2022 Review and Ranking Criteria Tool - Continuum of Care Applications

**Agency Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Points \_\_\_\_\_**

**All Agencies MUST adhere to these Pre-requisites before applying for renewal or new projects:**

* MUST serve Category 1 Homeless population
* MUST be Housing First
* MUST receive referrals from Central Intake
* MUST input data into HMIS
* MUST serve one of these populations: Chronically Homeless, Youth, Veterans, Households with Children

|  |  |
| --- | --- |
| **Application Review** | **Score:** |
| **A. HMIS DQR Data**: HUD has been emphasizing that data quality has critical importance. New project-level HUD SCCoC APRs have data quality sections embedded, and in addition to that, SCCoC’s are now required to submit system-level HUD Data Quality Reports once a year. The following sections are what you will be scored on:* + - 1. Q.2. Personally Identifiable Information

 * + - 1. Q.3. Universal Data Elements
			2. Q.4 Income and Housing Data Quality

 * + - 1. Q.5. Chronic Homelessness
			2. Q.6 Timeliness

**Section 1-4) 2pts. =** if error rate is 0%-2% **1 pt. =** if error rate is 3-5% **0 pts. =** if error rate is over 5%**Section 5)** **2 pts. =** 98% or <  **0 pts. =** 97.9% or >**SOURCE: HMIS Data Quality Reports \* PSH Projects with “Historic Data” will be given an additional 2 points (up to the total of 10 points) during scoring.****DV Providers are scored using the same data quality metrics and they utilize osmium (comparable database) to collect data on DV clients.** | **10 Point section, each item is worth 2 points.** **Sections 1-4 will look at the error rate for each item, some sections may require taking an average of the total items.** **Section 5 will look at the count of entry records, you will add 0 days + 1-3 days and divide by the total count of entry records.****How Scores are calculated****Points will be scored monthly. After all monthly scores have been finalized, we will take an average of the monthly scores. That average score is what will be applied to the ranking and review scoresheet.**  |
| **B. Unit Utilization:** PIT Actual Unit Utilization on last Wednesday of every Month**.** **SOURCE: APR (Q.02 average of 4 months)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients.** | **10 pts.** =above 95% **8 pts.** =90% - 94.9% **6 pts.** =85% - 89.9% **4 pts.** =81% - 84.9% **2 pts.** = 76% - 80.9% **0 pts.** = Below 76% |
| **C. Exit Destination:** Indicator- Exits to or Retention of Permanent Housing**Calculation for PH:** Number of participants who had a positive PH exit destination / total number of participants who exited the program**SOURCE: (Q23c) (Calculation Provided)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | ***Permanent Supportive Housing Programs Only:*** **15 pts. =** 90% or more of all participants in PH projects **10 pts. =** 89.9% to 80% of all participants in PH projects  **0 pts. =** below 80 % of all participants in PH projects **NO EXITS = 15 pts*****Transitional Housing & RRH Programs Only:*****15 pts. =** 90% or more participants who left TH/RRH moved to PH **10 pts. =** 89.9% to 80% participants who left TH/RRH moved to PH  **0 pts. =** below 80% of participants who left TH/RRH moved to PH |
| **D. Cash Benefits: Government Assistance, earned income from employment, and/or other cash income (maintained or increased) (adult leavers only)** % Participants with 1+ source of cash benefits at exit**SOURCE: APR (Q.19a2)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **5 pts.** = 30% or higher maintained or increased cash benefits |
| **E. Non-Cash Benefits:** **Mainstream Resources (maintained or increased) (adult leavers only)** % Participants with 1+ source of non-cash benefits at latest status or exit**SOURCE: APR (Q.20b)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **5 pts.** = 70% or higher non-cash benefits at exit**0 pts.** = 69% or lower non-cash benefits at exit |
| **F. Health Insurance Benefits:** **Health Insurance (maintained or increased) (All leavers)** % Participants with 1 or more source of health insurance at latest status or exit**SOURCE: APR (Q.05a, Q21)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **5 pts.** = 70% or higher health ins benefits at exit**0 pts.** = 69% or lower health ins benefits at exit |
| **G. Meeting Attendance:** Level of involvement inContinuum/Coalition committees and programming **SOURCE: SCCoC meeting log (SCCoC MATRIX & Spreadsheet)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **10 pts.** =Attended more than 90% of meetings **0 pts.** = Attended less than 90% of meetings |
| **H. Timeliness of Document Submission:** Requested documents are expected to be submitted in a timely fashion. Each document is worth 5 points and will be deducted for late submission.**SOURCE: Annual Packet & Spreadsheet** **DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **6 pts.** = Total Possible Points **2pts.** = Audits/Monitoring Letters **2 pts.** = Budget/LOI/Pre-App **2 pts.** = Contact/Conflict/ Confidentiality/SIGNED Proxy |
| **I. Project uses Housing First practices****SOURCE: (Central Intake Tool)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **10 pts.** = Yes **0 pts.** = No |
| **J. FY 2019-2020 Unspent Funds** – less than 15% of unspent funds. Excludes S+C, Rental assistance, and New Agencies until one full grant cycle is complete.**SOURCE: HUD and APR (Q.28)** **DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **5 pts.** = No**0 pts.** = Yes |
| **K. FY 2020-2021 Unspent Funds** – less than 15% of unspent funds. Excludes S+C, Rental assistance, and New Agencies until one full grant cycle is complete.**SOURCE: HUD and APR (Q.28)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **5 pts.** = No**0 pts.** = Yes |
| **L. Length of Stay** – average length of stay (Leavers Only)**SOURCE: (Q.22b)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | ***Rapid Re-Housing Programs Only:*****5 pts.** =6 months or fewer **3 pts.** =7 months - 9 months**1 pt.** = 10 months - 12 months**0 pts.** = 13 months or greater ***Permanent Supportive Housing Programs Only:*****5 pts.** = 13 months or greater**3 pts.** = 10 months - 12 months**1 pt.** = 7 months - 9 months**0 pts.** = 6 months or fewer***Youth Housing Programs Only:*****5 pts.** =0 months – 12 months **3 pts.** =13 months - 17 months **1 pt.** = 18 months - 23 months **0 pts.** = 24 months or greater***TH/RRH Programs Only:*****5 pts.** =6 months or fewer**3 pts.** =7 months - 9 months**1 pt.** = 10 months - 12 months**0 pts.** = 13 months or greater |
| **M. Cost Effectiveness** – Annual cost per exit to or retained in Permanent Housing (total project cost excluding admin/total participants served who exited to PH or retained PH)**SOURCE: (Q.05a, Q.28)** **DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | ***Cost per Exit or Retention to PH:*****5 pts.** = less than or equal to $6,000**2 pts.** = $6,001 – $10,000**0 pts.** = greater than or equal to$10,001 |
| **N. Recidivism** – The number of program participants who exited from PH and returned to homelessness in a 24-month period.**SOURCE: System Performance Measures 2 (HMIS Report)****DV Providers are scored using the same metrics and they utilize osmium (comparable database) to collect data on DV clients and complete a APR.** | **5 pts.** = 5% Or less returns tohomelessness **2 pts.** = 5%-8% Returns tohomelessness**0 pts.** = 8% Or higher returns toHomelessness |
| **O. Racial Equity Assessment**– In 2022 Racial Equity assessment was conducted by all partner agencies to assess the organization’s need for and capacity to incorporate a racial equity lens into the planning, decision making and overall management of its work and the organization itself.**SOURCE: FY22 Racial Equity Assessment Tool**  | **10 pts. =** Completed a racial equity assessment. |

 **TOTAL SCORE: \_\_\_\_\_/111**

|  |  |
| --- | --- |
| **Additional Racial Equity Factors** – In 2023 Racial Equity will be scored on a two-part scale: Agency, Leadership, Governance, and Policies and Program Participant Outcomes | ***Agency, Leadership, Governance, and Policies*****Pts. TBD** = Representation of individuals (BIPOC, LGBTQ+, etc.) in managerial and leadership positions**Pts. TBD** = Board of Directors includes representation from more than one person with lived experience**Pts. TBD** = Relational process for receiving and incorporating feedback from person with lived experience**Pts. TBD** = Reviewed internal policies and procedures with an equity lens and has a plan for developing and implementing equitable policies that do not impose undue barriers***Program Participation Outcomes*****Pts. TBD** = Reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age**Pts. TBD** = Identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes**Pts. TBD** = Working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and/or age |