

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 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 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:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: KS-507 - Kansas Balance of State CoC

1A-2. Collaborative Applicant Name: Kansas Statewide Homeless Coalition

1A-3. CoC Designation: CA

1A-4. HMIS Lead: KHRC

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. CoC Meeting Participants. For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	Yes
Local Jail(s)	Yes	Yes
Hospital(s)	Yes	Yes
EMS/Crisis Response Team(s)	No	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Mental Illness Advocates	Yes	Yes
Substance Abuse Advocates	Yes	Yes

Other:(limit 50 characters)		
Veteran Advocates	Yes	Yes
Legal Counsel	Yes	Yes
Business Community Partners	Yes	Yes

1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 2,000 characters)

As the CoC Lead Agency, the Kansas Statewide Homeless Coalition (KSHC) has a number of strategies to solicit and consider opinions from organizations and community members across the BoS CoC. The BoS CoC covers 101 counties and is divided up into eight regions to better manage coordination of activities and communication across the entire geographic area. Each region has a volunteer Regional Coordinator that is tasked with ensuring there is cross-cutting collaboration with representatives from organizations and communities who are interested in preventing and ending homelessness. As community members/homeless providers themselves, the Regional Coordinators are in a unique position to identify and reach out to those at the region and community level to assure all voices are heard and ideas are considered through regularly scheduled regional meetings. Regional Coordinators make every effort to include broad representation by law enforcement, mental health services, local government, health and human services, youth organizations and domestic violence providers to name a few. All regional meetings have standardized agendas that include updates on organizational activities and the identification of community and client needs from each meeting participant. The BoS CoC Program Coordinator attends all regional meetings to ensure there is consistent communication of opinions and ideas across the entire CoC. In addition, KSHC recently conducted a BoS CoC-wide needs assessment that brought together organizations and community members that had not previously participated in any CoC regional meetings or activities. This was accomplished through a targeted communication effort throughout each region bringing together participants to contribute their opinions and ideas during focus groups and key informant interviews. Other strategies include participation in the Consolidated Plan and through the PIT process that pulls in broad representation from community members.

**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 often the CoC solicits new members; and
(4) 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)**

The communication process to solicit new members includes the announcement of monthly BoS CoC meetings through KSHC's email listserv

that goes out to over 200 organizations across the BoS. Meetings are also communicated through the KSHC website and Facebook page. Meetings are held via teleconference so that any group/individual from the 101 counties can attend without location being a barrier. Regional CoC meetings are communicated through email, community notices, brochures and special outreach by the Regional Coordinators. During the PIT process, brochures and a special invitation to participate are widely distributed throughout each region. Additionally, KSHC Staff and the CoC membership works to create new relationships with agencies that have a vested interest in ending homelessness through the Annual Kansas Housing Conference communications and advertisements. KSHC conducts the conference in partnership with the Kansas Housing Resources Corporation (KHRC) that extends invitations to over 600 organizations in their member listserv. The CoC Collaborative Application process is another venue in which broad outreach is extended to all organizations in the CoC that contribute services/knowledge to further the success of the CoC. Through this process, new partners gain an understanding of how they fit into the work of the CoC and how the CoC can contribute to their work as well. This process creates a solid foundation for bringing in new partners through shared learning. The CoC partnership with the Kansas Interagency Council on Homelessness has been an added resource to make new connections. The CoC identified a need to do special outreach to homeless and formerly homeless people to join the CoC and, as such, created a standing agenda item on the CoC monthly call to develop outreach strategies. Toward that effort, regional partners currently engage peer-supporters among homeless and formerly homeless people to extend care and services to homeless provider clients.

1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals. (limit 2,000 characters)

The CoC has a very broad range of CoC funded and non-CoC funded organizations that make up the CoC listserv and are notified on a regular basis about CoC activities and funding opportunities specifically. An announcement of available funding was posted on the KSHC website and on the KSHC Facebook page on 6/21/2018. In addition, a formal notice inviting all renewal and potential new applications was sent to the CoC via the KSHC listserv on 6/26/18. Recipients were encouraged to forward that communication to any organizations not previously funded that would be interested in an application for the FY18 Competition. The CoC also requested that Kansas Housing Resources Corporation and the Kansas Department on Aging and Disability Services promote the opportunities through their own listservs. CoC members are encouraged to communicate the funding availability through community networks to encourage others in applying for new projects. In addition, a Letter of Intent (LOI) form was distributed widely on 6/26/18 to request those organizations interested in applying to submit the completed LOI to KSHC. The CoC NOFA Committee reviews all LOIs and provides feedback to potential new and renewal applicants.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.

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

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; and
(2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.
(limit 2,000 characters)

The KSHC staff consults with the ESG Program recipient (Kansas Housing Resources Corporation-KHRC) on a monthly basis related to planning efforts across the CoC. The KSHC staff also participates on the panel that reviews ESG applications and determines ESG funding decisions on an annual basis.

KSHC and KHRC coordinate the development of performance and evaluation standards for ESG funded activities. There is a standing agenda item on the monthly CoC calls for the ESG Program Manager to provide updates on ESG activities as well as receive questions and direction from CoC members related to planning efforts. The ESG Program Manager also participates in the CoC regional meetings to further ESG and CoC planning, evaluation and collaboration efforts. Collaboration and evaluation with the ESG Program recipient is further enhanced due to the KHRC serving as the HMIS Lead for the CoC. As such, the ESG Program Manager and KSHC staff meet on a regular basis to review and evaluate data quality for the CoC including ESG performance. ESG sub-recipients submit monthly reports and are reviewed for accuracy and timeliness by KHRC and KSHC as well.

The members of the four consolidated plan jurisdictions (Lawrence, Leavenworth, Manhattan and the State) and the CoC have ongoing collaborative efforts aimed at informing the Consolidated Plan including but not limited to participating in monthly CoC committee, subcommittee, regional and standing committees, planning and participation in the Kansas Housing Conference, providing annual PIT/HIC data and ongoing HMIS development. The CoC submits annual PIT & HIC Data to each of the Consolidated Plan jurisdictions as well as service capacity, provider network information and needs assessment.

1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide 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. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)? Yes

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 the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and**
 - (2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.**
- (limit 2,000 characters)**

The CoC prioritizes services for those fleeing domestic/dating violence/sexual assault or who are stalking survivors. Victims who are now homeless are able to access emergency services, drop-in programs and shelter through DV and

short-term crisis centers outside of normal CoC regional access points. The CoC's Coordinated Entry (CE) Policies and Procedures allow for immediate linkage to an appropriate DV access point. Where the DV provider would be more appropriate to offer coordinated services, the agencies will bypass CE and defer to the DV agency. Clients are not required to accept services directly from the DV provider and can opt to remain with the intake provider. This practice ensures client choice and maximizes client safety. The CoC's CE Policies and Procedures include processes to comply with 24 CFR Part 5 Subpart L and are assessed on a case-by-case basis. DV providers also offer a separate needs assessment to ensure those with DV issues are served with appropriate services. The CoC encourages all members to utilize trauma informed care and victim-centered practices and provides training through the CE process. In addition, the PIT process has been adjusted and special consideration given to DV survivors by using the same survey for DV survivors but allowing exclusion of certain questions to ensure privacy, while ensuring an accurate count for the PIT. The Kansas Coalition Against Sexual and Domestic Violence (KCSDV) was consulted on the design and implementation of the prioritization and safety elements of the CE system. Mental health and other unique needs are identified through the CE process and appropriate referrals are made at the local level. Victim service providers utilize an HMIS comparable database and participate in the CE process without identifying client information. The CoC's CE process is victim-centered and focused on protecting individual choice. The CE process includes CoC, ESG, DOJ, HHS funded programs.

1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)

The CoC provides annual Coordinated Entry training, conducted by KSHC staff, and ad-hoc training when requested by any of the CoC's eight regions or by an individual agency within a region. Training covers best practices for providing services to survivors of domestic and sexual violence and stalking. In addition, the CoC regions coordinate with local victim service providers for the HIC, PIT, Consolidated Planning and the CAPER to evaluate the number of beds available, safety of service locations and if an adjustment should be made based on the needs of a particular locale. The Kansas Coalition Against Sexual and Domestic Violence (KCSDV) provides training at the annual Kansas Housing Conference that covers best practices in serving survivors of domestic violence. Some of the topics covered include dynamics of domestic violence, high cost of living, economic abuse, housing rights (VAWA) for survivors, and why victims of domestic violence stay. KCSDV is available for consultation in regional planning and training.

1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)

KSHC performed a needs assessment for the eight regions (101 counties) that make up the Balance of State CoC. The assessment documented the need in each region – North West, North Central, North East, South West, South Central, South East, East Central and Douglas County. The assessment used a variety of data sources, including information from Kansas Bureau of Investigation and Kansas Department of Children and Families to document Domestic Violence statistics such as Protection from Abuse and Stalking filings by county, stalking by day of the week by occurrence and Domestic Violence Injuries by number, percentage and type. In addition, key informant interviews and focus groups were conducted to gather additional supportive information. The assessment provided evidence for the CoC to determine the greatest areas of need for DV services and is substantiated through records, reporting and experience of the Kansas Coalition Against Sexual and Domestic Violence (KCSDV) and their recommendations through coordinated entry referrals. KCSDV and other DV agencies also are active participants in the HIC-PIT counts and share their data and recommendations based on reports. In addition, the Osnium (OZ) database which has the WS (Women’s Shelter) platform from Osnium Inc., is a Homeless Management Information System (HMIS) Comparable Database. OZ was developed for Kansas domestic and sexual violence survivor service providers by the Kansas Coalition Against Sexual and Domestic Violence (KCSDV) to collect data for funders. As Violence Against Women’s Act (VAWA) funded organizations, KCSDV and local domestic and sexual violence survivor services programs must follow the requirements of the VAWA. KCSDV publishes statewide aggregate and de-identified data collected from the DV/SA programs. Also, some KCSDV member programs publish aggregate and de-identified data from their service areas.

1C-4. DV Bonus Projects. Is your CoC Yes
applying for DV Bonus Projects?

1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.

SSO Coordinated Entry	<input checked="" type="checkbox"/>
RRH	<input checked="" type="checkbox"/>
Joint TH/RRH	<input checked="" type="checkbox"/>

1C-4b. Applicants must describe:
(1) how many domestic violence survivors the CoC is currently serving in the CoC’s geographic area;
(2) the data source the CoC used for the calculations; and
(3) how the CoC collected the data.
(limit 2,000 characters)

Because data sources for domestic violence victims are protected, it can be challenging for domestic violence providers to submit even aggregate data to the CoC. However, data gathered through the KSHC 2018 needs assessment process documented that there were over 20,000 reported injuries and over

3,800 protection orders across the BoS CoC in 2016 and that there is an expected 3% increase in these cases, the CoC estimate for domestic violence survivors being served in the BoS CoC is almost 4,000. In addition, data was collected through the KS Statewide Data Initiative for FY 2017, 59,481 total people were served by DV/SA programs in Kansas and 3,234 people found refuge in safe shelters. Additionally, there were 115,978 shelter bed nights. This data is based on Kansas' State Fiscal Year (SFY), which is July 1 – June 30, and was aggregated from KCSDV's Member Programs' State General Fund Statistical Reports. The data in this report was provided by 25 of the 27 KCSDV Member Programs. (These data were aggregated from KCSDV's Member Programs' State General Fund Statistical Reports.)

1C-4c. Applicants must describe:

- (1) how many domestic violence survivors need housing or services in the CoC's geographic area;**
 - (2) data source the CoC used for the calculations; and**
 - (3) how the CoC collected the data.**
- (limit 2,000 characters)**

According to the 2018 KSHC needs assessment, the BoS CoC counties had over 4,000 individuals who sought protection from abuse in 2016. Based on previous years' increases, there is an anticipated increase annually of 3% and does not include those who are suffering domestic violence but are too fearful to report the abuse or take actions to prevent it. The needs assessment also documented KS Bureau of Investigations records of over 20,000 injuries reported in 2016. As with many domestic violence cases, not all injuries or instances of harm are reported nor are there preventative actions taken. To assign a specific number to those in need would be difficult. Taking into consideration the number of DV agencies in the BoS, the number who sought protection orders from abuse, the number of injuries and adding in the additional 2,622 orders for protection of stalking across the Balance of State demonstrates the need is greater than the services being provided.

1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:

- (1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;**
 - (2) quantify the unmet need for housing and services for DV survivors;**
 - (3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and**
 - (4) describe how the CoC determined the unmet need for housing and services for DV survivors.**
- (limit 3,000 characters)**

On September 14, 2016, 25 out of 25 identified domestic violence programs in Kansas participated in the National Census of Domestic Violence Services. Information was provided by 25 participating domestic violence programs about services provided during the 24-hour survey period. When there are not enough resources, survivors' requests for a safe place to live, legal representation, counseling, and other supportive services go unmet—countless times in a single day. There were 421 unmet requests for services in one day, of which 42% (177) were for housing. DV victims made 421 requests for

services—including emergency shelter, housing, transportation, childcare, legal advocacy, and more—that could not be provided because programs did not have the resources to provide these services. Improving collaboration between DV programs and homeless service providers can improve the CE process to better meet the needs of victims experiencing homelessness. In the KSHC needs assessment, the SW region found that DV and deportation were listed as the cause of homelessness. Additionally, the needs assessment found that the challenges faced by the community included the need for knowledge of eligibility criteria for HUD programs, domestic violence shelters and services. Incorporating DV clients into the current coordinated entry process creates a delay in services. Those escaping DV often lack the temporary support or resources necessary to benefit from the current coordinated entry process. Although the Coordinated Entry program addresses needs as quickly as possible the process does not have the capability of addressing the needs of DV clients because it lacks the ability to address safety needs and lacks proper confidentiality and anonymity required to ensure safety.

1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)

There are 3 programs applying for the DV Bonus, one in each allowable category. Together, all will create a better system in responding to the housing needs of survivors. The DV SSO-CE project will allow for the CE process to be more efficient, trauma-informed and maximizing client choice and safety when working with survivors or DV/SA, dating violence and stalking. Additionally, coordination and collaboration between DV/SA service providers and homeless service providers will significantly decrease the unmet needs of survivors within the CoC CE.

1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:

- (1) rate of housing placement of DV survivors;**
 - (2) rate of housing retention of DV survivors;**
 - (3) improvements in safety of DV survivors; and**
 - (4) how the project applicant addresses multiple barriers faced by DV survivors.**
- (limit 4,000 characters)**

All referrals to the Southwest Kansas Housing DV program are assessed through the designated coordinated entry process to rapidly re-house those most at risk with the highest priority in a manner to protect the privacy and safety of the participants. The project utilizes supportive services as a way to help homeless families achieve permanent housing and self-sufficiency. Case managers will facilitate services necessary for tenants to maintain permanent housing as well as secure the resources to maintain their house upon exit. Supportive services will include but is not limited to, life skills, apartment maintenance, hygiene, parenting, healthy relationship education, crisis management, budgeting, job skills, jobs programs and assessing physical and mental health care. The program incorporates a gradual reduction in supportive services as families reach self-sufficiency, but at the same time ensures families

create permanent supportive service relationships with traditional providers. Mid-KS CAP DV staff will assist participants in determining basic housing needs; provide landlord contacts and communication techniques to discuss and secure leasing processes and secure housing. Staff will provide participants with opportunities and encourage participant involvement in activities. Opportunities and services are unique to the participant/family and customized to meet the participant's needs. Participants will meet with staff as needed to discuss and overcome barriers to permanent housing. Relationships will be established with participant and partners to assist in resolving obstacles to ensure permanent housing. Employment seeking techniques and stability in the workplace skills will be available as well as services to obtain mainstream benefits such as food stamps, disability services, treatment options and mental health care. All participants benefit from appropriate assistance. Support assistance as it is identified may be provided to the household. The Kansas Coalition Against Sexual and Domestic Violence (KCSDV) is proposing a new SSO-Coordinated Entry project. In years one and two of the project, KCSDV will hire a full time SSO-CE Project Coordinator (SSO-CE PC) to participate as a voting member of CoC, HMIS, CE, and PIT/ HIC committees. In coordination with Kansas Statewide Housing Coalition (KSHC), the SSO-CE PC will conduct interviews and focus groups with Victim Service Providers (VSP), Homeless Service Providers (HSP), survivors, and those experiencing homelessness to analyze the strengths and gaps of the current policies, procedures, and practices of the CoC's CE process related to S/DV. Project staff will examine how the CoC currently meets the needs of survivors, and incorporates safety planning and confidentiality protocols in the CE process and assessment. Based on the results from the interviews and focus groups, an action plan will be created with a timeframe to complete the work that will include, needs addressed, anticipated outcomes and evaluation methods. SSO-CE PC will provide input on best practices, model policies, and protocols on responding to survivors of S/DV; provide training and technical assistance as it relates to S/DV and the intersection of S/DV and homelessness to the CoC, CE, and HSP; assist HSP and VSP in building collaborative partnerships; and integrate S/DV projects with CoC and CE systems. In coordination with KSHC, the SSO-CE PC will develop a training curriculum for S/DV programs to increase knowledge of homelessness and CE processes. A training curriculum for HSP will be developed on the dynamics of S/DV, trauma, victim-centered response, and safety and confidentiality. In year two, using these training curricula, regional trainings for VSP and HSP will be conducted. The SSO-CE PC in collaboration with KSHC will conduct annual reviews of the CoC's CE model policies, procedures, and best practices as it relates to S/DV.

1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:

- (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;**
- (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and**
- (3) Indicate whether the CoC has a move on strategy. The information**

should be for Federal Fiscal Year 2017.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Lawrence/Douglas County Housing Authority	67.21%	Yes-Both	No
Southeast Kansas Community Action Program	100.00%	Yes-Both	No
Salina Housing Authority	68.54%	Yes-Both	No
Leavenworth Housing Authority	76.08%	Yes-Both	No
Manhattan Housing Authority	42.79%	No	No

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)

The CoC fosters a relationship with 103 PHAs in our geographic area encouraging the development of policies that would include a homeless admission preference. Through collaborative partnerships, and the Coordinated Entry process, the CoC demonstrates the need for such policies. The CoC has successfully worked to have PHAs in our geographic region set a preference for homeless veterans and survivors of domestic violence. Similar engagement and outreach continues to be done to extend those policies to cover all homeless individuals and families. PHAs participate in CoC meetings, regional meetings and subcommittees meetings. Over time this will advance the goal of all PHAs in our geographic region to set a policy that includes a homeless admission preference. The CoC has developed a communication for PHA's to educate them about the importance of including policies for homeless admission preference as well as surveying them about their intention to develop such a policy. KSHC will be working with the Kansas Housing Resourcing Corporation to implement a homeless admission preference for other voucher programs KHRC administers.

1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)? No

1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals

**and their families experiencing homelessness.
 (limit 2,000 characters)**

In accordance with HUD’s Equal Access Rule at 24 CFR 5.105(a)(2) that prohibits discriminatory eligibility determinations in HUD-assisted or HUD-insured housing programs based on actual or perceived sexual orientation, gender identity, or marital status, including any projects funded by the CoC Program, ESG Program, and HOPWA Program, the CoC has incorporated this rule into practice as well as in the CoC Policies and Procedures. Moreover, consumers are not be steered toward any particular housing facility or neighborhood because of race, color, national origin, religion, sex, disability or the presence of children. CoC programs and the Coordinated Entry system have an anti-discrimination policy (implemented 8/2016) and the CoC follows all HUD and other federal mandates in regards to Equal Access, Fair Housing, Non-discrimination. CoC agencies have created and implemented policies specific to their individual programs that address the needs of their LGBT clients. The CoC coordinates with the ESG Recipient to require their sub-recipients to submit agency policy showing LGBT inclusion and equal treatment. Training on Fair Housing is offered annually at the Kansas Housing Conference and the All Grantee meeting presented by HUD staff.

1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual’s Gender Identity (Gender Identity Final Rule)?	Yes

1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented to prevent the criminalization of homelessness in the CoC’s geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented:	<input type="checkbox"/>
Other:(limit 50 characters)	
Encourage Collaboration with Co-Response Teams	<input checked="" type="checkbox"/>

	<input type="checkbox"/>
	<input type="checkbox"/>

1C-8. Centralized or Coordinated Assessment System. 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 homelessness assistance in the absence of special outreach;
(3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and
(4) attach CoC’s standard assessment tool.
(limit 2,000 characters)

The CoC has implemented a Coordinated Entry System (CES) across the 101 counties of the CoC, covering the entire geographic area. The Coordinated Entry Committee (CEC), a subcommittee of the CoC, oversees the entire CES and works on behalf of the CoC to plan, train, market and evaluate the entire CES. The CoC approved a version of updated Policy & Procedure to ensure compliance with 24 CFR 578.7(a)(8) by January 23, 2018. The CoC CES Policies and Procedures creates the frame work of the system and requires that each of the 8 regions of the CoC operate a Regional Coordinated Entry System (RCES) within that framework while also allowing for local customization. Each region meets regularly (monthly or bi-monthly, depending on regional need) to case conference the Regional Master List, provide training to staff and volunteer and work on the regional Action Plan to grow and improve the RCES. The CoC CES has a “No Wrong Door” approach, all agencies agreeing to be part of the CES receives full training and is considered an Access Point. All Access Points must provide full CES participation to any individual or family who requests housing assistance. With the new KSHC CE Project, the CoC will be able to have dedicated staff to perform the day to day work recommended by the CEC to create specific training modules for each role of the CES in the CoC. This training will include modules for volunteers, outreach workers, intake staff, case managers, staff supervisors and community members. The new KSHC CE Project will also have staff dedicated to assess whether any part of the CES needs improvement including but not limited to: assessment/prioritization process, training, referral, data management and system effectiveness.

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

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

1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).

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

1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:

- (1) objective criteria;**
- (2) at least one factor related to achieving positive housing outcomes;**
- (3) a specific method for evaluating projects submitted by victim services providers; and**
- (4) attach evidence that supports the process selected.**

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

1E-2. Severity of Needs and Vulnerabilities. Applicants must describe:

- (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and**
- (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.**

(limit 2,000 characters)

The CoC's NOFA Committee used HUD's scoring tool measures as a guide in developing the KS BoS CoC scoring tool including measures around severity of needs and vulnerabilities as follows:

- >50% of participants with Zero income at entry
- >50% of participants with more than one disability type
- >50% of participants entering project from place not meant for human habitation

The CoC projects prioritize needs and vulnerabilities including chronic homelessness, mental health, physical health, current or past substance abuse, access to services, abuse/victimization or a history of abuse/victimization, domestic violence, and history of homelessness. The NOFA committee created a Project Ranking Tool that evaluates a host of performance and compliance measures to gauge whether projects serve the needs and vulnerabilities the CoC has prioritized. In the CoC ranking and project prioritization process the HUD System Performance Measure of "returns to homelessness" are prioritized along with Exits to Permanent Housing placement/retention and if the project abides by a Housing First policy. The CoC inquires of each new, and renewing,

project application which of the HUD prioritized sub-populations the project would serve. The NOFA Committee also prioritizes projects based on geographic need, available resources, and PIT/HIC data as well.

- 1E-3. Public Postings. Applicants must indicate how the CoC made public:**
- (1) objective ranking and selection process the CoC used for all projects (new and renewal);**
 - (2) CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and**
 - (3) attach documentation demonstrating the objective ranking, rating, and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available, that legibly displays the date the CoC publicly posted the documents.**

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	<input type="checkbox"/>	CoC or other Website	<input type="checkbox"/>
Email	<input type="checkbox"/>	Email	<input type="checkbox"/>
Mail	<input type="checkbox"/>	Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>	Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>	Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>	Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between the FY 2014 and FY 2018 CoC Program Program Competitions.

Reallocation: No

1E-4a. If the answer is “No” to question 1E-4, applicants must describe how the CoC actively reviews performance of existing CoC Program-funded projects to determine the viability of reallocating to create new high performing projects. (limit 2,000 characters)

The CoC actively reviews performance of existing CoC Program-funded projects by assessing the needs of the community and determining if the CoC portfolio meets the current needs. APR data is reviewed to assess cost effectiveness and bed utilization. Programs are also evaluated based on their ability to expend all funding and if funding has been left unspent. The CoC grantees are also encouraged to voluntarily reallocate funding and change

project type if community needs have changed. After completing this process, it was decided that reallocating 20 percent of our ARD for FY14-FY18 would have been detrimental to the homeless population in our local communities.

1E-5. Local CoC Competition. Applicants must indicate whether the CoC:
(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline—attachment required;
(2) rejected or reduced project application(s)—attachment required; and
(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline—attachment required. :

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Attachment Required. Yes

2A-1a. Applicants must: Page 3 BoS CoC HMIS Policy and Procedures
(1) provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1, and
(2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).

2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required. Yes

2A-3. HMIS Vender. What is the name of the HMIS software vendor? MAACLink

2A-4. HMIS Implementation Coverage Area. Using the drop-down boxes, applicants must select the HMIS implementation Coverage area. Single CoC

2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:
(1) total number of beds in 2018 HIC;
(2) total beds dedicated for DV in the 2018 HIC; and

(3) total number of beds in HMIS.

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	880	347	290	54.41%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	495	0	115	23.23%
Rapid Re-Housing (RRH) beds	364	30	329	98.50%
Permanent Supportive Housing (PSH) beds	357	0	106	29.69%
Other Permanent Housing (OPH) beds	0	0	0	

2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months. (limit 2,000 characters)

Increased efforts in coordinated entry identified more beds/resources in the CoC. Multiple data entry requirements by non-HMIS providers (e.g. VASH) discourages participation with HMIS. The CoC will work to find solutions to incorporate data from all databases. Through the CoC HMIS Grant, it is able to cover all fees and costs associated with using HMIS (setup, annual, training, support, etc). The 8 regions will work to educate, inform and build relationships with community partners on how HMIS participation affects all project types and how HMIS success can lead to more funding and a stronger service network. The CoC HMIS System Administrator is present at each CoC and regional meeting, continuously advocating for system use by non-federally funded partners, provides customized training and support and collaborates with the CoC Lead on securing new HMIS partners. The CoC is also working to partner non-participating programs with others that can help with the data entry requirements as well as foster better relationships with faith based shelters. Regional Coordinators will also encourage community collaboration and continue to invite rescue missions to the regional and coordinated entry meetings. The CoC advocates that HUD provides guidance to VASH and other PHA Programs to participate in HMIS at the level of the other HUD Federal Partners

2A-6. AHAR Shells Submission: How many 2017 Annual Housing Assessment Report (AHAR) tables shells did HUD accept? 6

2A-7. CoC Data Submission in HDX. Applicants must enter the date the CoC submitted the 2018 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). (mm/dd/yyyy) 04/27/2018

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy). 01/24/2018

2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy). 04/27/2018

2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC’s sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC’s sheltered PIT count results.
(limit 2,000 characters)**

The changes that were implemented in FY17 served to be very successful to the process in FY18. Key changes made were those per HUD guidelines related to the gender identity question. During FY18 the CoC expended time and staff resources to plan and conduct an improved and inclusive PIT Count. Data entry was improved and streamlined through utilization of a customized portal in our HMIS implementation. Training and strategic planning began earlier this year and a larger PIT Committee was convened than in previous years. The 8 Regional Coordinators increased their role in their region’s count, recruiting a greater number of volunteer commitments and expanded community engagement, and leading the regional data entry team. KSHC staff systematically reviewed all data for accuracy and duplicity, ensuring that all data analyzed and submitted was complete and reliable. The CoC believes these intentional changes led to a more accurate count which increased the total sheltered PIT count numbers. In addition, a change was made to the process related to the surveys conducted for domestic violence survivors. In FY17 there was some confusion between the domestic violence survey and the other homeless survey that were implemented. For example, some domestic violence providers used the non-domestic violence survey and some non-domestic violence providers used the domestic violence survey creating some significant challenges. A new data collection process was required in FY18 to avoid that issue. As a result, we standardized the survey across all subpopulations allowing domestic violence providers to submit without identifying information ensuring domestic violence clients information is kept confidential while still ensuring an unduplicated PIT.

2C-2. Did your CoC change its provider coverage in the 2018 sheltered count? No

2C-2a. If “Yes” was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.

Beds Added:	0
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Beds Removed:	0
Total:	0

2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. Did your CoC add or remove emergency shelter, transitional housing, or Safe Haven inventory because of funding specific to a Presidentially declared disaster, resulting in a change to the CoC’s 2018 sheltered PIT count? No

2C-3a. If “Yes” was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct and unsheltered PIT count in 2018, select Not Applicable. No

2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count? Yes

2C-5a. If “Yes” was selected for question 2C-5., applicants must describe: (1) how stakeholders serving youth experiencing homelessness were engaged during the planning process; (2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and (3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count. (limit 2,000 characters)

Each of the 8 regions, with guidance from the CoC, created a customized approach to ensure a more accurate count of homeless youth. Strategies included engaging the homeless liaisons in school districts across the CoC in working with community partners to identify areas where youth can be engaged in the PIT Count. In addition, outreach workers, food pantry workers and library personnel worked to engage youth in the count. The CoC continued to use the

updated FY17 PIT survey during the FY18 PIT process that had been adjusted to capture the specific age range of 18-24. Survey interviews found that homeless youth in rural and frontier counties reported sleeping on couches with friends and did not qualify as homeless for the PIT Count. The CoC took steps to engage these individuals in the process but could not include them in the final PIT count.

2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:

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

(limit 2,000 characters)

The CoC implemented planning strategies four months prior to the PIT Count on January 24, 2018 beginning by convening a PIT planning committee to engage each of the eight Regional Coordinators. The committee planning meetings initially occurred monthly (the 4th and 3rd month before the Count) and then were convened bi-weekly to create a customized approach for a better count of focused groups. Strategies were created for engagement opportunities aligned with CoC polices related to the PIT count of populations within all eight regions to include: individuals and families experiencing chronic homelessness and families with children experiencing homelessness. The Regional Coordinators were also trained in conducting the surveys for the PIT and were able to follow a Train-the-Trainer model for engaging their regions. CoC staff provided additional training to PIT volunteers to educate them on the different questions involved in determining chronic homelessness status. The CoC continues to encourage individuals to participate in the PIT Count when encountered by a survey/outreach team. To ensure focus groups were engaged in the PIT count the CoC coordinated with the Department of Veteran Affairs, SSVF providers, VETS@Home workgroup and VA outreach teams to confirm homeless veterans were being included in the PIT Count. In addition, the CoC reached out to PHAs and VA Housing Programs to verify the homeless status of any pending participants to include in the count. The CoC is collaborating with law enforcement teams and school district liaisons to try to eliminate gaps for the count of homeless families and children in the rural county areas and continues to engage and expand the collaboration and engagement process of the PIT Count to ensure quality surveys and an accurate homeless count.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.	1,284
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3A-1a. Applicants must:

- (1) describe how the CoC determined which 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)**

The Regional Coordinators engages key stakeholders and partners to identify the risk factors for those who may become homeless for the first time. The CoC relies on the ESG sub-recipients that receive Homeless Prevention for coordination and as a part of that strategy, the CoC works with the ESG Program Manager to ensure that homeless prevention funding is available and accessed by the communities in need. Simultaneously, the CoC Program Coordinator works to educate all agencies in the CoC of all Homeless Prevention projects available to the clients that they served. Education and coordination is key to ensuring awareness of help that is available. KSHC Staff oversees and facilitates all CoC committees that work toward this measure.

- Other important strategies to determine risk factors include;
- using CE policies related to working with homeless prevention agencies and using the VI-SPDAT to identify risk factors as a guide for determining potential services,
 - using a standardized process to partner with agencies such the Resource Council, faith-based organizations, and other relevant agencies,
 - once a risk assessment and referral is made, a Homelessness Prevention certification will be completed to see if the individual is eligible for homelessness prevention services,
 - using available funds (federal and local) to conduct case management to connect those at risk to resources,

In addition, the KSHC Needs Assessment was conducted in 2017-2018 that concluded the following risk factors existed across the CoC including access to affordable healthcare, poverty, under-employment/wage rates and affordable housing. The assessment was finalized in June 2018 and will be used to continue to identify areas where strategies are needed to prevent those at risk

for becoming homeless for continuing on that path.

3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:
(1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);
(2) describe the CoC’s strategy to reduce the length-of-time individuals and persons in families remain homeless;
(3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
(4) 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)

The primary focus of our strategy to reduce the length of time individuals and persons in families remain homeless (357 bed nights) has been through Coordinated Entry initiatives that include: prioritizing services and connecting families and individuals with the appropriate resource as quickly as possible; encouraging organizations to apply for rapid re-housing projects to ensure that people who are homeless are rapidly re-housed within 30 days; and using the VI-SPDAT to identify those with the highest need and longest time homeless by region. The CoC manages this through the Regional Coordinators who are responsible for facilitating the CE process to minimize the length of time homeless. In addition, the strategy includes engaging various partners and garnering feedback from stakeholders, all with a vested interest in reducing the length-of-time individuals and families remain homeless. Apart from these positive steps forward, the CoC has challenges due to inadequate housing stock to meet current housing needs and the large geographic size of the CoC’s 101 counties which makes it exceptionally difficult to ensure that the type of housing needed is available in each community. To address this problem, the CoC has unsuccessfully applied for new Continuum of Care funding to increase the housing stock over the past several years. The number of underperforming projects that could have funding reallocated is inadequate to meet the affordable housing need of the CoC. Other challenges include the lack of housing through Public Housing Authorities as an affordable housing option – typically many of them having long waiting lists. KSHC is the organization that is responsible for the CoC’s strategy to reduce the length of time individuals and families remain homeless.

3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:
(1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing that exit to permanent housing destinations; and
(2) provide 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.

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	36%

Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	88%
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3A-3a. 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; and**
- (2) 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.**

(limit 2,000 characters)

Part of the Coordinated Entry process includes matching individuals and families with the appropriate program that will best serve their needs and that will lead to successful permanent housing placement and retention. This is achieved through using common assessment tools, education and coordination with all project types in the CoC. KSHC is the organization that is responsible for the CoC's strategy to increase the rate at which individuals and persons in families in non-RRH permanent housing projects retain their housing or exit to permanent housing. The CoC Program Coordinator works to educate providers of all project types (regardless of funding source) of the variety of services available to participants. In addition to Coordinated Entry, the CoC encourages the development of permanent housing projects across the state to ensure that Kansas has affordable permanent housing options available. This may be Permanent Supportive Housing, Public Housing, Housing Choice Vouchers, Tax Credit Housing and others. The BoS CoC works statewide with agencies to educate them on funding opportunities for this type of housing.

3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	5%

3A-4a. Applicants must:

- (1) describe how the CoC identifies common factors of 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 returns to homelessness.**

(limit 2,000 characters)

The CoC has use of data sharing through the HMIS. Agencies can see a client's homeless history and use that information to connect them with the most appropriate resources to address their needs. The CoC employs strategies to train case managers on Strengths-Based Case Management, Trauma Informed Care, Housing First and accessing mainstream benefits for their clients, all with the goal of keeping individuals and families in permanent housing and to reduce

recidivism. KSHC is the organization responsible for the CoC's strategy to identify and address individuals and families at risk of returning to homelessness. This is done through engaging various partners and garnering feedback from community members. The CoC Program Coordinator works with the 8 Regional Coordinators to facilitate and plan training for all projects.

- 3A-5. Job and Income Growth. Applicants must:**
- (1) describe the CoC's strategy to increase access to employment and non-employment cash sources;**
 - (2) describe how the CoC works with mainstream employment organizations to help individuals and families increase their cash income; and**
 - (3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.**
- (limit 2,000 characters)**

The CoC works with all funded agencies and stakeholders to increase their clients' access to employment and non-employment cash sources. The CoC encourages each region to create partnerships with employment agencies in their communities which is facilitated by the Regional Coordinator. Some of those partnerships include access to job postings, job fairs, and allowing employers to come to the agencies to help clients fill out applications. The CoC HMIS system tracks mainstream benefits and non-cash income and that information is accessible to KSHC staff to assess whether concentrated efforts are needed in particular regions. In addition, the CoC members partner with workforce centers, vocational rehabilitation (work trial), job coaching, paid job training and workforce development. KSHC is the organization responsible for overseeing the CoC's strategy to increase job and income growth from employment.

3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy) 05/31/2018

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

Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:**
- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and**
 - (2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.**

Total number of beds dedicated as DedicatedPLUS	27
Total number of beds dedicated to individuals and families experiencing chronic homelessness	91
Total	118

3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written standards for all CoC Program-funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing? Attachment Required. Yes

3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.

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

3B-2.2. Applicants must:

- (1) describe the CoC’s current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;**
 - (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and**
 - (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.**
- (limit 2,000 characters)**

In order to identify families with children and rehouse them within 30 days, the CoC uses the Coordinated Entry process during which each household is assessed utilizing the Vulnerability Index - Service Prioritization Decision Assistance Tool (VI-SPDAT). This process allows for families to be assessed at any of a number of sites trained in the assessment and for programs to identify families with children and prioritize and coordinate their rehousing, with the most vulnerable families receiving higher priority for housing on the priority list. The priority list is housed within the HMIS system (excluding DV programs) for easy access across the CoC and programs with openings refer to this list to fill program openings. Every region is provided with a list of Rapid Rehousing programs and those providers are required to attend all CoC Regional meetings to guarantee collaboration with other providers in the area. This collaboration ensures awareness of additional supportive services that families might also be referred to in the same geographic area that their housing opportunity is in. KSHC is the organization that is responsible for the CoC’s strategy and the Program Coordinator ensures regional participation across the Balance of State by engaging various partners as well as garnering feedback from stakeholders, all with a vested interest in rapidly rehousing families with children.

3B-2.3. 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 supportive 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 age, sex, gender, LGBT status, marital status, or disability when entering a shelter or housing.

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	<input type="checkbox"/>
CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	<input type="checkbox"/>

3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC’s strategy to address the unique needs of unaccompanied homeless youth includes the following:

Human trafficking and other forms of exploitation	Yes
LGBT youth homelessness	Yes

Exits from foster care into homelessness	Yes
Family reunification and community engagement	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs	Yes

3B-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.

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

3B-2.6. Applicants must describe the CoC's strategy to increase:
(1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and
(2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.
(limit 3,000 characters)

Strategies to increase housing and services for all youth are developed regionally based on need in that region as assessed by the Point-In-Time Count, AHAR data, APR data, as well as our 2018 BOS COC Needs Assessment. Participants in each region conduct outreach efforts aimed at including and increase youth service providers' participation in the CoC, both in regional meetings and in COC monthly meetings. The inclusion of youth service providers increases communication between providers already in contact with youth at risk or experiencing homelessness and persons providing shelter or housing opportunities that the youth might not have previously been aware of, more effectively using existing resources to serve youth. KSHC's strategic planning efforts include an intentional focus on advocacy efforts for housing and services for youth and bringing together youth leadership of Kansas to exchange information, best practices and to discuss collaborative funding. Agencies seek both HUD-funded and privately funded opportunities to implement Rapid Rehousing projects and other opportunities as appropriate, increasing the availability of housing and services for youth experiencing unsheltered homelessness.

3B-2.6a. Applicants must:
(1) provide evidence the CoC uses to measure both strategies in question

3B-2.6. 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 the strategies; and
(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC’s strategies.
(limit 3,000 characters)

The Coordinated Entry process has proven successful for adult populations and intentional assessment of youth to include them in the identification, assessment and prioritization process should result in comparable success. HUD has presented evidence that Housing First Approach is effective and maintains this as an effective method to ending youth homelessness. Rapid Rehousing allows a wide range of housing options and practices effective in the ending and preventing of homelessness. The CoC uses Point-In-Time data, Annual Homeless Assessment Report data and Annual Progress Report data to track and analyze youth homelessness and the CoC’s response to serving this population. These systems provide information regarding geographic concentrations of homeless youth, trends in service provision to homeless youth in existing programs, as well as information regarding the occurrence and location of unsheltered homeless youth during the Point-In-Time Count. The continuous and recurring nature of each of these reporting systems allows the COC to attempt to correlate the efforts described above with resulting increases or decreases in youth homelessness. The CoC has worked to establish quality data within the HMIS and other systems to ensure trustworthy information is returned. For this reason, the COC believes that these measures, along with any new HUD guidance, are the most appropriate way to measure the effectiveness of the CoC’s efforts.

3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:
(1) youth education providers;
(2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);
(3) school districts; and
(4) the formal partnerships with (1) through (3) above.
(limit 2,000 characters)

The CoC provides training and invites many different educational authorities and school districts to participate in the regional networks, including private and faith based schools as appropriate to the region. The CoC has a relationship with the State Coordinator for the Education of Children and Youth with the Kansas Department of Education (KSDE); they provide training, participate in CoC planning and disseminate information throughout the KSDE. All McKinney-Vento liaisons are given training and resources in order to serve any homeless children identified. The CoC encourages and fosters relationships between grantees and McKinney-Vento liaisons to bridge any gaps in services for homeless individuals and families. KSHC strategic planning will encompass additional strategies collaborate with youth education providers.

3B-2.7a. Applicants must describe the 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 COC provides regular opportunities for training by the State Coordinator for the Education of Children and Youth from the Kansas Department of Education through breakout sessions at the annual housing summit. Homeless service providers are trained on the educational rights of families who become homeless. The State Coordinator also provides advocacy for agencies and families in the event that an educational institution fails to fully recognize these rights. Each school district in the Balance of State is required to identify a Homeless Liaison who is also trained on the educational rights of the homeless families in their district. Homeless providers are encouraged to communicate with the liaison for their district as well as surrounding districts to ensure seamless services to families who become homeless in their area. A summary of the educational rights of students and families experiencing homelessness is available to every service provider and school district for public posting.

3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select “Yes” or “No”. Applicants must select “Yes” or “No”, from the list below, if the CoC has written formal agreements, MOU/MOA’s or partnerships with providers of early childhood services and support.

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

**3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).
(limit 2,000 characters)**

The CoC's Coordinated Entry process has enabled veterans to have multiple access and entry points to ensure identification, accessibility of services and referral to a veteran service or community provider. The CoC has a designated workgroup, Vets@Home, to assist in identifying veterans who are homeless/chronically homeless. Key stakeholders such as the Veteran’s

Administration (VA) and Supportive Services for Veteran Families (SSVF) programs help to serve on the workgroup and manage a By Name List/Master List (BNL/ML) for the CoC. The VA will confirm a veteran's status through appropriate documentation and provide documents to the provider or veteran outreach staff during the program entry assessment. The Veteran work group engages specialized veteran outreach staff who conduct VI-SPDAT assessments in all 101 counties in the CoC. This allows for veterans experiencing homelessness to be on the BNL/ML and have access to veteran and community resources within the CoC. The BNL/ML will allow the veteran and provider to identify appropriate resources and make referrals. The Vets@Home, SSVF and VA have distributed guidance throughout the CoC in an effort to enhance Coordinated Entry and to explain how homeless veterans can connect to other homeless veterans in sheltered and unsheltered settings for peer support through Veteran Navigators. Veteran Navigators are an integral part of the homeless services offered in the community and are funded by the SSVF-VA. Once on the BNL/ML a veteran may have access to a Veteran Navigator for assistance and referral to appropriate resources. Coordination of veteran services and referrals from the VA, HUD-VASH, SSVF, and Veteran Grant Per Diem (GPD) programs occur when providers participate in CoC meetings, BNL/ML coordination, PIT Count and other community events where veterans who are experiencing

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC? Yes

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness? Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach? Yes

3B-5. Racial Disparity. Applicants must: No
(1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;
(2) if the CoC conducted an assessment, attach a copy of the summary.

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

Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

- 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:**
- (1) assists persons experiencing homelessness with enrolling in health insurance; and**
 - (2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.**

Type of Health Care	Assist with Enrollment	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	Yes	Yes
Other: (limit 50 characters)		

- 4A-1a. Mainstream Benefits. Applicants must:**
- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;**
 - (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and**
 - (3) 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)**

All projects have case managers who are tasked with the responsibility of assisting homeless program participants in applying for and receiving mainstream benefits, health insurance and Medicaid. Several of the CoC and ESG projects have Certified SSDI/SSI Outreach, Access and Recovery (SOAR) representatives to assist program participants in accessing income and benefits. Department of Children and Families (DCF) representatives are invited to participate in Regional Homeless Coalitions that report to the CoC. The CoC has established a Mainstream Benefit Committee to provide current information on mainstream benefit and other resources available for homeless program participants, including Food Stamps, SSI, TANF, and substance abuse programs. This committee informs members and recommends strategies for

furthering access to mainstream benefits to project participants. It will also arrange for training at the regional meetings and the annual Housing Conference. Trained Targeted Case Management staff members immediately begin assisting individuals through the process of applying for, and securing mainstream benefits. CoC funding allows projects to maintain qualified and trained supportive services and employment staff that are adept at assisting individuals in applying for and securing benefits and/or paid work. The CoC works collaboratively with employment organizations, by referral and or direct supports, to link clients to appropriate resources. Projects work to assess employment strengths, needs, and secure supports to overcome barriers and challenges. These resources include; Vocational Rehabilitation, Ticket to Work, Assistive Technology of Kansas, and paid job training programs under a sub minimum wage certificate under section 14(c) of the Fair Labor Standards Act. KSHC staff oversee, lead and facilitate all CoC committees that work toward this measure.

4A-2.Housing First: Applicants must report:

- (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and**
- (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.**

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	18
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	14
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	78%

4A-3. Street Outreach. Applicants must:

- (1) describe the CoC’s outreach;**
- (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)**

The CoC partners with Projects for Assistance in Transition from Homelessness (PATH) program providers in our geographic area to lead Street Outreach (SO). PATH, CoC and ESG recipients coordinate with faith based agencies and other community programs to seek out and identify any individual or family who is experiencing homelessness. Outreach does not cover 100% of the geographic area. The CoC spans 101 counties, most rural and frontier, making 100% coverage very challenging. The regional SO teams work with law enforcement, libraries, park services staff (state & local) and others to assist in reaching those

in the most remote places of the CoC. SO is conducted regularly between 8-5 Monday through Friday with after hour services available as needed. Each region tailors the SO approach to meet the local need and all include: creating safe places for basic needs, relationship building, canvassing known areas and referrals through community partners (e.g. mental health centers, shelters, hospitals).

4A-4. Affirmative Outreach. Applicants must describe:

(1) the specific strategy the CoC implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status or disability; and

(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above. (limit 2,000 characters)

The CoC requested and received technical assistance to ensure that the CE policies meet Fair Housing requirements which ensure inclusion in housing and supportive services regardless of race, color, national origin, religion, sex, gender identity, sexual orientation, age, familial status, or disability. The CES will be well advertised, using KSHC and Partner websites, social media, fliers, jpegs, brochures and pamphlets to promote it across the CoC. All populations and subpopulations in the CoC’s geographic area, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the CES, regardless of the location or method by which they access the system. Recipients of federal funds must provide auxiliary aids and services necessary to ensure effective communication including information that is provided in appropriate accessible formats as needed, e.g., Braille, audio, large type, assistive listening devices, and sign language interpreters. Access points must be accessible to individuals with disabilities, including accessible physical locations for individuals who use wheelchairs, as well as people in the CoC who are least likely to access homeless assistance. The CoC will provide appropriate auxiliary aids and services necessary for effective communication, which includes ensuring that information is provided in appropriate accessible formats as needed. Access Points may utilize services through the Kansas Relay Center for hearing and/or speech impaired individuals by calling (800) 766-3777. The CES will take reasonable steps to ensure that Access Points can be accessed by persons with Limited English Proficiency (LEP). Language Line may be utilized by Access Points to communicate with non-English speaking individuals when a translator is not present and/or available.

4A-5. RRH Beds as Reported in the 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 2017 and 2018.

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	304	364	60

4A-6. Rehabilitation or New Construction Costs. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4A-7. Homeless under Other Federal Statutes. Is the CoC 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? No