field Office) for all grants of funds for new constructions, acquisition, and rehabilitation. (24 CFR 578.81)

h. Any new project that is requesting consideration under the DV Bonus (see Section III.C.2.h of this NOFA more information) may only request a 1-year grant term, regardless of project type.

D) Matching

The applicant must match all grant funds, except for leasing funds, with no less than 25% of funds or in-kind contributions from other sources. 24 CFR 578.73 provides the information regarding match requirements. Project applicants that intend to use program income as match must provide an estimate of how much program income will be used for match.

E) Eligibility

To be eligible, applicants must meet threshold requirements on page 33 of the FY19 NOFA, V. C.3.b.(1) and (2) and V. C.3.c.

Eligible renewal projects applicants are defined below.

A) Renewal Projects - Awards made under the CoC Program and S+C project-based rental assistance with rehabilitation 10-year grants, are eligible for renewal for FY 2019 funds if they
are currently in operation and have an executed grant agreement that is dated no later than December 31, 2019 and expires in Calendar Year (CY) 2020 (the period from January 1, 2020 through December 31, 2020).

(1) HUD will not select renewal projects for an award of FY 2019 funds in this Competition unless the project meets one of the following additional eligibility requirements:
   (a) Any CoC Program grant or S+C project-based rental assistance grant with funds for rehabilitation awarded in a preceding Competition that expire in CY 2019.
   (b) Any S+C grant awarded prior to FY 2002 for which funding is expected to run out in CY 2019, and which has never applied for renewal funding.
   (c) Any grant awarded as S+C grant that included rehabilitation that has a 10-year grant term.

(2) The total request for each renewing project may not exceed the ARA. Additionally, where two or more eligible projects are being consolidated through the project application, the total ARA of the consolidated project must be equal to, or less than the sum of the original renewal projects. Because funds for acquisition, new construction, and rehabilitation may not be renewed, grants being renewed whose original expiring award included those funds may only renew leasing, supportive services, rental assistance, operating, and HMIS costs and may not exceed 10 percent in administrative costs. For information on ARA, see Section III.C.1.a of the NOFA.

F) Timeline
   RFP distributed July 25, 2019
   Concept papers for new projects due August 02, 2019
   Transitions grants Letter of Intent August 02, 2019
   Application deadline in e-snaps August 29, 2019
   Ranking, and Review Committee meets to review project applications September 5

G) Proposal Submission and Questions
   Concept papers should be submitted to Olivia Lyons, olyons@lhand.org, with a cc: to Karen Byron at krbyron@byrongrantconsulting.com

   In addition, technical questions can be submitted to Karen R. Byron, Byron Grant Consulting, at krbyron@byrongrantconsulting.com with a cc: to Olivia Lyons, olyons@lhand.org
August 15, 2019

Lynn CoC Meeting

Minutes

In attendance: Olivia Lyons – LHAND; Barbara Morrison – LHAND; Karen Byron – BGC; Kay O’Rourke – BGC; Charlene Roberts – LSA; Jason Newhall – AHL; Patrick Bonville – LCHC; Rita Paulino – Bedford VAMC; Gini Mazman – HAVEN; Brandy Rodriguez – YCC; Dianne Kuzia-Hills – MBT; Kelly Callahan – GLSS; Debbie Smith-Walsh – LCHC; Brandy Rodriguez – YCC; Jennifer Dinan – Bridgewell; Mark Evans – LSA; Melissa Glassman – Eliot; Darlene Gallant – LEO; Gargi Cooper – LCHC

Meeting Call to order/Introductions:

• Meeting was called to order by Olivia Lyons at 1:05 PM. Everyone present introduced themselves.

• The minutes from the 7/18/19 meeting were presented. Melissa Glassman made the motion to accept the minutes / Mark Evans seconded the motion. All voted in favor.

Sub-Committees

• Youth (OL) – The next meeting is 9/5/19 at 10:AM…a reminder e-mail will be sent out.

2019 CoC NOFA

• Karen Byron led the discussion and provided an excerpted outline of the Consolidated Application.

• For potential new members, the group had nothing to report.

• Question 1F-2a. – regarding domestic violence, what are some statistics?
  ✓ As a reminder, the CoC hosted a training from HAWC back in January of 2019 which was well received. Could Sara from HAWC provide any information?
  ✓ Gargi raised the issue…from what perspective are we talking about…medically?
  ✓ Patrick indicated that he will assist clients file a restraining order.
  ✓ Kelly noted that GLSS has protective services for those over 60.
  ✓ Kay added that permissions, data collection, etc. make it difficult to obtain this information – this is not just in Lynn.
  ✓ LEO has HAWC conduct staff trainings every 6 months.

• Question 3A – regarding first time homelessness, reduction rates, returns, etc.
✓ Melissa Glassman of Eliot talked about the Tenancy Preservation Program.
✓ Gargi discussed referrals to Northeast Legal Aid and/or health issues that may be affecting people’s ability to live independently.
✓ Mark Evans referred to the program currently being developed for ACO’s. Targeted MassHealth clients may be able to access funds for first/last month’s rent. $150 million will be available in Massachusetts.
✓ LEO receives Emergency Food and Shelter funds (as does Salvation Army and Catholic Charities) which were formerly titled FEMA funds. As Darlene Gallant stated, the funds are spent very quickly and the award dates vary from year to year.
✓ Dianne reminded the group of the work done by the Elderly Sub-Committee to advocate for affordable housing, which can help reduce the amount of time homeless. Other comments included: Coordinated Entry, HomeBASE, and CSPECH programs.
✓ Regarding returns to homelessness, members discussed: Housing First, harm reduction, financial literacy, landlord relationship building, and supportive services in-place.
✓ Prior to adjourning, brief discussions took place regarding youth programs, street outreach, Census Data and MOU’s from the YHDP application.
✓ Any other comments or questions, please reach out.

The meeting was adjourned at 2:30 PM.
LCoC Ranking
09.09.19

Agency

Project

New ______ Is this project a transition? _____ Is this project a consolidation? ______
Renewal ______ Is this project included in a consolidation request? _____
Consolidation ______
Expansion _______
Coordinated Entry ______ Passed Threshold Requirements
HMIS ________ Passed Threshold Requirements

Score ______

Ranking Committee Members Voting:
Dianne Kuzia-Hills ______
Brandy Rodriguez ______
Debbie Smith Walsh ______
Fran Troutman ______
**PROCESS FOR REVIEWING, SCORING AND RANKING**

The Lynn Continuum of Care (LCoC) Ranking, and Review Committee is a committee of non-funded LCoC members appointed annually to make strategic decisions for the LCoC throughout the year. If a Committee member receives funding as a subgrantee, he or she will not participate in the vote related to that project. Specific responsibilities include:

1. Provide input into the Ranking and Review tool to be used in reviewing projects.
2. Complete the review and ranking of all project applications to be submitted for funding in response to HUD’s annual CoC NOFA.
3. Make recommendations to the Board regarding individual project applications to be submitted in the FY19 LCoC response to the HUD NOFA as well as the Project Priority Listing.

**SCORING INSTRUCTIONS**

The LCoC developed these Scoring Instructions as part of the Ranking and Review Tool, which were approved by the Ranking, and Review Committee on August 21, 2019. The intent of this tool is to measure project performance and capacity using objective scoring criteria, including the HEARTH System Performance Measures, use of Housing First and low barrier entry, past performance, domestic violence evaluation and severity of needs and vulnerabilities experienced by program participants.

In order to be considered for inclusion in the LCoC HUD NOFA response, all projects must pass HUD Threshold Criteria: 1) Applicants must be eligible, (p. 33 of NOFA), 2) Applicants must meet project eligibility thresholds (p. 33 of NOFA), 3) Applicants must meet project quality thresholds (p. 34 of NOFA), and 4) Renewal projects must meet project renewal thresholds (p. 40 of NOFA).

Projects must also pass LCoC Threshold Criteria: 1) applications were received by the deadline, 2) the project is consistent with the Plan to End Homelessness and the Consolidated Plan covering the LCoC geographic region, (3) the applicant does not have any outstanding HUD monitoring and/or OIG Audit findings, and (4) the project complies with the requirements of the CoC interim rule (24 CFR part 578), including, but not limited to accepting referrals from the LCoC Coordinated Entry (CE) system and participating in the LCoC Homeless Management Information System (HMIS). New applicants that do not currently participate in CE or HMIS must indicate they will if their application(s) is/are awarded.
THRESHOLD CRITERIA

All project applications will be reviewed to determine whether they meet the following thresholds. Those that do not will not be included for ranking.

<table>
<thead>
<tr>
<th>THRESHOLD CRITERIA (ALL PROJECTS)</th>
<th>Pass/Fail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project is eligible.</td>
<td></td>
</tr>
<tr>
<td>Applicants must meet project eligibility thresholds as defined in the FY19 NOFA</td>
<td></td>
</tr>
<tr>
<td>Project meets project quality thresholds as defined in the FY19 NOFA</td>
<td></td>
</tr>
<tr>
<td>Renewal projects must meet project renewal thresholds as defined in the FY19 NOFA</td>
<td></td>
</tr>
<tr>
<td>Application materials were received by the posted deadline.</td>
<td></td>
</tr>
<tr>
<td>Project is consistent with the Plan to End Homelessness and the Consolidated Plan</td>
<td></td>
</tr>
<tr>
<td>No outstanding HUD monitoring or OIG Audit findings.</td>
<td></td>
</tr>
<tr>
<td>Project complies with the requirements of the CoC Interim Rule (24 CFR part 578), including but not limited to:</td>
<td></td>
</tr>
<tr>
<td>1) The project fills or will fill, all vacancies from the LCoC CE System in accordance with the LCoC CE Policies.</td>
<td></td>
</tr>
<tr>
<td>2) The project participates or will participate in, the LCoC HMIS.</td>
<td></td>
</tr>
</tbody>
</table>

EVALUATION METHOD

Project applications will be categorized as either Standard Renewal, First Time Renewal or New. All project applications will be evaluated and scored using the criteria in these Instructions. The LCoC Ranking Committee will also consider the priorities and information contained in the FY2019 NOFA in its review. Projects will be ranked according to the percentage of points received.

Standard Renewals: Standard Renewals are renewing projects that have operated for a full 12-month period. These projects will be evaluated using project performance data from the most recently submitted Annual Performance Report (APR) and other objective data gathered from HMIS and other sources, such as the LCoC Attendance report.

First Time Renewals: First Time Renewals are those that were awarded funding in FY2018, but have not yet completed a full 12-month period of operation. These projects will be evaluated using the same scoring methodology as New Projects.
**New Projects:** New projects are projects that have never been awarded CoC Program funds. These projects will be evaluated and scored using HUD's scoring criteria, guidance, and LCoC-defined priorities. They may include projects from applicants who have never received funding from the LCoC, those who received funding in the past, but not in the FY18 round of funding, and applicants who are also pursuing renewal funding.

### Project Approach

<table>
<thead>
<tr>
<th><strong>PROJECT APPROACH (ALL PROJECTS)</strong></th>
<th>Projects can receive up to 10 points, but there will be no partial points awarded. These scores are based upon the project application.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Low-Barrier and Housing First Maximum Points: 10</strong></td>
<td>The project follows a Low-Barrier approach, meaning the project <em>does not</em> screen out participants based on any of the following criteria:</td>
</tr>
<tr>
<td></td>
<td>- Having too little or no income</td>
</tr>
<tr>
<td></td>
<td>- Active or history of substance abuse</td>
</tr>
<tr>
<td></td>
<td>- Having a criminal record with exceptions for state-mandated restrictions</td>
</tr>
<tr>
<td></td>
<td>- Having an eviction record</td>
</tr>
<tr>
<td></td>
<td>- History of domestic violence (e.g., lack of protective order, period of separation from abuser, or law enforcement involvement)</td>
</tr>
<tr>
<td></td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>The project follows a Housing First approach, meaning the project <em>does not</em> terminate participants from the program for any of the following reasons:</td>
</tr>
<tr>
<td></td>
<td>- Failure to participate in supportive services</td>
</tr>
<tr>
<td></td>
<td>- Failure to make progress on a service plan</td>
</tr>
<tr>
<td></td>
<td>- Loss of income or failure to improve income</td>
</tr>
<tr>
<td></td>
<td>- Being a victim of domestic violence</td>
</tr>
<tr>
<td></td>
<td>- Any other activity not covered in a lease agreement</td>
</tr>
<tr>
<td></td>
<td>5</td>
</tr>
<tr>
<td></td>
<td><em>Projects will be scored according to the <em>percentage</em> of points received.</em></td>
</tr>
</tbody>
</table>

07.31.19
## Standard Renewal

### PROJECT PERFORMANCE

<table>
<thead>
<tr>
<th>Housing Stability</th>
<th>Source</th>
<th>Maximum Points: 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q23a and 23b combined - % of participants who exited to PH</td>
<td>APR</td>
<td>6</td>
</tr>
<tr>
<td>Q22c % of participants who were placed in PH within 90 days of entry into project</td>
<td>APR</td>
<td>2</td>
</tr>
<tr>
<td>Q22c % of participants who were placed in PH within 24 months of entry into project</td>
<td>APR</td>
<td>2</td>
</tr>
</tbody>
</table>

### Total Income (including Mainstream Benefits)

<table>
<thead>
<tr>
<th>Total Income (including Mainstream Benefits)</th>
<th>Source</th>
<th>Maximum Points: 8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q18 % of persons age 18 and older who maintained or increased their total income (from all sources) as of the end of the operating year or program exit</td>
<td>APR</td>
<td>8</td>
</tr>
</tbody>
</table>

### Earned Income

<table>
<thead>
<tr>
<th>Earned Income</th>
<th>Source</th>
<th>Maximum Points: 8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q19a1 % of persons age 18 through 61 who increased their earned income (i.e., employment income) as of the latest status</td>
<td>APR</td>
<td>4</td>
</tr>
</tbody>
</table>

| Q19a1 % of persons age 18 through 61 who maintained their earned income (i.e., employment income) as of the latest status | APR | 4 |

### Utilization Rate

<table>
<thead>
<tr>
<th>Utilization Rate</th>
<th>Source</th>
<th>Maximum Points: 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q02 % unit utilization rate</td>
<td>HMIS</td>
<td>6</td>
</tr>
<tr>
<td>Category</td>
<td>Source</td>
<td>Maximum Points:</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>--------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Expenditures</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Q28 Total % spend down (unspent funds are recaptured by HUD)</td>
<td>APR</td>
<td>95%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>90% to 94.99%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>85% to 89.99%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>80% to 84.99%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≤79.99%</td>
</tr>
<tr>
<td>Expenditures</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Q28 Total % spend down (unspent funds are recaptured by HUD)</td>
<td>APR</td>
<td>≥95%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>90% to 94.99%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>85% to 89.99%</td>
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<tr>
<td></td>
<td></td>
<td>80% to 84.99%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≤79.99%</td>
</tr>
<tr>
<td>DATA</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Timeliness</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>Annual Performance Report (APR) submitted on time</td>
<td>APR</td>
<td>≤6</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≤10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥11</td>
</tr>
<tr>
<td>Project-Level:Q06e average # of days to enter data from program intake and exit.</td>
<td>APR</td>
<td>≤6</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≤10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥11</td>
</tr>
<tr>
<td>Completeness</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>APR Q06a % Error Rate Refused/Unknown responses for Universal Data Elements – any element</td>
<td>APR</td>
<td>≤9%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥10%</td>
</tr>
<tr>
<td>APR Q06b % Error Rate for Universal Data Elements</td>
<td>APR</td>
<td>≤5%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥6%</td>
</tr>
<tr>
<td>COST EFFECTIVENESS</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Budget</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>% Supportive Services Costs Requested in FY2019</td>
<td>Appl</td>
<td>≤20%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21% to 35%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥36%</td>
</tr>
<tr>
<td>OTHER</td>
<td>Source</td>
<td><strong>Maximum Points:</strong></td>
</tr>
<tr>
<td>------------------------</td>
<td>--------</td>
<td>---------------------</td>
</tr>
<tr>
<td><strong>Drawdowns</strong></td>
<td>LOCCS</td>
<td>4</td>
</tr>
<tr>
<td>HUD quarterly eLOCCS or LOCCS draws</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Housing First Implementation</strong></td>
<td>Monitoring report</td>
<td>5</td>
</tr>
<tr>
<td>As demonstrated in the Monitoring Report, the project implemented Housing First –</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fully implemented – All Housing First elements were adhered to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partially implemented – Low Barrier elements were utilized, but all Housing First elements were not</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Coordinated Entry Participation</strong></td>
<td>CE Report and APR Q07a</td>
<td>5</td>
</tr>
<tr>
<td>Level of participation as defined in the CE Report and APR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>95-100%</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>80-94%</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>79% or less</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>Chronically Homeless Dedicated Beds</strong></td>
<td>Appl</td>
<td>4</td>
</tr>
<tr>
<td>All projects: % of Beds that are dedicated to chronically homeless in FY2019.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>90-100%</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>≤89%</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Specific Population Focus</strong></td>
<td>Appl</td>
<td>5</td>
</tr>
<tr>
<td>Project has existing special capacity (in its facilities, program designs, tools, outreach or methodologies) to serve one or more of the following subpopulations. 1 point for each subpopulation:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Chronically homeless individuals and/or families,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Veterans,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Families with children,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Youth (under age 25), and/or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Victims of domestic violence.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*If a project has insufficient data to score a criterion, the project will receive the averaged points for that criterion.*
<table>
<thead>
<tr>
<th>Source</th>
<th>Maximum Points: 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application</td>
<td>2</td>
</tr>
<tr>
<td>CoC minutes</td>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statistic</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Approach Points:</td>
<td>10</td>
</tr>
<tr>
<td>Project Performance Points:</td>
<td>38</td>
</tr>
<tr>
<td>Data Points:</td>
<td>13</td>
</tr>
<tr>
<td>Cost-Effectiveness Points:</td>
<td>4</td>
</tr>
<tr>
<td>Other Points:</td>
<td>23</td>
</tr>
<tr>
<td>Bonus Points</td>
<td>4</td>
</tr>
<tr>
<td>Standard Renewal Points:</td>
<td>92</td>
</tr>
</tbody>
</table>
### ADDITIONAL THRESHOLD CRITERIA FOR NEW PROJECTS

#### ADDITIONAL THRESHOLD CRITERIA (NEW PROJECTS)

The project is Permanent Supportive Housing Dedicated PLUS or has 100% of beds dedicated to serving chronically homeless; Rapid Rehousing for homeless individuals and families including unaccompanied youth; joint TH and PH-RRH which meet the criteria defined at V.B.3.(c) of the FY18 NOFA; or a project specifically designed to meet the needs of those who are homeless victims of domestic violence including PH-RRH, or joint TH and PH-RRH.

### PROJECTED OUTCOMES

#### Housing Stability

<table>
<thead>
<tr>
<th>Source</th>
<th>Maximum Points: 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>% of participants who will exit to PH</td>
<td>Appl</td>
</tr>
<tr>
<td>≥80%</td>
<td>2</td>
</tr>
<tr>
<td>70% to 79.99%</td>
<td>1</td>
</tr>
<tr>
<td>≤69.99%</td>
<td>0</td>
</tr>
<tr>
<td>% of participants who will be placed in PH within <strong>90 days</strong> of entry into project</td>
<td>Appl</td>
</tr>
<tr>
<td>≥75%</td>
<td>2</td>
</tr>
<tr>
<td>60% to 74.99%</td>
<td>1</td>
</tr>
<tr>
<td>≤59.99%</td>
<td>0</td>
</tr>
</tbody>
</table>

#### Total Income (including Mainstream Benefits)

<table>
<thead>
<tr>
<th>Source</th>
<th>Maximum Points: 8</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>% of persons age 18 and older who <em>will increase</em> their total income (from all sources) as of the end of the operating year or program exit</td>
<td>Appl</td>
</tr>
<tr>
<td>≥80%</td>
<td>4</td>
</tr>
<tr>
<td>70% to 79.99%</td>
<td>2</td>
</tr>
<tr>
<td>≤69.99%</td>
<td>0</td>
</tr>
<tr>
<td>% of persons age 18 and older who will <em>maintain</em> their total income (from all sources) as of the end of the operating year or program exit</td>
<td>Appl</td>
</tr>
<tr>
<td>≥80%</td>
<td>4</td>
</tr>
<tr>
<td>70% to 79.99%</td>
<td>2</td>
</tr>
<tr>
<td>≤69.99%</td>
<td>0</td>
</tr>
<tr>
<td>Earned Income</td>
<td>Source</td>
</tr>
<tr>
<td>---------------</td>
<td>--------</td>
</tr>
<tr>
<td>% of persons age 18 through 61 who will <em>increase</em> their earned income (i.e., employment income) as of the end of the operating year or program exit</td>
<td>Appl</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>% of persons age 18 through 61 who will <em>maintain</em> their earned income (i.e., employment income) as of the end of the operating year or program exit</td>
<td>Appl</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**DATA**

<table>
<thead>
<tr>
<th>HMIS Capacity</th>
<th>Source</th>
<th>Maximum Points: 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency level (for all agency projects in HMIS): average # of days to enter data from program intake and exit.</td>
<td>HMIS</td>
<td>≤7 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8-14 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥15 0</td>
</tr>
<tr>
<td>For applicants who have not previously participated in HMIS - Agency has a Workplace Information Security Policy.</td>
<td>WISP Policy</td>
<td>Yes 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No 0</td>
</tr>
</tbody>
</table>

**COST EFFECTIVENESS**

<table>
<thead>
<tr>
<th>Budget</th>
<th>Source</th>
<th>Maximum Points: 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Supportive Services Costs Requested in FY2019</td>
<td>Appl</td>
<td>≤20% 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21% to 35% 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥36% 0</td>
</tr>
</tbody>
</table>

**OTHER**

<table>
<thead>
<tr>
<th>Mainstream Services</th>
<th>Source</th>
<th>Maximum Points: 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project will provide transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs</td>
<td>Appl</td>
<td>2</td>
</tr>
<tr>
<td>Project will demonstrate collaboration with other agencies to assist clients in obtaining other services.</td>
<td>Appl</td>
<td>2</td>
</tr>
<tr>
<td>Project will follow-up with participants at least annually to ensure mainstream benefits are received and renewed</td>
<td>Appl</td>
<td>2</td>
</tr>
</tbody>
</table>
### Specific Population Focus

Project has existing special capacity (in its facilities, program designs, tools, outreach or methodologies) to serve one or more of the following subpopulations. 1 point for each subpopulation:

- Chronically homeless individuals and/or families,
- Veterans,
- Families with children,
- Youth (under age 25), and/or
- Victims of domestic violence.

#### Project Milestones

<table>
<thead>
<tr>
<th>Source</th>
<th>Maximum Points: 6</th>
</tr>
</thead>
</table>
| **First Participant Housed**: Days from grant execution to house first participant | Appl
- ≤30 | 4
- 31-60 | 2
- ≥61 | 0 |

| **Project at Capacity**: Days from grant execution for project to be at capacity | Appl
- <90 | 2
- 91 to 120 | 1
- ≥121 | 0 |

### Agency Capacity and Experience

<table>
<thead>
<tr>
<th>Source</th>
<th>Maximum Points: 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Federal Funds</strong>: Currently operating ≥1 other federally funded projects</td>
<td>Appl</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Source</th>
<th>Maximum Points: 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Financial Management Capacity</strong>: Agency has capacity to submit monthly cost reimbursement invoices and to meet program expenses in advance of reimbursement</td>
<td>Appl</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Source</th>
<th>Maximum Points: 4</th>
</tr>
</thead>
</table>
| **Homeless Documentation**: Agency's years of experience with documenting homelessness according to HUD's Defining "Homeless" Rule | Appl
- ≥3 | 2
- 1 to 2 | 1
- <1 | 0 |
| Chronic Homeless - Currently operating ≥1 project serving chronically homeless households | Appl | ≥2 | 2 |
| | | 1 | 1 |
| | | <1 | 0 |
| RRH: Agency Experience Operating RRH | Source | Maximum Points: 2 |
| Currently operating ≥1 rapid rehousing project | Appl | ≥2 | 2 |
| | | 1 | 1 |
| | | <1 | 0 |
| Low-Barrier and Housing First Experience | Source | Maximum Points: 5 |
| Applicant demonstrates low barrier and housing first (or comparable housing model) implementation experience. | Appl | 5 |

*Projects will be scored according to the *percentage* of points received.*
## LCoC FY19 Ranking and Review Decisions

*Tier 1 is equal to 100 percent of the combined Annual Renewal Amounts for all projects eligible for renewal for the first time plus 94 percent of the combined Annual Renewal Amounts for all other projects eligible for renewal $1,741,146*

<table>
<thead>
<tr>
<th>Rank</th>
<th>Committee Score</th>
<th>Project</th>
<th>Component</th>
<th>Amount</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>88.0%</td>
<td>Lynn Shelter</td>
<td>PSH</td>
<td>$49,184</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>80.3%</td>
<td>Dedicated PLUS</td>
<td>PSH</td>
<td>$172,188</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>78.8%</td>
<td>Bridgewell, LSA, PSH</td>
<td>PSH</td>
<td>$246,695</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>75.0%</td>
<td>Bridgewell - Project COPE PH</td>
<td>PSH</td>
<td>$102,042</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>50.0%</td>
<td>Lynn Shelter Plus Care</td>
<td>PSH</td>
<td>$903,064</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>N/A</td>
<td>LCoC - Coordinated Entry</td>
<td>CE</td>
<td>$40,614</td>
<td>Per the Ranking Policy, CE is placed in this position.</td>
</tr>
<tr>
<td>7</td>
<td>N/A</td>
<td>HMIS</td>
<td>HMIS</td>
<td>$12,352</td>
<td>Per the Ranking Policy, HMIS is placed in this position.</td>
</tr>
<tr>
<td>8</td>
<td>46.7%</td>
<td>Lynn Shelter Plus Care II</td>
<td>PSH</td>
<td>$215,007</td>
<td></td>
</tr>
</tbody>
</table>

*The amount in Tier 2 is the difference between Tier 1 and the CoC’s ARD plus any amount available for CoC Bonus projects (not including amounts available for DV Bonus projects)*

<table>
<thead>
<tr>
<th>Rank</th>
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<th>Component</th>
<th>Amount</th>
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<tr>
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<td>46.7%</td>
<td>Lynn Shelter Plus Care II</td>
<td>PSH</td>
<td>$215,007</td>
</tr>
</tbody>
</table>

**$1,741,146**
<table>
<thead>
<tr>
<th>Rank</th>
<th>Score</th>
<th>Project</th>
<th>Address</th>
<th>Component</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>88.0%</td>
<td>Lynn Shelter PSH</td>
<td>33 High Street</td>
<td>PSH</td>
<td>$49,184</td>
</tr>
<tr>
<td>2</td>
<td>80.3%</td>
<td>Dedicated PLUS</td>
<td>8 Rogers Avenue</td>
<td>PSH</td>
<td>$172,188</td>
</tr>
<tr>
<td>3</td>
<td>78.8%</td>
<td>Bridgewell, LSA, PSH</td>
<td>Multiple addresses throughout Lynn</td>
<td>PSH</td>
<td>$246,695</td>
</tr>
<tr>
<td>4</td>
<td>75.0%</td>
<td>Bridgewell - Project COPE PH</td>
<td>534 Essex Street, 75 Silsbee, 86 Silsbee</td>
<td>PSH</td>
<td>$102,042</td>
</tr>
<tr>
<td>5</td>
<td>50.0%</td>
<td>Lynn Shelter Plus Care</td>
<td>Multiple addresses throughout Lynn</td>
<td>PSH</td>
<td>$903,064</td>
</tr>
<tr>
<td>6</td>
<td>N/A</td>
<td>LCoC - Coordinated Entry</td>
<td>156 Broad Street</td>
<td>CE</td>
<td>$40,614</td>
</tr>
<tr>
<td>7</td>
<td>N/A</td>
<td>HMIS</td>
<td>10 Church Street</td>
<td>HMIS</td>
<td>$12,352</td>
</tr>
<tr>
<td>8</td>
<td>46.7%</td>
<td>Lynn Shelter Plus Care II</td>
<td>Multiple addresses throughout Lynn</td>
<td>PSH</td>
<td>$215,007</td>
</tr>
<tr>
<td>9</td>
<td>41.0%</td>
<td>LEO AHL PH</td>
<td>50 Andrew Street</td>
<td>PSH</td>
<td>$52,038</td>
</tr>
<tr>
<td>10</td>
<td>84.8%</td>
<td>LSA DV</td>
<td>Confidential address; agency is at 100 Willow Street, Lynn</td>
<td>RRH</td>
<td>$176,336</td>
</tr>
</tbody>
</table>

**Tier 1 Total** $1,741,146

<table>
<thead>
<tr>
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<td>$59,099</td>
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<td>50 Andrew Street</td>
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<td>LSA DV</td>
<td>Confidential address; agency is at 100 Willow Street, Lynn</td>
<td>RRH</td>
<td>$176,336</td>
</tr>
</tbody>
</table>

**Tier 2 Total** $287,473

Planning, not scored, 10 Church Street $55,568
First Time Homebuyer Education
Online First Time Homebuyer Class
First Time Homebuyer Education Registration

Lynn Housing Authority & Neighborhood Development
Welcome to the website of the Lynn Housing Authority & Neighborhood Development (LHAND).
Since 1948 the Lynn Housing Authority & Neighborhood Development (LHAND) has had a mission of assisting low and moderate-income families and individuals with safe and affordable housing.

Our emphasis is on fostering economic independence and providing homeownership opportunities. The agency has continually changed and since 1998 the LHAND has grown to include neighborhood services and administers programs on behalf of the office of Mayor Tom McGee and the City of Lynn Massachusetts.

LHAND continues to be committed to enhancing the quality of our community and building stronger, healthier neighborhoods by providing a wide range of neighborhood services and funding a variety of grant and loan programs that address the needs of renters, owners, homeowners, and nonprofit housing providers.

Public Notices
• FSS Brochure
• FSS Literature
• FSS Pre-Enrollment Form

Release on Closure
Release on Closure

Lynn Continuum of Care (LCoC) FY19 CoC Competition NOFA
• LCoC Calendar
• LCoC Request for Proposals
• LCoC RFP NOFA 2019
• Allocation and
• Reallocation Policy

Ranking and Review 2019
• Ranking and Review Decisions

Public Hearing
Lynn Continuum of Care Public Hearing on...
September 19, 2019

Lynn CoC Meeting

Minutes

**In attendance:** Olivia Lyons – LHAND; Sara Johnson – LHAND; Monica Cronin – Eliot CHS; Tracey Scherrer – LPS; Yuribe Sanchez-Rijo – CCN; Elaine White – Bridgewell; Harry MacCabe – LHAND; Andrew Gilroy – LEO; Karen Byron – BGC; Jason Newhall – AHL; Patrick Bonville – LCHC; Rita Paulino – Bedford VAMC; Brandy Rodriguez – YCC; Dianne Kuzia-Hills – MBT; Debbie Smith-Walsh – LCHC; Mark Evans – LSA; Birgitta Damon – LEO; Noreen Melanson – Eliot; Laura Gallant - NJC

**Meeting Call to order/Introductions:**

- Meeting was called to order by Elaine White at 1:05 PM. Everyone present introduced themselves.
- The minutes from the 8/15/19 meeting were presented. Brandy Rodriguez made the motion to accept the minutes / Harry MacCabe seconded the motion. All voted in favor.

**2019 CoC NOFA**

- Karen Byron reminded the group that the application is due 9/30/19, with an internal deadline of 9/27/19 to avoid last minute issues (technical or other).
  - KB will send out the draft of the Consolidated Plan to the group – and will ask for comments back to her by 9/23/19. The draft will also be posted on the LHAND website.
  - In terms of Outreach / Street activity, Lynn Community Health Center DOES do this, but with the main goal of medical needs – with a follow up of surrounding them with other resources if they engage. Also, the Shelter Day program is a source for Outreach. Eliot is also a CSPEH provider; My Brother’s Table conducts the Clinic; Clubhouses.

- From a more broad perspective, Elaine noted that the Shelter Plus Care providers should meet (at least quarterly) to work on the Moving On philosophy.

**RAFT**

- Sara Johnson updated the group – through the LHAND website, consumers will be able to access a pre-application form for the RAFT program. DHCD initiated this platform with the goal of making the process more efficient for clients. While applying in person
is still more than acceptable, this additional resource might help clients save a trip to start the process. Sara hopes to have a Mini Training for providers and will get information out to the group as soon as it is available.

**VAWA**

- LHAND will be hosting a training on 9/27/19 – CoC providers are encouraged to attend. The flyer will be sent electronically.

**Sub-Committees**

- Veterans – will meet on 9/24/19 at 10:AM at 10 Church Street.
- Youth – Floyd is no longer at LHAND, so Jalene will act as Co-Chair with Tracey. Jen Arias has moved on from the Siemer Program – so her position is posted. Two issues that have come up at recent meetings are: the need for warming centers and the prevalence of prostitution. With the new school year, many families do not understand how to accurately identify as homeless in order to access appropriate resources. Also, the fear of repercussions for those undocumented is huge. We will try to get a Guest Speaker from the Rapid Response Network – Virginia Lee. The next youth meeting is scheduled for 10/3/19 at 10:AM.
- Elders – Elaine shared a correspondence from Mayor McGee.

The meeting was adjourned at 2:10 PM.
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- LCoC Request for Proposals
- LCoC RFP NOFA 2019

Redevelopment
- Redevelopment

Public Hearing
May 7, 2019

Charles Gaeta  
Executive Director  
LHAND  
10 Church Street  
Lynn, MA 01902

RE: FR-6200-N-35

Dear Mr. Gaeta,

The MassHire-North Shore Youth Career Center helps youth who are looking for career assistance and job opportunities. We provide access to the Internet, resume writing, fax machines, job listings, and a high-energy staff who are eager to assist youth. Our goal is to provide opportunities for our future workers to become a part of the local workforce and to pursue personal career goals. All MassHire-North Shore Youth Career Center services are provided to youth at no cost.

It is our pleasure to continue our partnership with the LHAND Family Success Center as our youth services staff have been located at the Family Success Center since 2015. Also, please note that the Career Center has worked with LHAND on workforce development initiatives for over twenty years.

The North Shore Youth Career Center will support the successful implementation of the Youth Homelessness Demonstration Program grant by providing the following services to at risk and homeless youth, a financial value of $5,000:

- Continuing to serve on the LHAND CoC and Youth Sub-Committee;
- Dedicating staff to assist youth on-site at the Family Success Center;
- Supporting job skills development;
- Providing resume writing and mock interviewing support; and
- Organizing job fairs with local and regional employers.

We look forward to continuing our close partnership with the LHAND Family Success Center!

Regards,

Mark Whitmore, Executive Director
Lynn Housing Authority & Neighborhood Development Continuum of Care’s Memorandum of Understanding with Lynn Public Schools – Local Education Agency

A. PURPOSE

The Lynn Housing Authority & Neighborhood Development (LHAND) Continuum of Care has partnered with the Lynn Public Schools since 2006. Collaboratively, LHAND and the Lynn Public Schools have worked together to provide prevention, identification, and early intervention services to at-risk and homeless youth. The Lynn Public Schools has been a dedicated partner since the inception of LHAND’s Family Success Center in 2014. The Family Success Center was designed as a “one-stop” location for homeless or at risk of being homeless families to obtain needed services and provide a point of access for a comprehensive coordinated entry process. Through the Family Success Center, the LHAND Continuum of Care has reduced homelessness by connecting families to jobs, improving skills through education and training, building assets and skills through financial education, using personal coaching, and addressing needs of individuals to provide immediate access to income supports and benefits.

This Memorandum of Understanding will commit the Lynn Public Schools to partnering with LHAND to continue working together to educate and address the needs of at risk, pregnant, parenting, Lesbian, Gay, Bisexual, Transgender, Questioning, and homeless youth. LHAND and the Lynn Public Schools will continue working together through the implementation of the U.S. Department of Housing and Urban Development Youth Homelessness Demonstration Program grant. The LHAND Youth Homelessness Demonstration Program, Unite for Youth’s priority is to promote health and housing stability of vulnerable populations.

B. AREAS OF AGREEMENT

1. LHAND’s Responsibilities:
   a. LHAND will serve as the fiscal agent for the Youth Homelessness Demonstration Program.
   b. LHAND will seek to fulfill the Unite for Youth’s goals of (1) building comprehensive systems of care for young people to prevent and end youth homelessness; (2) utilizing the insights and perspectives of homeless and formerly homeless youth to guide the development of the Youth Homelessness Demonstration Program coordinated community plan and provision of services; (3) ensuring that the appropriate type of housing assistance and levels of service for providing safe and stable housing are available within the community; and (4) utilizing innovative practices to design better projects and strong comprehensive plans to prevent and end youth homelessness.
   c. LHAND will maintain open communication, transparency, and dissemination of implementation lessons learned and evaluation findings to the Lynn Public Schools. The findings from Unite for Youth will be compiled into a guide which will serve as future guidance for other communities that seek to recreate the Unite for Youth model in our region and nation.
2. Lynn Public Schools’ Responsibilities:

   a. Lynn Public Schools will support *Unite for Youth* by working closely with LHAND to identify at risk and homeless youth and connect them to academic supports and resources available through the Family Success Center.

   b. Lynn Public Schools will support *Unite for Youth* by working closely with LHAND to identify unaccompanied homeless youth, connecting them to housing and resources available.

   c. Lynn Public Schools will support the implementation of CommUniverCity at Lynn, an education-workforce development collaboration that integrates affordable and effective educational pathways from preschool to graduate school and into the workforce.

   d. Lynn Public Schools will assist youth with obtaining housing and utilizing counseling services.

   e. Lynn Public Schools will deliver educational programming to all youth, including at risk, pregnant, parenting, LGBTQ, and homeless individuals.

Lynn Public Schools will provide representatives to serve on the *Unite for Youth* Action Board, including homeless or formerly homeless youth, meeting monthly to review the status of project implementation and inform policymaking decisions, support the development and implementation of the coordinated community plan, study evaluation findings, identify any corrective adjustments needed, and plan for long-term sustainability and future replication and expansion of the *Unite for Youth* model.

Each member of this MOU is bound to the statements made within LHAND’s Youth Homelessness Demonstration Program application and every assurance made by the applicant.

C. TERM

This MOU in its present form shall be effective as of the date of signing and shall remain in effect for a period of no longer than the period of the grant award which is August 15, 2019 through August 14, 2021 provided that grant funds are awarded as requested and that the grant funds continue through the expected life of the grant program.

Charles Gaeata  
Executive Director  
LHAND Continuum of Care

Patrick A. Tutwiler, PhD  
Superintendent of Schools  
Lynn Public Schools

Date  
5-1-19
• Conduct outreach to youth service providers within the region to make an effort to increase representation in the CoC.

4.6 Membership Committee
1. Recruits new members to the Lynn CoC Board.
2. Plans and executes full membership meetings.
3. Reviews membership applications.
4. Tracks members in good standing.

5 Roles and Responsibilities – Collaborative Applicant and HMIS Lead

5.1 Collaborative Applicant
The Lynn CoC Collaborative Applicant (CA) is Lynn Housing Authority & Neighborhood Development. In coordination with a consultant hired with the approval of the Lynn CoC, the CA is required to fulfill the following tasks:

Complete and submit the Registration, Consolidated Application and Project Priority Listing in esnaps, in response to HUD’s annual CoC Program NOFA for homeless assistance resources in collaboration with the FM;

Present a timeline including deadlines to all project applicants for individual project submissions as well as Consolidated Application submission

Complete the response to the annual NOFA and Lynn CoC Board;

Collect all data and submit a chart to HUD of all projects planning to reapply;

Create and submit the housing inventory chart (HIC) in coordination with the FM;

Submit the annual PIT data in coordination with the FM;

Create and submit the grant inventory worksheet (GIW) in coordination with the FM;

Submit the annual System Performance Measures in HDX in coordination with the FM;

Establish priorities for funding projects in the CoC geographic area in collaboration with the CoC Board;

Update and monitor progress on the Plan to End Homelessness and oversee the Annual Gaps Analysis in partnership with the Planning and Governance Committee;

Submit requests for Planning and HMIS funding through the annual NOFA process; and

Create agendas for CoC FM and Board meetings in collaboration with the Board Chair.
5.2 **HMIS Lead**

An entity must be selected by the Lynn CoC Board to oversee HMIS management. The HMIS Lead is responsible for:

Ensuring compliance with the latest HMIS Data and Technical standards published by HUD through collaboration with the HMIS software provider, Social Solutions, and Massachusetts Department of Housing and Community Development (DHCD), the entity responsible for oversight of the entire HMIS system for the Lynn CoC;

Serving as main point of contact for CoC with Social Solutions and DHCD, providing accurate and timely updates to CoC membership with relevant information regarding HMIS system;

Accurately calculating the size and needs of the homeless population;

Coordinating training of new staff at member agencies on accurate HMIS entry;

Serve as primary contact with Social Solutions.

Reporting as necessary to various entities such as Commonwealth of Massachusetts Department of Housing and Community Development, Lynn Housing Authority & Neighborhood Development, or other stakeholders within the Continuum of Care, the U. S. Department of Housing and Urban Development and others, ensuring that any and all required reports are completed in an accurate and timely manner in accordance with requirements set forth by requesting entity.

Review the HMIS policies and procedures annually and update as appropriate.

---

6 **Organizational Policies and Procedures**

6.1 **Code of Conduct, Conflicts of Interest and Recusal Process**

In compliance with 24 CFR 578.95(b), the Lynn CoC has developed this policy. Lynn CoC Board members must exercise care when acting on behalf of the Lynn CoC as do Ranking, Review and Monitoring Committee Members. These individuals must complete the work they have agreed to undertake in a timely manner. In addition, they must attend respective Board and Ranking and Review meetings and be prepared to discuss matters presented for their deliberation. Absence without notice or explanation for three meetings within a calendar year or repeated failure to complete work assignments will be grounds for removal from the Board. Repeated failure to participate thoughtfully and respectfully in discussions or persistent disruptive or obstructive conduct during meetings will be grounds for removal.

Lynn CoC Board and Ranking and Review Committee members must abide by the following rules in order to avoid conflicts of interest and promote public confidence in the integrity of the Lynn CoC and its processes. Failure to honor these rules will be grounds for removal from the Board and any of its committees.

1. Members may not participate in or influence discussions or resulting decisions concerning the award of a grant or other financial benefit to:
Balance of State Continuum of Care
HMIS Protocols and Procedures
Required for HUD Compliance
June, 2013

Objective
Develop an HMIS Plan and Procedures for the Balance-of-State Continuum of Care that clarifies roles and responsibilities so that the CoC can produce accurate and timely reports to HUD.

Overview
DHCD uses an instance of Efforts to Outcomes Software (ETO) known as ASIST to manage HUD reporting as well as the Commonwealth’s overall homeless response system. Projects, and programs within projects, can use any qualified HMIS system as long as the raw data can be provided in CSV or XML format.

DHCD staff is available for technical assistance but Sponsors and Projects are responsible for their own data and overall compliance requirements.

Sponsors and Projects have been given appropriate site access in ASIST as well as the technical capacity to generate reports for all programs they are responsible for. DHCD will provide training to Sponsors and Projects to ensure that capacity is maximized.

DHCD is responsible for working with Social Solutions, the ETO vendor, to integrate all HMIS data that meets current HUD standards into ASIST. Additionally, DHCD has worked with Social Solutions to facilitate the ability to synchronize various instances of ETO and the integration of non-ETO data through uploads.

DHCD convenes an HMIS committee that will develop and finalize a comprehensive Training / data quality plan; and security and privacy policies.

HMIS requirements

CoC-funded projects:
1. Annual Performance Report (APR) - required for projects funded by the CoC
2. Exhibit 2 of the Annual HUD NOFA

Housing / bed units that are within the geography of the CoC:
If a “bed” is set aside or designated to serve a homeless person, then it should be included on the e-HIC. Programs that serve both homeless and non-homeless do not have to be included on the e-HIC unless there are a given number of beds reserved for homeless individuals or units for families.
1. Annual Homeless Assessment Report (AHAR)
2. Point-in-Time count
3. Electronic Housing Inventory Chart (E-HIC)

**Basic CoC Structure:**
The BoS CoC consists of a wide range of projects, multiple layers of responsibility and programs throughout the Commonwealth.

**Grantee:**
- For nearly all grants, DHCD is the “Grantee” as the funds flow from HUD to DHCD which has the responsibility for distribution
  - Those agencies that used to be part of the Framingham / Waltham CoC (Advocates, MW Legal Services and SMOC), had been their own grantee but effective in 2013, DHCD has taken over responsibility for these grants.
- The Grantee then distributes funds to Sponsors for specific Projects. In some cases, the Grantee and the Sponsor are the same entity.

**Sponsor:**
- Sponsors receive funds from Grantees, and then contract with community based organizations or with the Massachusetts Housing and Shelter Alliance (MHSA) for services
- The Department of Mental Health; the Department of Public Health Bureau of Substance Abuse Services and the Department of Public Health Office of HIV/AIDS and the Department of Veterans Services are all Sponsor agencies
- In some cases, the Sponsor and the Project are the same entity
- For S+C projects the funds are managed through a DHCD Administrative Plan which governs the release of S+C funds to Regional Housing Agencies. The Supportive services are funded by and managed through the Sponsor agencies which are primarily DPH: BSAS, DPH HIV/AIDS and DMH. The exceptions to this are:
  1. The Cape Regional Housing Initiative;
  2. Viet Vets Workshop; and
  3. HOAP

**Providers (Projects):** (A Project can have multiple providers and a Provider may be funded for multiple projects)
- Community-based organizations that receive funding to provide specific housing, outreach and services to homeless individuals and families as approved in the initial HUD grant application plus any subsequent amendments approved by HUD.

**Roles and Responsibilities:**
Each program / provider is structured and staffed differently: Some projects may combine tasks into one job description while other projects may break them out. DHCD or Sponsor agencies can work with projects to determine the specific roles and responsibilities.

**Grantee:** (HMIS Coordinator)
- Develop and implement strategies for on-going data quality
- Understand and interpret all HUD HMIS requirements
  - Communicate changes to Sponsors
  - When communicating directly with providers, Sponsors are copied
- Evaluate data from Sponsors and provide specific action items to address quality
- Provide training and technical assistance to ensure high quality data
- Enter reports into HDX (e-HIC, PITT, AHAR)
**Sponsor:** (For projects where DHCD is both the grantee and the sponsor, the contract manager will perform the same functions as the Sponsor)

**Management / Oversight:**
- Data monitoring: Responsible to review quarterly APRs and bring any issues, including performance on goals to the Admin committee. The Admin Committee/ DHCD needs to review program-level APRs on a semi-annual basis
- Identify training needs
- Help coordinate and facilitate targeted training
- Communicate all changes to HMIS / reporting to projects
- Review reports from projects: APR, PIT, data quality, etc.
- Deliver a clean APR, AHAR, PIT to DHCD within 30 days after the end of the reporting period (project year)
- Enter project data into ESNAPS for Ex 2 of the annual application and the APR

**For Shelter Plus Care programs**
- The State Agency that provides the services is responsible for management and oversight of the projects

**Provider (program):** In many agencies, the data collection and entry are completed by the same person (i.e., case manager). Some programs (i.e., outreach) split these functions.

**Data Collection:**
- Assessment data gathering

**Data Entry:**
- Must be timely for all reports.
  - Ideally, data entry will be done daily; however, all client data must be entered into HMIS within one week of entry into a program
- Enter accurate, clean and complete data
- Complete all HUD universal data elements
- Assessments – intake, annual, exit
- Outcome Measures to be determined by the CoC as a whole
- Bed check-in / registry (bed management model)

**Data Quality / Reporting / User Support:** Program Manager, Supervisor or Site Administrator is responsible for reviewing data including:
- Site Administration (managing users)
- Data error reports
- Missing data reports
- Quarterly / annual performance reports
- Point-in-time
- When applicable: upload to ASIST
- Provide quality reports (APR, PIT, AHAR, e-HIC) to Sponsors on or before the specified deadline
- Ensures that the organization adheres to HUD’s Data and Technical Standards (2004 & March, 2010 attached)
**Training:**
HMIS training must be delivered in context of the program needs including the role of Sponsor agencies (i.e., DPH, DMH, the VA, etc.) which have specific program and data collection requirements. Training must be delivered in a manner that is flexible and allows for staff turnover, etc.

**Training Content:**
- An understanding of the training needs including the roles and responsibilities for data entry, management and reporting
- The mechanics of what questions mean and how to answer them; how to run reports; etc
- Customization of content – based on role of trainee
- Trainings will be designed to target different user groups, including line staff and managers

**Training Logistics:**
- Sponsors will receive Train-the-Trainer sessions from DHCD HMIS Coordinator to increase skills to support providers
- Sponsors provide relevant content, coordinate trainings, arrange space and invite providers
- Project staff who meet with clients to complete the HMIS forms and the data entry staff are trained together
- DHCD will provide relevant content on HMIS, reporting requirements and use of ASIST
Before Starting the Project Listings for the CoC Priority Listing

The FY 2019 CoC Consolidated Application requires TWO submissions. Both this Project Priority Listing AND the CoC Application MUST be submitted prior to the CoC Program Competition deadline as required by the FY 2019 CoC Program Competition NOFA.

The FY 2019 CoC Priority Listing includes the following:

- Reallocations forms – must be completed if the CoC is reallocating eligible renewal projects to create new projects as described in the FY 2019 CoC Program Competition NOFA.
- New Project Listing – lists all new project applications created through reallocation, the CoC Bonus, and DV Bonus that have been approved and ranked or rejected by the CoC.
- Renewal Project Listing – lists all eligible renewal project applications that have been approved and ranked or rejected by the CoC.
- UFA Costs Project Listing – applicable and only visible for Collaborative Applicants that were designated as a Unified Funding Agency (UFA) during the FY 2019 CoC Program Registration process. Only 1 UFA Costs project application is permitted and can only be submitted by the Collaborative Applicant.
- CoC Planning Project Listing – Only 1 CoC planning project is permitted per CoC and can only be submitted by the Collaborative Applicant.
- YHDP Project Listing – lists the eligible YHDP renewal project for the CoC that must be approved and ranked or rejected by the CoC.
- HUD-2991, Certification of Consistency with the Consolidated Plan – Collaborative Applicants must attach an accurately completed, signed, and dated HUD-2991.

Things to Remember:

- All new, renewal, and YHDP projects must be approved and ranked or rejected on the Project Listings.
- Collaborative Applicants are responsible for ensuring all project applications are accurately appearing on the Project Listings and there are no project applications missing from one or more Project Listings.
- If a project application(s) is rejected by the CoC, the Collaborative Applicant must notify the project applicant(s) no later than 15 days before the CoC Program Competition application deadline outside of e-snaps and include the reason for rejection.
- For each project application rejected by the CoC the Collaborative Applicant must select the reason for the rejection from the dropdown provided.
- If the Collaborative Applicant needs to amend a project application for any reason after ranking has been completed, the ranking of other projects will not be affected; however, the Collaborative Applicant MUST ensure the amended project is returned to the applicable Project Listing AND re-rank the project application BEFORE submitting the CoC Priority Listing to HUD in e-snaps.

Additional training resources are available online on the CoC Training page of the HUD Exchange at: https://www.hudexchange.info/resource/2916/project-priority-listing-coc-consolidated-application/
1A. Continuum of Care (CoC) Identification

Instructions:
Submit technical question to the HUD Exchange Ask A Question (AAQ) at https://www.hudexchange.info/program-support/my-question/.

Collaborative Applicant Name: Lynn Housing Authority & Neighborhood Development
2. Reallocation

Instructions:

2-1. Is the CoC reallocating funds from one or more eligible renewal grant(s) that will expire in calendar year 2020 into one or more new projects? No
Continuum of Care (CoC) New Project Listing

Instructions:
Prior to starting the New Project Listing, Collaborative Applicants should carefully review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, both of which are available at: https://www.hudexchange.info/resource/2916/project-priority-listing-coc-consolidated-application/

To upload all new project applications that have been submitted to this CoC Project Listing, click on the "Update List" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

EX1_Project_List_Status_field  List Updated Successfully

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<th>Applicant Name</th>
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<td>D10</td>
<td>DV Bonus</td>
<td>RRH</td>
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Continuum of Care (CoC) Renewal Project Listing

Instructions:
Prior to starting the New Project Listing, Collaborative Applicants should carefully review the “CoC Priority Listing Detailed Instructions” and the “CoC Project Listing Instructional Guide”, both of which are available at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources.

To upload all renewal project applications that have been submitted to this Renewal Project Listing, click on the “Update List” button. This process may take a few minutes based upon the number of renewal projects that need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the Renewal Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted and appear on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

The Collaborative Applicant certifies that
there is a demonstrated need for all renewal permanent supportive housing and rapid re-housing projects listed on the Renewal Project Listing.

The Collaborative Applicant does not have any renewal permanent supportive housing or rapid re-housing renewal projects.

EX1_Project_List_Status_field List Updated Successfully

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<th>Applicant Name</th>
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Continuum of Care (CoC) Planning Project Listing

**Instructions:**
Prior to starting the CoC Planning Project Listing, Collaborative Applicants should carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Project Listing Instructional Guide," both of which are available at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources.

To upload the CoC planning project application that has been submitted to this CoC Planning Project Listing, click on the "Update List" button. This process may take a few minutes as the project will need to be located in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review the CoC Planning Project Listing, click on the magnifying glass next to view the project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon.

Only one CoC Planning project application can be submitted by a Collaborative Applicant and must match the Collaborative Applicant information on the CoC Applicant Profile. Any additional CoC Planning project applications must be rejected.

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<th>Project Name</th>
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<td>CoC Planning Proj...</td>
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Continuum of Care (CoC) YHDP Renewal Project Listing

Instructions:

Prior to starting the New Project Listing, Collaborative Applicants should carefully review the CoC Priority Listing Detailed Instructions and CoC Priority Listing Navigational Guide, both of which are available at: https://www.hudexchange.info/resource/2916/project-priority-listing-coc-consolidated-application/

To upload all new project applications that have been submitted to this CoC Project Listing, click on the "Update List" button. This process may take a few minutes based upon the number of new projects submitted by project applicant(s) to your CoC in the e-snaps system. The Collaborative Applicant may update each of the Project Listings simultaneously. The Collaborative Applicant can wait for the Project Listings to be updated or can log out of e-snaps and come back later to view the updated list(s). To review a project on the New Project Listing, click on the magnifying glass next to each project to view project details. To view the actual project application, click on the orange folder. If there are errors identified by the Collaborative Applicant, the project can be amended back to the project applicant to make the necessary changes by clicking on the amend icon. The Collaborative Applicant has the sole responsibility for ensuring all amended projects are resubmitted, approved and ranked or rejected on this project listing BEFORE submitting the CoC Priority Listing in e-snaps.

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<th>Project Name</th>
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<th>Applicant Name</th>
<th>Budget Amount</th>
<th>Comp Type</th>
<th>Grant Term</th>
<th>Rank</th>
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This list contains no items
Funding Summary

Instructions
For additional information, carefully review the "CoC Priority Listing Detailed Instructions" and the "CoC Priority Listing Instructional Guide", both of which are available at: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources.

This page contains the total budget summaries for each of the project listings for which the Collaborative Applicant approved and ranked or rejected project applications. The Collaborative Applicant must review this page to ensure the totals for each of the categories is accurate. The "Total CoC Request" indicates the total funding request amount the Collaborative Applicant will submit to HUD for funding consideration. As stated previously, only 1 UFA Cost project application (for UFA designated Collaborative Applicants only) and only 1 CoC Planning project application can be submitted and only the Collaborative Applicant designated by the CoC is eligible to request these funds.

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<td>TOTAL CoC REQUEST</td>
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## Attachments

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<th>Document Description</th>
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<td>HUD 2991 Certification</td>
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Attachment Details

Document Description: HUD 2991 Certification of Consistency with the Consolidated Plan

Attachment Details

Document Description: FY2019 Rank from Project Listing

Attachment Details

Document Description: 

Attachment Details

Document Description: 
Submission Summary

WARNING: The FY2017 CoC Consolidated Application requires 2 submissions. Both this Project Priority Listing AND the CoC Consolidated Application MUST be submitted.

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<td>2. Reallocation</td>
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<td>09/27/2019</td>
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<td>5B. CoC Renewal Project Listing</td>
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<td>5D. CoC Planning Project Listing</td>
<td>09/27/2019</td>
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<td>5E. YHDP Renewal Project Listing</td>
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<td>Submission Summary</td>
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</tbody>
</table>
Certification of Consistency with the Consolidated Plan

I certify that the proposed activities/projects in the application are consistent with the jurisdiction’s current, approved Consolidated Plan.

(Type or clearly print the following information:)

Applicant Name: Lynn Housing Authority & Neighborhood Development

Project Name: Multiple Projects in Listed Attachment

Location of the Project: All projects are located in Lynn, MA 01901, 01902, 01903, 01904

Name of the Federal Program to which the applicant is applying: Continuum of Care FY2019

Name of Certifying Jurisdiction: City of Lynn

Certifying Official of the Jurisdiction Name: Thomas M. McGee

Title: Mayor

Signature: [Signature]

Date: 9-25-19
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<th>Address</th>
<th>Component</th>
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<td>RRH</td>
<td>$176,336</td>
</tr>
</tbody>
</table>

**Tier 1 Total** $1,741,146

**Tier 2 Total** $287,473

Planning, not scored, 10 Church Street $55,568