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**2007**  
**Continuum**  
**Of Care Strategy**

**Chesapeake Coalition**  
**for the Homeless**

**June 11, 2007**

# **2007 Continuum of Care Strategy**

**Chesapeake, Virginia**

*Submitted by  
Chesapeake Coalition for the Homeless  
June 11, 2007*

**Part I: CoC Organizational Structure**

<b>HUD-Defined CoC Name:*</b>	<b>CoC Number*</b>
Chesapeake CoC	VA-512
*HUD-defined CoC names and numbers are available at: <a href="http://www.hud.gov/offices/adm/grants/fundsavail.cfm">www.hud.gov/offices/adm/grants/fundsavail.cfm</a> . If you do not have a HUD-defined CoC name and number, enter the name of your CoC and HUD will assign you a number.	

**A: CoC Lead Organization Chart**

<b>CoC Lead Organization:</b> Chesapeake Coalition for the Homeless		
<b>CoC Contact Person:</b> Patrick Hughes		
<b>Contact Person's Organization Name:</b> Department of Neighborhood Services		
<b>Street Address:</b> 306 Cedar Road		
<b>City:</b> Chesapeake	<b>State:</b> Virginia	<b>Zip:</b> 23322
<b>Phone Number:</b> (757) 382-6018	<b>Fax Number:</b> (757) 382-8555	
<b>Email Address:</b> phughes@cityofchesapeake.net		

**B: CoC Geography Chart**

Geographic Area Name	6-digit Code
Chesapeake VA	510288

Geographic Area Name	6-digit Code

**CoC Structure and Decision-Making Processes**

**C: CoC Groups and Meetings Chart**

CoC Planning Groups		Meeting Frequency (check only one column)				Enter the number of organizations/entities that are members of each CoC planning group listed on this chart.
		At least once a year	At least once a quarter	At least once a month	At least once a week	
<b>CoC Primary Decision-Making Group</b> (list only one group)						
<b>Name:</b>	<b>General Operations Committee</b>	X				<b>6</b>
<b>Role:</b>	Assess current needs/issues, set meeting agendas, make recommendations to full group, develop annual budget and work plan for CCH approval.					
<b>Other CoC Committees, Sub-Committees, Workgroups, etc.</b>						
<b>Name:</b>	<b>Education Committee</b>		X			<b>5</b>
<b>Role:</b>	Develop and disseminate written and verbal information to the community and political leaders informing them of homeless issues in Chesapeake.					
<b>Name:</b>	<b>Ranking Committee</b>				X	<b>3</b>
<b>Role:</b>	Reads applications, Coalition strategies and priorities, and ranks applications according to the greatest need in the community					
<b>Name:</b>	<b>Discharge Planning Committee</b>			X		<b>6</b>
<b>Role:</b>	Develop policy/agreements with local hospital, correctional facilities, foster care agency and mental health facilities related to appropriate discharge of homeless clients.					
<b>Name:</b>	<b>Strategic Planning Committee</b>				X	<b>3</b>
<b>Role:</b>	Work with consultant to plan and implement strategic planning process.					
<b>Name:</b>	<b>Point-in-Time Committee</b>		X			<b>6</b>
<b>Role:</b>	Plan and develop surveys, interview forms and questionnaire as well as arrange providers to implement a 24-hour shelter and street count.					
<b>Name:</b>	<b>Regional Homeless Taskforce</b>	X				<b>3</b>
<b>Role:</b>	Coordinate and develop action surrounding regional homeless issues, including permanent supportive housing, identifying gaps in services and funding sources from city governments and local foundations.					
<b>Name:</b>	<b>Regional HMIS Taskforce</b>		X			<b>3</b>
<b>Role:</b>	Review HMIS data, discuss and train on upgrades and improvements to software, adapt forms and reports as needed.					

**D: CoC Planning Process Organizations Chart**

	<b>Specific Names of All CoC Organizations</b>	<b>Geographic Area Represented</b>	<b>Subpopulations Represented, if any* (no more than 2 per organization)</b>	
	<b>STATE GOVERNMENT AGENCIES</b>			
	Va. Employment Commission	CHESAPEAKE, VA		
	<b>LOCAL GOVERNMENT AGENCIES</b>			
	Office of Intergovernmental Affairs, Youth & Family Services	CHESAPEAKE, VA	Youth	
	Community Services Board	CHESAPEAKE, VA	SMI	SA
	Chesapeake Human Services Department	CHESAPEAKE, VA		
	Public Health Department	CHESAPEAKE, VA		
	Department of Neighborhood Services	CHESAPEAKE, VA		
	<b>PUBLIC HOUSING AGENCIES</b>			
ES	Chesapeake Redevelopment & Housing Authority	CHESAPEAKE, VA		
	<b>SCHOOL SYSTEMS / UNIVERSITIES</b>			
UP	Chesapeake Public Schools		Youth	
	<b>LAW ENFORCEMENT / CORRECTIONS</b>			
	Va. Department of Corrections	SO. HAMPTON ROADS, VA		
	Chesapeake Public Defender's Office	CHESAPEAKE, VA		
	Sheriff's Department	CHESAPEAKE, VA		
	<b>LOCAL WORKFORCE INVESTMENT ACT (WIA) BOARDS</b>			
	<b>OTHER</b>			
	Veterans Administration Medical Center	HAMPTON ROADS, VA	VET	
	<b>NON-PROFIT ORGANIZATIONS</b>			
	Our House Families	CHESAPEAKE, VA		
	Portsmouth Area Resources Coalition	CHESAPEAKE/PORTSMOUTH		
	The Salvation Army	SO. HAMPTON ROADS, VA		
	NEST	SO. HAMPTON ROADS, VA		
ES	The Planning Council	SO. HAMPTON ROADS, VA		
	The STOP Organization	SO. HAMPTON ROADS, VA		
	Independence Center, Inc.	SO. HAMPTON ROADS, VA		
BP	Foodbank of Southeastern Va	SO. HAMPTON ROADS, VA		
	Help and Emergency Response	PORTSMOUTH/CHESAPEAKE		
	Tidewater AIDS Crisis Taskforce	HAMPTON ROADS, VA	HIV/AIDS	
	CHIP/Healthy Families	CHESAPEAKE, VA	Youth	
	<b>FAITH-BASED ORGANIZATIONS</b>			

Restoration Outreach Ministry	CHESAPEAKE, VA		
Calvary Revival Church	CHESAPEAKE, VA		
Deep Creek Baptist Church	CHESAPEAKE, VA		
Harvest Assembly of God/House of Blessing	CHESAPEAKE, VA		
New Discipleship Church	CHESAPEAKE, VA		
Providence Road Church	CHESAPEAKE, VA		
Prince of Peace Church	CHESAPEAKE, VA		
<b>FUNDERS / ADVOCACY GROUPS</b>			
<b>BUSINESSES (BANKS, DEVELOPERS, BUSINESS ASSOCIATIONS, ETC.)</b>			
<b>HOSPITALS / MEDICAL REPRESENTATIVES</b>			
CHESAPEAKE GENERAL HOSPITAL	CHESAPEAKE, VA		
<b>HOMELESS / FORMERLY HOMELESS PERSONS</b>			
S. Norris	CHESAPEAKE, VA		
M. Williams	CHESAPEAKE, VA		
<b>OTHER</b>			
City Councilmember Cliff Hayes	CHESAPEAKE, VA		

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

**E: CoC Governing Structure Chart**

<p>1. Is the CoC’s primary decision-making body a legally recognized organization (check one)?</p> <p> <input type="checkbox"/> Yes, a 501(c)(3)  <input type="checkbox"/> Yes, a 501(c)(4)  <input type="checkbox"/> Yes, other– specify: _____  <input checked="" type="checkbox"/> No, not legally recognized         </p>	
<p>2. If your CoC were provided with additional administrative funds from HUD, would the primary decision-making body, or an agent designated by it (e.g. a city or non-profit organization), be able to be responsible for activities such as applying for HUD funding and serving as the grantee, providing project oversight, and monitoring? Explain.</p> <p>If these administrative funds were to become available, an agent would be designated to coordinate and support all CCH activities, including writing of the CoC Statement, coordinating CCH participation in all regional events, as well as initiating and monitoring new processes to improve homeless services in Chesapeake.</p>	
<p>3. What percentage of the decision-making body membership represents the private sector, including non-profit providers, homeless or formerly homeless persons, advocates and consumer interests, etc.?</p>	<p>67%</p>
<p>4a. Indicate how the <b>members</b> of the primary decision-making body are selected (check all that apply):</p> <p> <input type="checkbox"/> Elected                      <input checked="" type="checkbox"/> Assigned/Volunteer  <input type="checkbox"/> Appointed                      <input type="checkbox"/> Other– specify: _____         </p>	
<p>4b. Briefly explain the selection process. (For example, if 5 members are appointed and 6 are elected, explain why this process was established and describe how it works.)</p> <p>Individual members and agencies are welcome to join the CCH at any time at no cost. The Bylaws of the CCH dictate that: “members (organizational and individual) will complete a membership application, which will be shared with other members of the Coalition. Any Coalition member may resign by giving written notice to the Chair of the Coalition. Any organizational or individual member may be removed from the Coalition for good cause by a vote of two-thirds of the members present at a meeting where there is a quorum. Good cause shall include, but is not limited to, willful misconduct, malfeasance, and unexcused absences during a twelve month period. The Coalition shall strive to attain and maintain a 70% to 30% ratio of organizational to individual members, including but not limited to individuals currently or formerly of the homeless community.”</p>	
<p>5. Indicate how the <b>leaders</b> of the primary decision-making body are selected (check all that apply):</p> <p> <input checked="" type="checkbox"/> Elected                      <input checked="" type="checkbox"/> Assigned/Volunteer  <input type="checkbox"/> Appointed                      <input type="checkbox"/> Other– specify: _____         </p>	

**F: CoC Project Review and Selection Chart**

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

**G: CoC Written Complaints Chart**

<b>Were there any written complaints received by the CoC regarding any CoC matter in the last 12 months?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>If Yes, briefly describe the complaints and how they were resolved.</b>	

**Part II: CoC Housing and Service Needs**

**H: CoC Services Inventory Chart**

(1)  Provider Organizations	(2) Prevention				(3) Outreach			(4) Supportive Services										
	A	R	U	C	L	S	N	I	C	I	Alc	Me	H	F	E	E	C	T
Calvary Revival Church				X		X												
Chesapeake Redevelopment and Housing Authority				X														
Chesapeake Division of Social Services		X	X	X				X	X				X		X	X	X	X
Chesapeake Office of Intergovernmental Affairs, Youth & Family Services				X														
Chesapeake Public Schools				X											X			
CHIP/Healthy Families					X	X							X				X	X
Community Services Board				X	X			X	X	X	X	X	X	X				X
Dwelling Place				X				X	X		X				X	X	X	X
Empowerment Hampton Roads				X														
Independence Center, Inc.									X						X			
Foodbank of Southeastern Virginia				X					X									
ForKids, Inc.		X	X	X				X	X	X	X	X	X	X	X	X	X	X
Hampton Roads Planning District Commission				X														
Harvest Assembly Church / House of Blessing	X	X	X															
Help and Emergency Response, Inc.		X	X	X	X			X	X		X			X	X	X	X	X
Norfolk Emergency Shelter Team				X					X									X
Our House Families (formerly CRN)	X	X	X	X				X	X					X			X	X
Portsmouth Area Resources Coalition	X	X	X	X				X	X					X	X	X	X	X
Restoration Outreach Ministries		X						X	X							X		X
Samaritan House	X			X				X	X					X				
Tidewater AIDS Community Taskforce	X	X	X	X		X		X	X	X			X		X			X
The Planning Council	X	X	X	X				X	X									
The Salvation Army	X	X	X					X	X	X	X		X	X	X	X	X	X
The STOP Organization	X	X	X	X				X	X					X	X	X		
United Way of South Hampton Roads				X														
Veterans Affairs Medical Center										X	X	X	X					X
Victory Home								X	X	X			X		X			X
Virginia Department of Corrections																		X
Virginia Employment Commission															X			
Virginia Supportive Housing								X	X							X		X

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## **CoC Housing Inventory and Unmet Needs**

### **I: CoC Housing Inventory Charts**

This section includes three housing inventory charts —for emergency shelter, transitional housing, and permanent housing. Note that the information in these charts should reflect a point -in-time count. For the Permanent Housing Inventory Chart, the beds listed under “new inventory” should indicate beds that became available for occupancy for the first time between February 1, 2006 and January 31, 2007. For complete instructions in filling out this section, see the Instructions section at the beginning of the application.

## I: CoC Housing Inventory Charts

Emergency Shelter: Fundamental Components in CoC System – Housing Inventory Chart													
Provider Name	Facility Name* *Place an asterisk after the facility name if it receives HUD McKinney-Vento dollars.	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds	Other Beds	
						A	B	Fam. Units	Fam. Beds	Indiv. Beds		Seasonal	O/V*
<b>Current Inventory (Available for Occupancy on or before Jan. 31, 2006)</b>			Ind.	Fam.									
Our House Families (formerly CRN)	Our House	PA	N/A	10	510288	FC		3	10	N/A	10	N/A	N/A
<b>SUBTOTALS:</b>					<b>SUBTOTAL CURRENT INVENTORY:</b>			3	10	N/A	10	N/A	N/A
<b>New Inventory in Place in 2006 (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)</b>			Ind.	Fam.									
N/A			N/A	N/A	510288			N/A	N/A	N/A	N/A	N/A	N/A
<b>SUBTOTALS:</b>					<b>SUBTOTAL NEW INVENTORY:</b>								
<b>Inventory Under Development (Available for Occupancy after January 31, 2007)</b>			Anticipated Occupancy Date										
N/A					510288			N/A	N/A	N/A	N/A	N/A	N/A
<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>													
<b>Unmet Need</b>								<b>UNMET NEED TOTALS:</b>					
								14	8	47	69	0	0
<b>Total Year-Round Beds—Individuals</b>					<b>Total Year-Round Beds—Families</b>								
1. Total Year-Round Individual Emergency Shelter (ES) Beds:			0	6. Total Year-Round Family Emergency Shelter (ES) Beds:						10			
2. Number of DV Year-Round Individual ES Beds:			0	7. Number of DV Year-Round Family ES Beds:						0			
3. Subtotal, non-DV Year-Round Individual ES Beds (Line 1 minus Line 2):			0	8. Subtotal, non-DV Year-Round Family ES Beds (Line 6 minus Line 7):						10			
4. Total Year-Round Individual ES Beds in HMIS:			0	9. Total Year-Round Family ES Beds in HMIS						10			
5. HMIS Coverage—Individual ES Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):			0	10. HMIS Coverage—Family ES Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):						100%			

\*In the column labeled "O/V," enter the number of Overflow and Voucher Beds

**I: CoC Housing Inventory Charts**

<b>Transitional Housing: Fundamental Components in CoC System – Housing Inventory Chart</b>													
Provider Name	Facility Name* *Place an asterisk after the facility name if it receives HUD McKinney-Vento dollars.	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds		
						A	B	Fam. Units	Fam. Beds	Indiv. Beds			
<b>Current Inventory (Available for Occupancy on or before January 31, 2006)</b>			Ind.	Fam.									
Our House Families (formerly CRN)	Reaching Up (RUP 1 and 2)*	PA	N/A	22	510288	FC		6	22	N/A	22		
<b>SUBTOTALS:</b>					<b>SUBTOTAL CURRENT INVENTORY:</b>			6	22	N/A	22		
<b>New Inventory in Place in 2006 (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)</b>			Ind.	Fam.									
N/A			N/A	N/A	510288			N/A	N/A	N/A	N/A		
<b>SUBTOTALS:</b>					<b>SUBTOTAL NEW INVENTORY:</b>								
<b>Inventory Under Development (Available for Occupancy after January 31, 2007)</b>			Anticipated Occupancy Date										
Salvation Army	Hope Village*		January 2008		511116	SF		N/A	N/A	4	4		
<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>								0	0	4	4		
<b>Unmet Need</b>								<b>UNMET NEED TOTALS:</b>		6	1	11	18
<b>Total Year-Round Beds—Individuals</b>				<b>Total Year-Round Beds—Families</b>									
1. Total Year-Round Individual Transitional Housing Beds:			4	6. Total Year-Round Family Transitional Housing Beds:			22						
2. Number of DV Year-Round Individual TH Beds:			0	7. Number of DV Year-Round Family TH Beds:			0						
3. Subtotal, non-DV Year-Round Individual TH Beds (Line 1 minus Line 2):			4	8. Subtotal, non-DV Year-Round Family TH Beds (Line 6 minus Line 7):			22						
4. Total Year-Round Individual TH Beds in HMIS:			0	9. Total Year-Round Family TH Beds in HMIS:			22						
5. HMIS Coverage—Individual TH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):			0%	10. HMIS Coverage—Family TH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):			100%						

**I: CoC Housing Inventory Charts**

<b>Permanent Supportive Housing*: Fundamental Components in CoC System – Housing Inventory Chart</b>												
Provider Name	Facility Name <small>*Place an asterisk after the facility name if it receives HUD McKinney-Vento dollars.</small>	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop.		Year-Round			Total Year-Round Beds	
						A	B	Fam. Units	Fam. Beds	Indiv./CH Beds		
<b>Current Inventory (Available for Occupancy on or before January 31, 2006)</b>			Ind.	Fam.								
Chesapeake Community Services Board	Shelter Plus Care*	PA	5	N/A	510288	SMF		N/A	N/A	5/5	5	
<b>SUBTOTALS:</b>					<b>SUBTOTAL CURRENT INVENTORY:</b>					5/5	5	
<b>New Inventory in Place in 2006 (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)</b>			Ind.	Fam.								
N/A			N/A	N/A	510288			N/A	N/A	N/A	N/A	
<b>SUBTOTALS:</b>					<b>SUBTOTAL NEW INVENTORY:</b>							
<b>Inventory Under Development (Available for Occupancy after January 31, 2007)</b>			Anticipated Occupancy Date									
Virginia Supportive Housing	Cloverleaf Apartments* (SRO)	D	January 2009		511590	SMF		N/A	N/A	4	4	
<b>SUBTOTAL INVENTORY UNDER DEVELOPMENT:</b>								0	0	4	4	
<b>Unmet Need</b>						<b>UNMET NEED TOTALS:</b>			12	12	6	30
<b>Total Year-Round Beds—Individuals</b>				<b>Total Year-Round Beds—Families</b>								
1. Total Year-Round Individual Permanent Housing Beds:		5		6. Total Year-Round Family Permanent Housing Beds:		0						
2. Number of DV Year-Round Individual PH Beds:		0		7. Number of DV Year-Round Family PH Beds:		0						
3. Subtotal, non-DV Year-Round Individual PH Beds (Line 1 minus Line 2):		5		8. Subtotal, non-DV Year-Round Family PH Beds (Line 6 minus Line 7):		0						
4. Total Year-Round Individual PH Beds in HMIS:		5		9. Total Year-Round Family PH Beds in HMIS:		0						
5. HMIS Coverage—Individual PH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):		100%		10. HMIS Coverage—Family PH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):		0						

**NB: While there are 5 persons currently in the SPC program, the number will be reduced to 4 as per agreement with HUD/Richmond, VA.**

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

Complete the following charts based on data collection methods and reporting for the Housing Inventory Chart, including Unmet Need determination. The survey must be for a 24-hour point-in-time (PIT) count during the last week of January 2007.

<b>(1) Indicate date on which Housing Inventory count was completed: 1/25/2007</b>	
<b>(2) Identify the method used to complete the Housing Inventory Chart (check one):</b>	
<input checked="" type="checkbox"/>	<b>Housing inventory survey</b> – CoC conducted a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site) of homeless programs/providers to update current bed inventories, target populations for programs, beds under development, etc.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS data to complete the Housing Inventory Chart
<input type="checkbox"/>	<b>HMIS plus housing inventory</b> – Used HMIS data supplemented by a survey of providers NOT participating in the HMIS
<b>(3) Indicate the percentage of providers completing the housing inventory survey:</b>	
100%	Emergency shelter providers
100%	Transitional housing providers
100%	Permanent supportive housing providers
<b>(4) Indicate steps to ensure data accuracy for 2007 Housing Inventory Chart (check all that apply):</b>	
<input type="checkbox"/>	<b>Instructions</b> – Provided written instructions for completing the housing inventory survey.
<input type="checkbox"/>	<b>Training</b> – Trained providers on completing the housing inventory survey.
<input type="checkbox"/>	<b>Updated prior housing inventory information</b> – Providers submitted updated 2006 housing inventory to reflect 2007 inventory.
<input checked="" type="checkbox"/>	<b>Follow-up</b> – CoC followed-up with providers to ensure the maximum possible response rate and accuracy of the housing inventory survey.
<input checked="" type="checkbox"/>	<b>Confirmation</b> – Providers or other independent entity reviewed and confirmed information in 2007 Housing Inventory Chart after it was completed.
<input checked="" type="checkbox"/>	<b>HMIS</b> – Compared HMIS and housing inventory survey data to check for consistency.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>Unmet Need:</b>	
<b>(5) Indicate type of data that was used to determine unmet need (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Sheltered count</b> (point-in-time)
<input checked="" type="checkbox"/>	<b>Unsheltered count</b> (point-in-time)
<input checked="" type="checkbox"/>	<b>Housing inventory</b> (number of beds available)
<input type="checkbox"/>	<b>Local studies or data sources</b> – specify:
<input type="checkbox"/>	<b>National studies or data sources</b> – specify:
<input checked="" type="checkbox"/>	<b>Provider opinion through discussions or survey forms</b>
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(6a) Indicate the method(s) used to calculate or determine unmet need (check all that apply):</b>	
<input type="checkbox"/>	<b>Stakeholder discussion</b> – CoC stakeholders met and reviewed data to determine CoC's unmet need
<input type="checkbox"/>	<b>Locally-determined formula</b> – Used locally-determined formula based on local point-in-time (PIT) count data and housing inventory to calculate unmet need
<input type="checkbox"/>	<b>Applied statistics</b> – Used local PIT enumeration data and applied national or other local statistics
<input checked="" type="checkbox"/>	<b>HUD unmet need formula</b> – Used HUD's unmet need formula*
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(6b) If more than one method was used in 6a, please describe how these methods were used.</b>	

\*The HUD Unmet Need Guide and Worksheet can be found by going to:  
<http://www.hud.gov/offices/adm/grants/fundsavail.cfm>

## CoC Homeless Population and Subpopulations

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

Indicate date of last point-in-time count: <span style="float: right;">1/24-25/2007 (24-hr period)</span>				
<b>Part 1: Homeless Population</b>	<b>Sheltered</b>		<b>Unsheltered</b>	<b>Total</b>
	<b>Emergency</b>	<b>Transitional</b>		
1. Number of Households <u>with</u> Dependent Children:	3	5	14	22
1a. Total Number of Persons in these Households (adults and children)	16	22	14	52
2. Number of Households <u>without</u> Dependent Children**				0
2a. Total Number of Persons in these Households	25	23	29	77
<b>Total Persons (Add Lines 1a and 2a):</b>	41	45	43	129
<b>Part 2: Homeless Subpopulations (Adults only, except g. below)</b>	<b>Sheltered</b>		<b>Unsheltered</b>	<b>Total</b>
a. Chronically Homeless	0		2	2
b. Severely Mentally Ill	3		4	7
c. Chronic Substance Abuse	2		1	3
d. Veterans	0		4	4
e. Persons with HIV/AIDS	0		0	0
f. Victims of Domestic Violence	2		5	7
g. Unaccompanied Youth (Under 18)	0		0	0

\*Optional for unsheltered homeless subpopulations

\*\* Includes single individuals, unaccompanied youth, and other adults (such as a married couple without children)

\*\*\*For "sheltered" chronically homeless subpopulations, list persons in emergency shelter only.

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

Complete the following charts based on the most recent point -in-time (PIT) count conducted.

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

<b>(1a) Check method(s) used to count sheltered homeless persons in the CoC (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Survey</b> – Providers count the total number of clients residing in their programs during the PIT count.
<input type="checkbox"/>	<b>HMIS</b> – CoC used HMIS to complete the PIT sheltered count and subpopulation information.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(1b) If multiple methods are checked, briefly describe how data collected using the methods were combined to produce the count.</b>	
<b>(2a) Check the method(s) used to gather the subpopulation information on sheltered homeless persons reported in Part 2: Homeless Subpopulations (check all that apply):</b>	
<input type="checkbox"/>	<b>Point-in-time (PIT) interviews with each adult and unaccompanied youth</b> – All sheltered adults and unaccompanied youth were interviewed to gather subpopulation information.
<input type="checkbox"/>	<b>Sample of PIT interviews plus extrapolation</b> – A sample of sheltered adults and unaccompanied youth were interviewed to gather subpopulation information, and extrapolation techniques were applied to produce the total sheltered homeless population.
<input checked="" type="checkbox"/>	<b>Non-HMIS client-level information</b> - Providers used individual client records (e.g., case management files) to provide subpopulation data for each adult and unaccompanied youth.
<input type="checkbox"/>	<b>Provider expertise</b> – Providers estimated the percentage of clients belonging to each subpopulation based on their knowledge of their client population as a whole.
<input type="checkbox"/>	<b>HMIS</b> – CoC used HMIS to gather subpopulation information on sheltered homeless persons.
<input type="checkbox"/>	<b>Other</b> –specify:
<b>(2b) If multiple methods are checked, briefly describe how the methods were combined to produce the subpopulation information.</b>	
<b>(3) Indicate CoC’s steps to ensure data quality of the sheltered count (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Instructions</b> – Provided written instructions to providers for completing the sheltered PIT count.
<input checked="" type="checkbox"/>	<b>Training</b> – Trained providers on completing the sheltered PIT count.
<input checked="" type="checkbox"/>	<b>Remind and Follow-up</b> – Reminded providers about the count and followed up with providers to ensure the maximum possible response rate and accuracy.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS to verify data collected from providers for the sheltered PIT count.
<input type="checkbox"/>	<b>Other</b> –specify:
<b>(4) How often will sheltered counts of sheltered homeless people take place in the future?</b>	
<input type="checkbox"/>	<b>Biennial (every two years)</b>
<input type="checkbox"/>	<b>Annual</b>
<input checked="" type="checkbox"/>	<b>Semi-annual</b>
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(5) Month and Year when next count of sheltered homeless persons will occur: 8/2007</b>	
<b>(6) Indicate the percentage of providers providing populations and subpopulations data collected via survey, interview and/or HMIS:</b>	
<b>100%</b>	Emergency shelter providers
<b>100%</b>	Transitional housing providers

\*Please refer to ‘A Guide to Counting Sheltered Homeless People’ for more information on unsheltered enumeration techniques.

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

<b>(1) Check the CoC's method(s) used to count unsheltered homeless persons (check all that apply):</b>	
<input type="checkbox"/>	<b>Public places count</b> – CoC conducted a point-in-time (PIT) count <u>without</u> client interviews.
<input checked="" type="checkbox"/>	<b>Public places count with interviews</b> – CoC conducted a PIT count and interviewed unsheltered homeless persons encountered during the public places count: <input type="checkbox"/> ALL persons were interviewed <b>OR</b> <input checked="" type="checkbox"/> Sample of persons were interviewed
<input type="checkbox"/>	<b>Public places count using probability sampling</b> – High and low probabilities assigned to designated geographic areas based on the number of homeless people expected to be found in each area. The CoC selected a statistically valid sample of each type of area to include in the point-in-time count and extrapolated results to estimate the entire homeless population.
<input checked="" type="checkbox"/>	<b>Service-based count</b> – Interviewed people using non-shelter services, such as soup kitchens and drop-in centers, and counted those that self-identified as unsheltered homeless persons.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS for the count of unsheltered homeless people or for subpopulation information.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(2) Indicate the level of coverage of the PIT count of unsheltered homeless people:</b>	
<input type="checkbox"/>	<b>Complete coverage</b> – The CoC counted every block of the jurisdiction.
<input checked="" type="checkbox"/>	<b>Known locations</b> – The CoC counted in areas where unsheltered homeless people are known to congregate or live.
<input type="checkbox"/>	<b>Combination</b> – CoC combined complete coverage with known locations by conducting counts for every block in a portion of the jurisdiction (e.g. central city) AND conducting counts in other portions of the jurisdiction where unsheltered persons are known to live.
<input type="checkbox"/>	<b>Used service-based or probability sampling</b> (coverage is not applicable)
<input type="checkbox"/>	<b>Other</b> –specify:
<b>(3) Indicate community partners involved in PIT unsheltered count (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Outreach teams</b>
<input checked="" type="checkbox"/>	<b>Law Enforcement</b>
<input checked="" type="checkbox"/>	<b>Service Providers</b>
<input checked="" type="checkbox"/>	<b>Community volunteers</b>
<input type="checkbox"/>	<b>Homeless and/or formerly homeless persons</b>
<input checked="" type="checkbox"/>	<b>Other</b> – specify: Faith-based organizations; city government
<b>(4) Indicate CoC's steps to ensure data quality of the unsheltered count (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Training</b> – Conducted training(s) for PIT enumerators.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS to check for duplicate information.
<input checked="" type="checkbox"/>	<b>Other</b> – specify: a unique identifier is assigned to each client
<b>(5) How often will CoC conduct PIT counts of unsheltered homeless people in the future?</b>	
<input type="checkbox"/>	<b>Biennial (every two years)</b>
<input type="checkbox"/>	<b>Annual</b>
<input checked="" type="checkbox"/>	<b>Semi-annual</b>
<input type="checkbox"/>	<b>Quarterly</b>
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(6) Month and Year when next PIT count of unsheltered homeless persons will occur: 8/2007</b>	
*Please refer to 'A Guide to Counting Unsheltered Homeless People' for more information on unsheltered enumeration techniques.	

## CoC Homeless Management Information System (HMIS)

### M: CoC HMIS Charts

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

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

Organization Name: Portsmouth Area Resource Coalition	Contact Person: Perry Mayer
Phone: 757-393-7848	Email: admin@parc.hrcoxmail.com
Organization Type: State/local government <input type="checkbox"/> Non-profit/homeless provider <input checked="" type="checkbox"/> Other <input type="checkbox"/>	

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

HUD-Defined CoC Name*	CoC #	HUD-Defined CoC Name*	CoC #
Chesapeake CoC	VA-512	Portsmouth CoC	VA-507

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

#### M-3: HMIS Implementation Status

HMIS Data Entry Start Date for your CoC Anticipated Date Entry Start Date for your CoC (mm/yyyy)	<b>If no data entry date, indicate reason:</b> <input type="checkbox"/> New CoC in 2007 <input type="checkbox"/> Still in planning/software selection process <input type="checkbox"/> Initial implementation
<b>January 2006</b>	

Briefly describe significant challenges/barriers the CoC has experienced in:

1. HMIS implementation:
2. HMIS Data and Technical Standards Final Notice requirements: HMIS system is managed by a homeless provider agency in a neighboring city; therefore, training and data quality review requires extra coordination and is sometimes hampered by time constraints of staff at user and managing agencies.

#### M-4: CoC Client Records

Calendar Year	Number of Client Records Entered in HMIS / Analytical Database (Duplicated) for CoC	Number of Unduplicated Clients Entered in HMIS / Analytical Database for CoC
2004	N/A	N/A
2005	N/A	N/A
2006	128	110

Please provide a brief explanation of the reason(s) for any decreases in the number of records (duplicated or unduplicated) from year to year.

#### M-5: Data Collection/Completeness and Coverage

(a) Indicate the percentage of unduplicated client records with null or missing values on the date that the point-in-time count was conducted.

Universal Data Element	% Null/Missing Values	Universal Data Element	% Null/Missing Values
Name	0.0%	Gender	2.5%
Social Security Number	29.9%	Veteran Status	56.4%
Date of Birth	0.8%	Disabling Condition	98.2%
Ethnicity	60.6%	Residence Prior to Program Entry	44.4%
Race	25.6%	Zip Code of Last Permanent Address	94.0%

Briefly describe how the CoC ensures that valid program entry and exit dates are being recorded in the HMIS for persons served.

The HMIS Systems Administrator is in regular contact with the HMIS users to ensure data and utilization of the database is reviewed and coordinates trainings if necessary.

(b) Indicate current OR anticipated HMIS bed coverage of 75% for each housing type.

	75% bed coverage	Anticipate 75% bed coverage	Date anticipate achieving
*Emergency Shelter	Y		
Transitional Housing	Y		
Permanent Supportive Housing	Y		
<b>(c) If CoC has not yet achieved or does not anticipate achieving 75% bed coverage for all beds (including DV beds), please explain why.</b>			

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

For each item listed below, place an “X” in the appropriate box to indicate your response: Yes (Y), No (N) or Planned/In Progress (P). Check *only one column* per item.

	Y	N	P
<b>1. Training Provided:</b>			
Basic computer training	X		
HMIS software training	X		
Privacy / Ethics training	X		
Security Training	X		
System Administrator training	X		
<b>2. CoC Process/Role:</b>			
Is the CoC able to aggregate all data to a central location at least annually?	X		
Does the CoC monitor compliance with HMIS Data & Technical Standards Final Notice?	X		
<b>3. Security—Participating agencies have:</b>			
Unique username and password access?	X		
Secure location?	X		
Locking screen savers?			X
Virus protection with auto update?	X		
Individual or network firewalls?			X
Restrictions on access to HMIS via public forums (e.g. PKI digital certificates or IP filtering)?			X
<b>4. Security—Agency responsible for centralized HMIS data collection and storage has:</b>			
Procedures for offsite storage of HMIS data?	X		
Disaster recovery plan that has been tested?	X		
<b>5. Privacy Requirements:</b>			
If your state has additional confidentiality provisions, have they been implemented? X Check here if there are no additional state confidentiality provisions.			
Is there a “Purpose for data collection” sign at each intake desk for all participating agencies?	X		
Has each participating agency adopted a written privacy policy, including the uses and disclosures of client information?	X		
Does each participating agency have a privacy policy posted on its website (if applicable)?	X		
<b>6. Data Quality—CoC has process to review and improve:</b>			
Client level data quality (i.e. missing birth dates etc.)?	X		
Program level data quality (i.e. data not entered by agency in over 14 days)?	X		
CoC bed coverage (i.e. percent of beds)?	X		
<b>7. Unduplication of Client Records—the CoC:</b>			
Uses only HMIS data to generate unduplicated count?	X		
Uses data integration or data warehouse to generate unduplicated count?		X	
<b>8. OPTIONAL: Uses of HMIS Data—CoC uses HMIS data for:</b>			
Point-in-Time Count			X
Project/Program performance monitoring			X
Program purposes (e.g. case management, bed management, program eligibility screening)		X	
Statewide data aggregation (e.g. data warehouse)		X	

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### **Part III: CoC Strategic Planning**

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

Please provide local action steps and measurable achievements for attaining each of the five national HUD objectives listed, as part of the goal to end chronic homelessness and help to move families and individuals to permanent housing. The percentages listed in these national objectives are the national averages. Your CoC should aim for these targets as a minimum. HUD expects all CoCs to be meeting or exceeding these standards, as these standards will be modestly increasing over time. This is to ensure that CoCs continue to work to serve the hardest-to-serve homeless populations.

If your CoC will not be able to meet one or more objectives, please describe barriers in the space provided. You may list additional CoC objectives as needed. Please note that your Continuum will be reporting on your achievements with respect to each of these objectives in the 2008 application.

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

<b>Objectives to End Chronic Homelessness and Move Families and Individuals to Permanent Housing</b>	<b>2007 Local Action Steps</b>  <b>How are you going to do it? List action steps to be completed within the next 12 months.</b>	<b>Lead Person</b>  <b>List name and title or organization of one person responsible for accomplishing each action step.</b>	<b>Lead Person</b>  <b>Baseline</b>	<b>in</b>  <b>Number</b>  <b>Actual</b>	<b>Number</b>  <b>Actual</b>	<b>Number</b>  <b>Actual</b>
1. Create new PH beds for chronically homeless persons.	Apply for Samaritan Initiative to fund new project on PSH for chronic, mentally ill homeless individuals (3 beds) .	Regina Coda, Restoration Outreach Ministry	Beds 5	Beds 8	Beds 10	Beds 20
	Secure Section 8 vouchers to be used in new SRO 2 Project to open January 2009 (4 beds) that will house homeless individuals.	Alice Tousignant, Virginia Supportive Housing				
2. Increase percentage of homeless persons staying in PH over 6 months to at least 71%.	CoC agencies will provide coordinated case management to ensure that chronic homeless individuals move into PH remain there at least 6 months.	Regina Coda, Restoration Outreach Ministry	71%	75%	75%	75%
	Marketing of affordable housing database to increase landlord participation. Affordable housing database is available for use by entire Continuum of Care	Julie Dixon, The Planning Council				
3. Increase percentage of homeless persons moving from TH to PH to at least 61.5%.	CoC shelter providers will continue to cooperate to refer and manage client families' transition into PH.	Ruthie Hill, Our House Families	65%	75%	80%	85%
4. Increase percentage of homeless persons employed at exit to at least 18%.	Through life skills and financial / budget management trainings within the homeless family service programs, develop service plan goals and assist clients in obtaining employment.	Ruthie Hill, Our House Families	45%	60%	75%	80%

5. Ensure that the CoC has a functional HMIS system.	Provide training and support for current and new users of HMIS within Continuum.	Perry Mayer, PARC	65% Bed Cover- age	80% Bed Cover- age	95% Bed Cover- age	100% Bed Cover- age
	Seek potential users that are non-CoC funded.					
	Review data quality through regular committee meetings.					
<b>Barriers: If your CoC will not meet one or more of the above objectives, briefly describe why not (use less than two paragraphs).</b>						
<b>Other CoC Objectives in 2007</b>						
1. Plan and execute a Project Homeless Connect to link homeless families to services.	Collaborate with United Way and other homeless assistance providers to carry out this one-day event.	Ruthie Hill, Our House Families				
2. Execute recommendations from 10-Year Plan to End Homelessness	Discuss gaps and identify realistic action steps with CCH, government representatives and local funders.	Ruthie Hill, Our House Families				
	Seek funding sources and providers to implement goals set by CCH.	Ruthie Hill, Our House Families				
3. Coordinate regional action steps in progress by the Regional Homeless Taskforce	<ul style="list-style-type: none"> <li>▪ Finalize the discharge planning policies from regional public institutions</li> <li>▪ Seek site and funding for the Healing Place</li> <li>▪ Continue development of SRO 2, 3 and beyond in various cities of South Hampton Roads</li> <li>▪ Plan and execute a regional homeless conference</li> <li>▪ Develop regional plan for ex-offender re-entry services and housing</li> </ul>	Edwina Ricks, City of Chesapeake Office of Intergovernmental Affairs, Youth & Family Services				

**O: CoC Discharge Planning Policy Chart**

For each category of publicly funded institution or system of care in your CoC, check a box to indicate the level of development of a discharge planning policy. Check **only one** box per category. Use the space provided to describe the discharge planning policy for each category, or the status of development. For detailed instructions for filling out this section, see the Instructions section.

Publicly Funded Institution(s) or System(s) of Care in CoC Geographic Area	None	Initial Discussion	Protocol in Development	Formal Protocol Finalized	Formal Protocol Implemented
<b>Foster Care</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Health Care</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Mental Health</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Corrections</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Foster Care:**

The Department of Social Services is a member of the Chesapeake Coalition for the Homeless (CCH) and is the public agency in the city that acts as custodian for children and youth in foster care. Youth are able to remain in the foster care program if they are registered in certain higher education programs until the age of 21. Upon discharge from the program, DSS works with clients to find suitable housing and not refer to HUD McKinney-Vento programs although recidivism into homelessness from foster care is statistically high nationwide. On a quarterly basis, CCH sends updated information to the Independent Living Coordinator for HUD-funded and other housing resources and, where applicable, referral information.

**Health Care:**

The Veteran’s Affairs hospital has a homeless outreach coordinator and provides services to homeless vets. It is the only publicly funded hospital for Chesapeake’s homeless vets but does not yet have a discharge planning policy in place.

Chesapeake General Hospital, while not publicly funded, is the main provider of in-hospital care in the city of Chesapeake. The discharge planners work closely with the nursing staff and patients to ensure that the city Resource Sheet is provided to all persons leaving the hospital with unidentified housing.

Mental Health:

**State psychiatric facilities**

The local agency in Chesapeake CoC that provides discharge planning for persons discharged from publicly funded institutions is the Chesapeake Community Services Board (CSB). The agency is an active member of the CCH.

The discharge policies of the Commonwealth of Virginia provide for both local case managers and state facilities staff to begin discharge planning when an individual is admitted to a state facility. A designated case manager from the CSB provides discharge planning services to those individuals hospitalized in state psychiatric facilities and assists with all related discharge activities aimed at ensuring successful transition back into the community and preventing homelessness. Qualified mental health providers conduct all services.

Discharge related activities may include the following:

- Assessment and planning services, to include an individualized service plan linking individuals to services and support specific to ISP;
- Coordination of services and treatment planning with other agencies / providers making referrals and setting up initial appointments;
- Making collateral contacts with significant others to promote the implementation of the service plan and community adjustment;
- Monitoring of individuals health status;
- Monitoring medication compliance; and
- Entitlement assistance.

Case managers regularly report on the status of pending discharges during weekly staff meetings. These meetings are used to also include discussions on housing and to make referrals to appropriate services and agencies.

Corrections:\*

On an annual basis, CCH sends written invitations to correctional facilities serving the city and invites representatives to become members of the Coalition. In addition to the invitation, CCH also sends information, including referral procedures where applicable, for HUD-funded and other housing resources in the city. Requests are made that the facilities advise the CCH of additional resources about which they should be aware in serving the homeless and at-risk populations.

The Department of Corrections currently has transitional homes for inmates coming out of the system. It also has some contracted beds across the state for inmates without placement. The Correctional Counselors are required to do a home plan for each inmate as soon as he or she is in the system. Also, if they do not have placement then the Correctional Counselor is required to make provisions in the local community.

For all other correctional facilities, staff members participate in the local homeless coalition. Through membership, information is provided on sheltering and strategies to prevent homelessness upon release from prisons. CCH has a representative of DOC who directs a local jail-based, inmate re-entry program.

\*Please note that “corrections” category refers to local jails and state or federal prisons.

**P: CoC Coordination Chart**

A CoC should regularly assess the local homeless system and identify shortcomings and unmet needs. One of the keys to improving a CoC is to use long-term strategic planning to establish specific goals and then implement short-term/medium-term action steps. Because of the complexity of the existing homeless system and the need to coordinate multiple funding sources, there are often multiple long-term strategic planning groups. It is imperative for CoCs to coordinate, as appropriate, with each of these existing strategic planning groups to meet the local CoC shortcomings and unmet needs. Answer each question in the checkbox provided, using an X to indicate Yes or No for each.

	YES	NO
<b>1. Consolidated Plan Coordination</b>		
a. Do Con Plan planners, authors and other Con Plan stakeholders participate in CoC general planning meetings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Do CoC members participate in Con Plan planning meetings, focus groups, or public forums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Were CoC strategic plan goals addressing homelessness and chronic homelessness used in the development of the Con Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2. Jurisdictional 10-year Plan Coordination</b>		
a. Is there one or more formal jurisdictional 10-year Plan(s) being developed and/or being implemented within your CoC geography that are separate from the CoC 10-year plan? (If No, you may skip to Question 3a.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Do 10-year Plan conveners, authors and other stakeholders participate in CoC general planning meetings?	<input type="checkbox"/>	<input type="checkbox"/>
c. Have 10-year Plan participants taken steps to align their planning process with the local CoC plan?	<input type="checkbox"/>	<input type="checkbox"/>
d. Were CoC strategic plan goals used in the development of the 10-year Plan(s)?	<input type="checkbox"/>	<input type="checkbox"/>
e. Provide the number of jurisdictions within your CoC geography that have formally implemented a 10-year plan(s). At this time, the Chesapeake 10-year plan is in draft form and will be finalized and adopted by the end of 2007. Chesapeake is the only jurisdiction within the CoC geographical area.		
<b>3. Public Housing Agency Coordination</b>		
a. Do CoC members meet with CoC area HAs to improve coordination with and access to mainstream housing resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**CoC 2007 Funding Priorities**

**Q: CoC Project Priorities Chart**

**Column (1):** New this year, check the box in this column if the first project listed is a proposed Samaritan bonus project. **Column (5):** The requested project amount must not exceed the amount entered in the project summary budget in Exhibit 2. If the project summary budget exceeds the amount shown on this priorities list, the project budget will be reduced to the amount shown on the CoC Project Priorities Chart. **Column (7):** Place the component type under the appropriate program for each project in column 7. Acceptable entries include PH, TH, SH-PH, SH-TH, SRO, SSO, HMIS, TRA, SRA, PRA, or PRAR. Do not simply enter an “X” in the box provided. **Column (9):** For the Shelter Plus Care Renewals priority number, please continue project numbering from the top portion of the chart – please do not restart S+C project priority numbering from 1.

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

HUD-defined CoC Name:* Chesapeake CoC							CoC #: VA-512			
(1) SF-424 Applicant Name  (Please Remove Examples)	(2) Project Sponsor Name	(3) Project Name	(4) Priority	(5) Requested Project Amount	(6) Term	(7) Program and Component Type				
						SHP New	SHP Ren	S+C New	SRO New	
<input checked="" type="checkbox"/> ** <i>Example:</i> ABC Nonprofit	ABC Nonprofit	Annie’s House	1	\$451,026	3	PH				
<i>Example:</i> XYZ County	AJAY Nonprofit	Pierce’s Place	2	\$80,000	5			TRA		
<input checked="" type="checkbox"/> ** Restoration Outreach Ministry	Restoration Outreach Ministry	Restoration Outreach Center	1	\$73,508	2	PH				
Our House Families	Our House Families	Reaching Up Program I	2	\$52,035	1		TH			
Our House Families	Our House Families	Reaching Up Program II	3	\$57,763	1		TH			
<b>(8) Subtotal: Requested Amount for CoC Competitive Projects:</b>				<b>\$183,306</b>						
<b>(9) Shelter Plus Care Renewals:</b>						<b>S+C Component Type</b>				
N/A	N/A	N/A	7	N/A	1	N/A				
			8		1					
			9		1					
<b>(10) Subtotal: Requested Amount for S+C Renewal Projects:</b>				<b>\$0.00</b>						
<b>(11) Total CoC Requested Amount (line 8 + line 10):</b>				<b>\$183,306</b>						

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

\*\*Check this box if this is a #1 priority Samaritan bonus project.

**R: CoC Pro Rata Need (PRN) Reallocation Chart**  
**(Only for Eligible Hold Harmless CoCs)**

CoCs that receive the 1-year Hold Harmless PRN amount may reduce or eliminate one or more of the SHP grants eligible for renewal in the 2007 CoC competition. CoCs may reallocate the funds made available through this process to create new permanent housing project(s). These reallocation project(s) may be for SHP (1, 2, or 3 years), S+C (5 years), and Section 8 SRO (10 years) projects and their respective eligible activities .

**\*Reallocation projects WILL be funded if all of the following apply:**

1. Reallocation project is for permanent supportive housing (SHP -PH, SHP-Safe Haven PH, S+C, Section 8 SRO).
2. Reallocation project is not rejected by HUD (meets all “threshold” requirements)
3. CoC scores at least 65 points in the CoC competition.
4. Reallocation project is **not** the Samaritan bonus project.

**Reallocation projects may have a 1 -year grant term when they are SHP-PH or SHP-Safe Haven PH projects.**

**NOTE:** Reallocated funds placed in the Samaritan bonus project will lose their reallocation status. Therefore, if the CoC scores below the funding line, the CoC will lose the reallocated funds included in the Samaritan bonus project.

<b>1a. Will your CoC be using the PRN reallocation process?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>1b. If Yes,</b> explain the open decision making process the CoC used to reduce and/or eliminate projects (use no more than one-half page).					
<b>2. Enter</b> the total 1-year amount of <i>all</i> SHP projects that are eligible for renewal in 2007, which amount you have <b>verified with your field office</b> :				<i>Example:</i> \$530,000	\$
<b>3. Starting</b> with the total entered above for question 2, subtract the amount your CoC proposes to use for new permanent housing project, and enter the remaining amount: <i>(In this example, the amount proposed for new PH project is \$140,000)</i>				<i>Example:</i> \$390,000	\$
<b>4. Enter the Reduced or Eliminated Grant(s) in the 2007 Competition</b>					
(1) Expiring Grants	(2) Program Code	(3) Component	(4) Annual Renewal Amount	(5) Reduced Amount	(6) Retained Amount from Existing Grant
<i>Ex: MA01B300002</i>	<i>SHP</i>	<i>TH</i>	<i>\$100,000</i>	<i>\$60,000</i>	<i>\$40,000</i>
<i>Ex: MA01B400003</i>	<i>SHP</i>	<i>SSO</i>	<i>\$80,000</i>	<i>\$80,000</i>	<i>\$0</i>
<b>(7) TOTAL:</b>					
<b>5. Newly Proposed Permanent Housing Projects in the 2007 Competition*</b>					
(8) 2007 Project Priority Number	(9) Program Code	(10) Component	(11) Transferred Amounts		
<i>Example: #5</i>	<i>SHP</i>	<i>PH</i>	<i>\$90,000</i>		
<i>Example: #12</i>	<i>S+C</i>	<i>TRA</i>	<i>\$50,000</i>		
<b>(12) TOTAL:</b>					

\*No project listed here can be a #1 priority Samaritan Bonus project

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**S: CoC Project Leveraging Summary Chart**

HUD homeless program funding is limited and can provide only a portion of the resources needed to successfully address the needs of homeless families and individuals. HUD encourages applicants to use supplemental resources, including State and local appropriated funds, to address homeless needs.

Enter the name of your Continuum and list the total amount of leveraged resources available. To get this number, find the total at the bottom of the Project Leveraging Chart for all Exhibit 2 project applications, add up all of these the totals, and enter this single number in the chart below. Complete only one chart for the entire CoC (do *not* add any rows). Provide information *only* for contributions for which you have a *written commitment in hand at the time of application*.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Continuum	Total Value of Written Commitment
<i>Example:</i> River County CoC	\$10,253,000
Chesapeake Coalition for Homeless	\$316,667.00

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

**Supportive Housing Program (SHP) Projects:**

Type of Housing	All SHP Funds Requested (Current Year)		Renewal Projections				
	2007		2008	2009	2010	2011	2012
Transitional Housing (TH)	109,798		175,701	175,701	175,701	175,701	175,701
Safe Havens-TH							
Permanent Housing (PH)	73,508		49,599	49,599	49,599	49,599	49,599
Safe Havens-PH							
SSO							
HMIS							
<b>Totals</b>	183,306		225,300	225,300	225,300	225,300	225,300

**Shelter Plus Care (S+C) Projects:**

Number of S+C Bedrooms	All S+C Funds Requested (Current Year)		Renewal Projections									
	2007		2008		2009		2010		2011		2012	
	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$
SRO												
0												
1												
2												
3												
4												
5												
<b>Totals</b>												

**Part IV: CoC Performance**

**U: CoC Achievements Chart**

For the five HUD national objectives in the **2006** CoC application, enter the 12-month measurable achievements that you provided in Exhibit 1, Chart N of the **2006 CoC application**. Under “Accomplishments,” enter the *numeric* achievement that your CoC attained within the past 12 months that is *directly related* to the measurable achievement proposed in 2006. Below, if your CoC did not meet one or more of your proposed achievements, please describe the reasons for this.

<b>2006 Objectives to End Chronic Homelessness and Move Families and Individuals to Permanent Housing</b>	<b>12-month Measurable Achievement Proposed in 2006  (from Chart N of your 2006 CoC application)</b>	<b>Accomplishments  (Enter the numeric achievement attained during past 12 months)</b>
1. Create new PH beds for chronically homeless persons.	1) CSB will consider applying for 4 new SPC vouchers in 2007.  2) Apply for Samaritan Initiative in 2006 to fund second unit in South Hampton Roads Efficiency Apts. II.  3) Initiate discussion with CRHA to use Section 8 vouchers for units in South Hampton Roads Efficiency Apts. II.	1) 0 new SPC vouchers will be added in 2007  2) The Samaritan Initiative bonus was not awarded by HUD; however, the City of Chesapeake designated \$120,000 for 3 additional Section 8 vouchers for Chesapeake chronic homeless clients in the new SRO due to open in 2009.
2. Increase percentage of homeless persons staying in PH over 6 months to 71%.	1) CSB will maintain 3 additional chronically homeless persons in SPC program greater than 6 months.	1) 5 persons stayed in program longer than 6 months.
3. Increase percentage of homeless persons moving from TH to PH to 61.5%.	1) Reaching UP Program will continue to move TH clients into PH at or above 61% rate.	1) 66.6% of 3 families moved into permanent housing.
4. Increase percentage of homeless persons becoming employed by 11%.	1) CSB will assist 2 additional persons in becoming employed.	1) 2 persons secured SSDI benefits and one person – SSI benefits.
5. Ensure that the CoC has a functional HMIS system.	1) Train new users. 2) Seek the inclusion of non -federally funded providers.	1) 1 new user was trained. 2) 1 non-federally funded user (City of Chesapeake) was added to the HMIS system.

**Briefly explain the reasons for not meeting one or more of your proposed measurable achievements.**

- 1) No new SPC vouchers were added due to the increase in the cost of rent in Chesapeake.**
- 2) The 2006 CoC score of 85 did not approve the Samaritan Initiative bonus ; however, the City of Chesapeake designated \$120 ,000 for acquisition costs and will utilize three, local project - based vouchers for Chesapeake chronic homeless clients in the new SRO due to open in 2009.**

***OPTIONAL: If desired, you may use this space to describe your CoC's most significant accomplishments over the past 12 months.***

The Chesapeake Continuum of Care has seen increased involvement from the part of the city government over the past year, which resulted in designated funding for several efforts for homeless assistance providers. For the first time, "Our House Families" shelters received non-CDBG support funds and \$120,000 was awarded to support the development of the South Hampton Roads second Single Room Occupancy (SRO -Cloverleaf) that is scheduled to open in January 2009 with four units designated for Chesapeake's homeless.

As a participating city in the Regional Homeless Taskforce, the city allocated funds toward the establishment of an affordable housing database, Housing Connect, which provides a free service for landlords and real estate agents offering low-cost housing in South Hampton Roads.

In addition, the City Manager's office contracted a consultant agency to develop the city's 10-year Plan to End Homelessness and provide staff support for the Chesapeake Coalition for the Homeless over the next three years. These accomplishments should lead to more coordinated efforts to address the gaps in homeless services .

Other city involvement includes: an invitation to a City Council meeting to present on the SRO being planned for 2009, active participation on the part of the Assistant City Manager and other city staff in the Point-in-Time count, and a focus group involving city council members in the development of the 10-year Plan to End Homelessness.

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

The data in this chart should come from point -in-time counts also used for Chart K: Populations and Subpopulations Chart and Chart I: Housing Inventory Chart. For further instructions in filling out this chart, please see the Instructions section.

<b>1. Enter the total number of chronically homeless persons in your CoC and the total number of permanent housing beds designated for the chronically homeless in your CoC for each year.</b>					
<b>Year</b>	<b>Number of CH Persons</b>		<b>Number of PH beds for the CH</b>		
<b>2005</b>	4		10		
<b>2006</b>	4		10		
<b>2007</b>	2		4		
<b>Briefly describe the reason(s) for any increases in the total number of chronically homeless persons between 2006 and 2007:</b>					
<b>2. Indicate the number of new PH beds in place and made available for occupancy for the chronically homeless between February 1, 2006 and January 31, 2007:</b>					0
<b>3. Identify the amount of funds from each funding source for the development and operations costs of the new CH beds created between February 1, 2006 and January 31, 2007.</b>					
<b>Cost Type</b>	<b>Public/Government</b>				<b>Private</b>
	<b>HUD McKinney-Vento</b>	<b>Other Federal</b>	<b>State</b>	<b>Local</b>	
<b>Development</b>	\$	\$	\$	\$	\$
<b>Operations</b>	\$	\$	\$	\$	\$
<b>TOTAL</b>	\$	\$	\$	\$	\$

**W: CoC Housing Performance Chart**

The following chart will assess your CoC’s progress in reducing homelessness by helping clients move to and stabilize in permanent housing, access mainstream services and gain employment. Both housing and supportive services projects in your CoC will be examined. Provide information from the most recently submitted APR for the appropriate RENEWAL project(s) on your CoC Project Priorities Chart. **Note:** If you are not submitting any renewals in this year’s competition for the applicable areas presented below, check the appropriate “No applicable renewals” box in the chart.

<b>1. Participants in Permanent Housing (PH)</b>		
HUD will be assessing the percentage of all participants who remain in S+C or SHP permanent housing (PH) for more than six months. SHP projects include both SHP-PH and SHP-Safe Haven PH renewals. Complete the following chart using data based on the <u>most recently submitted APR</u> for Question 12(a) and 12(b) for PH projects included on your CoC Priority Chart:		
<input checked="" type="checkbox"/>	No applicable PH renewals are on the CoC Project Priorities Chart	APR Data
<input type="checkbox"/>	<u>All</u> PH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who <b>exited</b> PH project(s)—APR Question 12(a)	
b.	Number of participants who did <b>not leave</b> the project(s)—APR Question 12(b)	
c.	Number who <b>exited</b> after staying 7 months or longer in PH—APR Question 12(a)	
d.	Number who did <b>not leave</b> after staying 7 months or longer in PH—APR question 12(b)	
e.	Percentage of all participants in PH projects staying 7 months or longer (c. + d. divided by a. + b., multiplied by 100= e.)	%
<b>2. Participants in Transitional Housing (TH)</b>		
HUD will be assessing the percentage of all TH clients who moved to a permanent housing situation. TH projects include SHP-TH and SHP-Safe Haven/TH <i>not</i> identified as permanent housing. Complete the following chart using data based on the <u>most recently submitted APR</u> Question 14 for TH renewal projects included on your CoC Priorities Chart.		
<input type="checkbox"/>	No applicable TH renewals are on the CoC Project Priorities Chart	APR Data
<input checked="" type="checkbox"/>	<u>All</u> TH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who exited TH project(s)—including unknown destination	3 families
b.	Number of participants who moved to PH	2 families
c.	Percent of participants in TH projects who moved to PH (b. divided by a., multiplied by 100 = c.)	66%

**X: Mainstream Programs and Employment Project Performance Chart**

HUD will be assessing the percentage of clients in all your renewal projects who gained access to mainstream services, especially those who gained employment. This includes all S+C renewals and all SHP renewals, excluding HMIS projects. Complete the following charts based on responses to APR Question 11 for each of the renewal projects included on your CoC Priority Chart. For further instructions for filling out this section, see the Instructions section at the beginning of the application.

<input type="checkbox"/>	No applicable renewal projects for the Mainstream Programs and Employment Chart are included in the CoC Priorities Chart.
<input checked="" type="checkbox"/>	All renewal projects on the CoC Priorities Chart that are not exempted from reporting in the APR are included in calculating the responses below.

(1) Number of Adults Who Left (Use same number in each cell)	(2) Income Source	(3) Number of Exiting Adults with Each Source of Income	(4) Percent with Income at Exit (Col 3 ÷ Col 1 x 100)
<i>Example:</i> 105	a. SSI	40	38.1%
<i>Example:</i> 105	b. SSDI	35	33.3%
	a. SSI		
	b. SSDI		
	c. Social Security		
	d. General Public Assistance		
5	e. TANF	1	20%
	f. SCHIP		
5	g. Veterans Benefits	1	20%
<b>5</b>	<b>h. Employment Income</b>	<b>5</b>	<b>100%</b>
	i. Unemployment Benefits		
5	j. Veterans Health Care	1	20%
	k. Medicaid		
5	l. Food Stamps	4	80%
	m. Other (please specify)		
	n. No Financial Resources		

**Y: Enrollment and Participation in Mainstream Programs Chart**

It is fundamental that your CoC *systematically* helps homeless persons identify, apply for and follow - up to receive benefits under **SSI, SSDI, TANF, Medicaid, Food Stamps, SCHIP, WIA, and Veterans Health Care as well as any other State or Local program that may be applicable.** Which policies are currently in place in your CoC to help clients secure these mainstream benefits for which they are eligible?

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

**Z: Unexecuted Grants Awarded Prior to the 2006 CoC Competition Chart**

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

**AA: CoC Participation in Energy Star Chart**

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

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

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

**AB: Section 3 Employment Policy Chart**

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