

Form Name: IA-BOS CoC Renewal Application
Submission Time: June 7, 2019 8:27 am
Browser: Chrome 74.0.3729.169 / Windows
IP Address: 192.119.224.62
Unique ID: 510746123
Location: 40.78150177002, -89.92259979248

2019 Iowa Balance of State (IA-501) Continuum of Care (CoC) Grantee Renewal Application

APPLICANT NAME AND INFORMATION

Organization Name: Humility of Mary Shelter, Inc.

Renewal Project Name: RRH

Project Name(s) as appearing in HMIS/DVIMS: HHSI - CoC Rapid Rehousing (RRH) (1416)

Grant Identifier: IA0098

Project Type: Rapid Rehousing (RRH)

Projected number of clients to be served in renewal grant period: 20

Anticipated Renewal Amount: 231089.00

Verify current registration in federal System for Award Management: Yes

DUNS #: 828271325

Counties Served by Project: Muscatine County; Scott County

Address of Administrative Office: 3805 Mississippi Ave
Davenport, IA 52807

Primary Contact Name: Ryan Bobst

Primary Contact Phone: (563) 326-1330

Primary Contact Email: r.bobst@humilityhomes.org

Secondary Contact Name: Ashley Velez

Secondary Contact Phone: (563) 326-1330

Secondary Contact Email: a.velez@humilityhomes.org

THRESHOLD ASSURANCES

Having too little or no income: NOT a Barrier

Having a criminal record with exceptions for state, and/or federal restrictions: NOT a Barrier

Fleeing domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement): NOT a Barrier

Having (or not having) a previous address within Iowa: NOT a Barrier

Failure to comply with HUD's 2016 Gender Identity Rule: NOT a Barrier
(<https://www.hudexchange.info/resource/1991/equal-access-to-housing-final-rule/>)

Failure to comply with Non-Discrimination and Equal Opportunity Requirements including assuring non-discrimination on the basis of age, race, creed, color, national origin, religion, sex/gender, sexual orientation, gender identity, and familial status and disability. NOT a Barrier

Attach project Policies & Procedures to verify barrier statuses selected above: https://s3.amazonaws.com/files.formstack.com/uploads/3367170/74759947/510746123/74759947_0._barrier_policies_and_procedures.pdf

CONTINUUM OF CARE PARTICIPATION

1. a. What percentage of your clients served do you feel were referred through coordinated entry? Explain your response. 0 referrals occurred during this grant period because coordinated entry was not yet live. Coordinated entry went 'live' in our region January 2, 2019. From January 2, 2019 to present, 100% of referrals have been through coordinated entry.

1. b. Describe timeline/progress of Coordinated Entry in your region. Explain your project's participation in Coordinated Entry and the steps taken to support the Coordinated Entry process in the project's region.

Coordinated entry went 'live' in our region January 2, 2019. Since that time, HHSI has had representation at each weekly pull meeting. Pull meetings have occurred every Thursday since January 2, 2019 at the lead agency - The Salvation Army's office on 100 Kirkwood Blvd, Davenport, IA. Construction has temporarily relocated the meetings to The Center 1411 Brady Street, Davenport, IA. As the largest provider of Rapid Rehousing in our region, we've been leading the dialogue on best practices and assisted in facilitating the development and implementation of coordinated entry. HHSI has invited the lead agency to come on-site and provide physical office space in our emergency shelter. HHSI partnered with the lead agency in conducting a training on defining and documenting people experiencing homelessness on April 10, 2019 in order educate our community and help participants access coordinated entry more quickly and efficiently.

2. Since January 2018, have representatives of your project attended at least three bimonthly meetings of the Iowa Council on Homelessness? Note that anyone can participate in Council meetings even if not a voting member. Posted meeting minutes must be available to verify attendance.

January 19, 2018 - Cassy Gripp, Cathy Jordan, Christie Adamson, Jasmin Campbell, Jennifer Lynch; March 20, 2018 - Cassy Gripp, Cathy Jordan, Emily Harvey; May 18, 2018 - Cassy Gripp, Cathy Jordan, Jennifer Lynch; July 20, 2018 - Cassy Gripp; September 21, 2018 - Cassy Gripp; November 16, 2018 - Ryan Bobst, Cassy Gripp; January 18, 2019 - Cassy Gripp; April 4, 2019 - Ryan Bobst; 5/17/19 - Ryan Bobst, Ashley Velez

3. a. Describe professional development opportunities (conferences, meeting, trainings, webinars, etc.) related to Homelessness in which representatives of your project have participated within the last 12 months.

The Leadership Academy on Ending Homelessness hosted by OrgCode - Christie Adamson, Wes Frenell. October 23-25, 2018. Roanoke, WV. HUD Peer-to-Peer conference. Wes Frenell, Christie Adamson. June 13-14, 2018, Des Moines, IA. Housing Iowa Conference. Cassie Gripp, Sandy Dimmer. September 5-7, 2018. Des Moines, IA. LEAP (Landlord Education Assistance Program) - City of Davenport, law enforcement and property managers. April 18, 2019. Amie Pake; Amy Allison, Jo Vasquez

3. b. From the mentioned above, list the top three (3) most useful experiences and describe how your project implemented information gained from them?

First, the Leadership Academy on Ending Homelessness was useful in that it focused on data-driven decision-making. HHSI staff networked with providers across North America running similar programs and learned best practices from them, including coordinated entry, RRH program management, and trouble-shooting difficult tenants. Second, LEAP was useful to understanding policies specifically to the City of Davenport and how tenants can protect themselves and how HHSI can be educated and advocate for tenants. Third, HUD Peer-to-Peer was useful for information about Housing First, peer support, and human trafficking. Since the training, HHSI has engaged Braking Traffik, an anti-human trafficking program in Davenport, IA, for all staff training and implementing new safety-planning for participants at-risk of trafficking. Additionally, HHSI is developing a new participant advisory board that will assist in decision-making and policy development to enhance HHSI's delivery of services.

4. a. In the past year, describe your agency's activities/engagement/involvement with one or more local Public Housing Authorities (PHAs) about implementing a homeless admission preference in their written policies for the Housing Choice Voucher (Section 8) or Public Housing programs:

HHSI staff met with Office of Assisted Housing through the City of Davenport on July 25, 2018, March 6, 2019, and April 10, 2019 to discuss homeless preference in voucher and public housing programs. Maintaining a standing relationship and dialogue with our local housing authority is imperative to continued advocacy efforts for people experiencing homelessness. Office of Assisted Housing staff came to training on how to document homelessness on April 10, 2019. Communications have focused on building and strengthening relationships and stressing the importance for these individuals to have admission preference in written policies for voucher and housing programs.

4. a. Please attach documentation to verify, such as an email chain or meeting notes.

https://s3.amazonaws.com/files.formstack.com/uploads/3367170/74770101/510746123/74770101_4a._emails_submitted.pdf

4. b. In the past year, describe your agency's activities/engagement/involvement with local affordable housing providers (e.g. multifamily assisted housing owners, PHAs, Low Income Housing Tax Credit developments, or local low-income housing programs) about implementing a Move On strategy (Informational resource: <https://www.csh.org/wp-content/uploads/2016/07/Moving-On-Chapter-6-Final.pdf>):

The Scott County Housing Council (SCHC) has initiated two community working groups to address the affordable housing shortage in the greater Quad Cities area. One working group is short-term, with the goal of eliminating the need for a winter emergency shelter within 5 years in our community. The long-term working group is tasked with visioning a permanent solution. These working groups began meeting in January, 2019. The groups are still in an education phase where community partners review relevant data and research. HHSI has shared the Home, Together national strategic plan to end homelessness, as well as a webinar on Aligning Affordable Housing with Efforts to End Homelessness. HHSI has also shared resources on Moving On, a toolkit produced by the Corporation for Supportive Housing, as a potential strategy to discuss. These resources have been shared with Leslie Kilgannon of SCHC, and the facilitator of the long-term working group, Ashley Odom, of Family Resources.

<p>4. b. Please attach documentation to verify, such as an email chain or meeting notes.</p>	<p>https://s3.amazonaws.com/files.formstack.com/uploads/3367170/74770192/510746123/74770192_4b._emails_submitted.pdf</p>
<p>5. In the past year, to what extent has your agency taken steps locally to educate communities on the issues of homelessness: (e.g. decriminalization of homelessness engaging local policymakers, law enforcement, or business leaders; implementing community plan)?</p>	<p>From June 2018 to December 2018 HHSI convened six focus groups with 98 people to inspire multi-sector solutions to homelessness. Results from the focus groups can be found on https://www.humilityhomes.org/qchousingsolutions. On November 2, 2018, HHSI was asked by King's Harvest to manage their winter emergency shelter set to open December 1, 2018. HHSI convened a meeting on November 6, 2018 of community partners, including the Mayor of Davenport, the Downtown Davenport Partnership, Scott County Community Services, The Salvation Army, The Center, 180, Café on Vine, Family Resources, and Bethany for Children and Families. These funders supported a community plan: United Way of the Quad Cities Area, QC Community Foundation, Scott County Community Services, Downtown Davenport Partnership, Build 2 Suit, and the Scott County Housing Council. HHSI implemented a plan developed by the community and operated the shelter from December 1, 2018 to April 18, 2019 and served 386 unique people.</p>
<p>6. In the past year, to what extent has your agency taken steps locally to prevent the discharge of persons from local systems of care (foster care, health care, mental health care, correctional facilities) into homelessness?</p>	<p>HHSI has 24 hour coordination with the Genesis Health Systems Behavioral Health Unit and the Davenport Police Department to ensure eligible persons being discharged can be placed at the shelter. This partnership enables HHSI staff to either quickly connect individuals to housing, or provide referrals to appropriate placement upon discharge. Community Outreach meetings facilitated by Community Health Care, and now coordinated entry referrals, allow individuals from local systems of care to quickly access housing supports. HHSI staff go into local jails and conduct outreach to currently incarcerated individuals who will be released soon, in order to establish a housing plan.</p>
<p>7. a. Did your agency participate in the street (unsheltered) count in counties served by your project and how?</p>	<p>Yes, HHSI had 10 staff participate in the PIT street count. HHSI staff split into three teams and drove and walked to various areas in the community in order to count people that were unsheltered.</p>
<p>7. b. Did your agency submit the PIT/HIC information for your projects by the set submission deadline? If not, why?</p>	<p>The following projects were submitted on time: HHSI - CoC Rapid Rehousing, HHSI - Housing First (HUD V), HHSI - VA GPD SITH for Families, HHSI - VA GPD Low Demand, HHSI - VA GPD SITH, HHSI - PSH for CH (HUD VI), HHI - VALOR SSVF Rapid Rehousing, HHSI - Rent it Forward SRO (OPH), HHSI - Transitional Housing, and HHSI - Non-HUD PSH. The following programs were submitted on 2/25/19: HHSI - Permanent Supportive Housing, and HHSI - Winter Shelter. The reason these two programs were submitted past the deadline is because Winter Shelter was the first program year and data collection was difficult with newly trained staff. ICA was consulted several times on Winter Shelter. HHSI - Permanent Supportive Housing was not submitted on time because of staff turnover in two key positions. Data quality was exceptional.</p>

8. List at least one representative of your project participate in the April 2019 Annual Meeting of Iowa Balance of State CoC Grantees. Describe any special participation your agency performed in regards to the meeting.	Ashley Velez, Executive Director and Ryan Bobst, Grants Manager attended the April 2019 Annual Meeting of Iowa Balance of State CoC Grantees. Christie Adamson, Assistant Director, participated on the committee for updating the appeals procedure. Cassy Gripp was on the planning committee for the annual meeting until she left the organization in February, 2019.
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PROJECT MANAGEMENT

9. a. Has this project completed it's first grant full grant cycle? (i.e. 1st year renewal with end date after application date?)	Yes
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9. b. Project grant year end-date completed:	Dec 31, 2018
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9. c. Grant amount:	218849.00
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9. d. Total funds expended:	218849.00
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9. e. Funds remaining (unexpended funds):	0.00
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9. f. Unexpended funds % (unexpended funds/grant amount):	0.00
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APR Sage Submission Requirement (days)	90
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APR Deadline in SAGE:	Mar 31, 2019
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10. a. Date APR submitted to HUD in SAGE:	Feb 14, 2019
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10. b. Did your project meet the 90-day requirement?	Yes
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11. a. Has HUD monitored the project within the past two years?	No
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12. a. Failure to participate in supportive services and/or failure to make progress on a service plan:	No
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12. b. Loss of income or failure to improve income:	No
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12. c. Active substance abuse:	No
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<p>12. d. Any other activity not covered in a lease agreement typically found in the project's geographic area:</p>	<p>No</p>
<p>12. e. Ensure that every effort is made to help participants transition to other housing options when continuation in this project is jeopardized or about to expire?</p>	<p>Yes</p>
<p>12. f. Attach the project's written termination policy. The effective date must be evident on the policy.</p>	<p>https://s3.amazonaws.com/files.formstack.com/uploads/3367170/74776944/510746123/74776944_12f._hhsi_termination_and_appeal_procedures.pdf</p>
<p>13. a. Transportation assistance is provided to clients to attend mainstream benefit appointments, employment training, or jobs.</p>	<p>True</p>
<p>13. b. At least semi-annual follow-ups are attempted with participants after project exit to ensure that mainstream benefits are received and renewed (and for RRH projects, to verify that housing stability is maintained) for a period of X years.</p>	<p>True</p>
<p>13. c. Annual interim reviews with current clients are being completed with 30 days of anniversary date to check on client well-being and update all relevant data including: income, disability status, health care, etc.</p>	<p>True</p>
<p>13. d. Project participants have access to SSI/SSDI technical assistance provided by the applicant, a sub-recipient, or partner agency.</p>	<p>True</p>
<p>14. Did the number of clients served by your project achieve or exceed your estimated levels of service when you last applied/renewed this grant? Explain, success/difficulties.</p>	<p>HHSI served 80 households rather than 20 households because HHSI operates an emergency shelter with a demonstrated need in the community to quickly connect households with housing. Coordinated entry has increased referrals as well. HHSI hired staff quickly, which enabled caseloads to grow more rapidly. Resources from OrgCode on high performing service coordinators provided framework for implementing best practices. HHSI has previously operated rapid rehousing through an SSVF grant. This existing funding stream allowed HHSI to connect with existing landlord partnerships, which allowed for quick entry and community buy-in for this Rapid Rehousing project.</p>

PROJECT PERFORMANCE/EVALUATION

Attach "2019 BOS CoC Renewal Application Report" from HMIS/DVIMS

https://s3.amazonaws.com/files.formstack.com/uploads/3367170/74778606/510746123/74778606_2019_bos_coc_renewal_application_report_-_rrh.pdf

18. RRH/PSH: Was program average time to permanent housing under 30 days?

There is a significant lack of affordable housing available in Scott County, IA. This fact contributes to the difficulty in placing participants into permanent housing in a timely manner. Since 2010, Scott County has lost more than 45% of their affordable units rented at \$500 and below (ACS Estimate, B25063 Gross Rent). In addition, according to the National Low Income Housing Coalition in 2015, there was a deficit of affordable and available rental units of 3,680. With this much demand and this much lack of availability, it is difficult to place participants into permanent housing in our community within 30 days. We are working with a community coalition that formed in January, 2019 as an effort to address the long-term needs of our community related to affordable housing.

21. RRH: Percentage of all adult participants who increased total income from entry to exit?

4 participants exited the program without telling anyone and disappeared. 2 participants went to jail for longer than 90 days. 1 participant went to a half-way house for substance use treatment. 2 participants died while in the program. These precluded an increase to income for leavers.

BONUS QUESTION

***Bonus - Describe any specific services provided by your project specifically for youth/mental health/substance abuse:**

HHSI staff provide street outreach for the Quad City Harm Reduction program. This program provides outreach and supports to individuals experiencing substance abuse. In addition, all staff are trained in the use of naloxone to prevent overdoses. HHSI secures grants for flexible funds for youth, in order to address school, social and community engagement opportunities. Grant funds are also secured for adult flexible funds to pay for copayments and medications for mental health and substance abuse treatments. Transportation is provided to participants to attend mental health and substance abuse appointments. HHSI staff perform mental health commitments when a participant is in need of a safe environment. HHSI also provides office space for Integrated Health Homes through Robert Young Community Mental Health Center and Vera French Community Mental Health Center to quickly connect participants to mental health services.
