



FY2018 HUD COC PROGRAM COMPETITION RENEWAL PROJECT APPLICATION

AGENCY PROFILE	
Legal Name of Agency	Community Rebuilders
Project Name	Community Rebuilders – Kent/Grand Rapids – Housing Solutions
Project Start Date	November 1 st , 2019
Contact Person	Anna Diaz
Title	Chief Operating Officer
Address	1120 Monroe Ave NW Ste 220, Grand Rapids, MI 49503
Email	adiaz@communityrebuilders.org
Phone	616-458-5102

Check one:

- ☒ Permanent Supportive Housing
- ☐ Rapid Re-Housing
- ☐ Transitional Housing
- ☐ Joint Transitional Housing / Rapid Re-Housing

Renewal Application Option (check one):

- ☒ Standard Renewal (no change from FY17)
- ☐ Consolidation (must complete Renewal applications for each project and New Project Application for consolidated project)
- ☐ Expansion (must complete New Project Application in addition)

Authorized Representative: *I hereby certify that the information contained in this proposal is true and accurate. Any falsification of information will render the application void, and the application will not be accepted. This application has been reviewed and authorized for submission by the agency's board of directors as of the date indicated.*

Name: Anna Diaz	Title: Chief Operating Officer
Date of Board/Local Planning Body Authorization:	8/2/2018
Date of Anticipated Board/Local Planning Body Authorization:	

All projects requesting renewal must demonstrate they have met minimum project eligibility, capacity, timeliness, and performance standards to be considered for funding.

GENERAL PROJECT INFORMATION

1a. Provide a narrative describing how the project's performance met the plans and goals established in the current project's application, the project's performance in assisting program participants to achieve and maintain independent living, and record of success. (Include target populations and preferences as specified and/or allowed by the Notice of Funding Availability (NOFA) under which the project was initially funded.) If the renewing project has not yet started, provide a narrative of anticipated performance in these same areas based on experience with other related projects. (1000 word limit)

Housing Solutions serves chronically homeless households who HUD identifies as the hardest to serve individuals facing the greatest barriers to obtaining and maintaining long-term permanent housing. Consumers who enter this project must have a permanent disability of long and continued duration. In addition, they must have been continuously homeless for a year or more, or had four or more episodes of homelessness within 3 years. Most enter the program after living on the streets and other places unfit for human habitation. The coordinated entry system is used to ensure the most vulnerable chronically homeless households are prioritized for project entrance. The model of this project relies on the belief that people experiencing homelessness have the right to self-determination and should be treated with dignity and respect and as such the housing and services provided depend on the needs and preferences of each household served. This is a housing first project which means it is equipped to house participants who may have multiple barriers to obtaining housing in the private rental market and must not have any preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. The success of this program is evidenced by the housing stability obtained by program participants and its ability to prevent returns to homelessness by its participants. Through the strengths-based housing-first model we ensure that this most vulnerable population receives the most cost-effective intervention by immediately linking the participant to stable housing of their choice within the private rental market. Therefore, Housing is integrated allowing participants the opportunity to interact with neighbors who do not have disabilities similar to theirs. Housing resource specialist work with each participant to identify rental housing in the community that will meet their needs. Participants particularly appreciate the opportunity to select from among available housing units in our community to ensure they choose a unit that is convenient for their needs and near transportation and other amenities they desire. As a HUD requirement all consumers in this project must contribute 30% of their adjusted income towards rent. This requires consumers to make regular timely payments to their landlord with the project providing rental assistance to cover the remaining rent cost. Participants must maintain their housing and abide by a standard lease agreement. Participants in the project have full rights, responsibilities, and legal protections as leaseholders. Housing Resource specialist are essential to informing participants

and encouraging them to exercise their full legal rights and responsibilities as a tenant. Often education, mediation and communication with landlord is required to ensure all follow their legally defined roles and obligations. Housing Resource Specialist monitor and support the consumer in meeting these requirements and provides support and advocacy to prevent and mediate problem situations that may arise. Housing is not time-limited, and the lease is renewable at tenants' and owners' option. This project fulfills the ultimate goal of the Housing First Approach to help people experiencing homelessness achieve long-term housing stability in permanent housing. The project exceeded its permanent housing measure by 10%, with 95% of households remaining in the program or exiting to permanent housing. Providing housing stability is key but helping participants increase and stabilize their income is also a primary goal of this project. Housing Resource Specialist staff work with consumers to gain or increase income by accessing benefits or working to increase earned income when a consumer's health may allow them to work. Often participants have not been linked to entitlement benefits when they enter the program. Immediately upon entry needs and resources are assessed and an individualized goal and action plan is established. Community Rebuilders also links participants who may qualify for SOAR program to a Soar trained staff who can assist with Supplemental Security Income/Social Security Disability Income, Outreach Access and Recovery. This model has been proven to reduce the length of time eligible people with disability must wait before receiving supplemental security income. Additionally, supportive services are flexible and voluntary for consumers. The flexibility of support services offered improves residential stability by allowing tenants to remain housed in the same home as their service needs change. This flexibility stands in sharp contrast to programs that require participants to live in a particular unit in order to qualify for mental health or other services. The goal of the supportive services provided are to increase overall health and wellbeing, increase access to mainstream benefits and resources and increase long-term housing stability. Strengths Based Housing Resource Specialists provide on-going individualized support services by building partnerships and maximizing the strengths within each consumer to achieve their desired goals. The Life Domain Rating Scale is a tool used to measure the improvement in health and well-being and self-sufficiency of program households so that the effectiveness of the PSH program can be viewed and evaluated through the consumer's perspective. 100% of program participants reported an increase in at least one life domain as a result of program participation. The result of confidential feedback surveys evidence that 98% of participants served are very satisfied with the Housing Resource Specialist services they receive. Community Rebuilders is also aware of the potential for racial disparity amongst service deliverers and continually monitors demographics to ensure that we serve all groups fairly and equitably. In 2016-17, Housing Solutions served the following demographics: 64% Black or African American, 30% White, 5% Two or more races, 5% Hispanic. Feedback surveys from participants indicate high levels of satisfaction with services provided. Some of the comments received from consumers include, "Words can barely describe the feeling of having a place to call home," "I can save money now," "Community Rebuilders made it so I didn't feel like I was alone," "Just about every aspect of my life is better now."

1b. Use the last completed grant year APR for this and all other data/outcome measure questions. If the renewing project has not yet started, indicate the planned number of units per county.*

County	Number of Units	Number of Stayers	Number of Leavers
Kent County	61	53	8
Click or tap here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click or tap here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click or tap here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click or tap here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

*Attach additional forms as needed to list all counties.

2. Has the project had any significant changes since the last funding approval?

No If "yes", complete the chart below to indicate the change.

Check change type		Previous	New
<input type="checkbox"/>	Decrease in the number of persons served		
<input type="checkbox"/>	Change in number of units		
<input type="checkbox"/>	Change in project site location		
<input type="checkbox"/>	Change in target population		
<input type="checkbox"/>	Change in component type		
<input type="checkbox"/>	Change in grantee/applicant		
<input type="checkbox"/>	Line item or cost category budget changes more than 10%		
<input type="checkbox"/>	Other: Click here to enter text.		

If change was made, include as many of the following that apply as attachments to your application:

Attached (check)	
<input type="checkbox"/>	Attachment: Written communication to HUD requesting the significant change
<input type="checkbox"/>	Attachment: HUD's written approval of the change requested
<input type="checkbox"/>	N/A: HUD has not yet provided written approval of the requested change

SECTION II: Project Effectiveness

3. Does the project serve priority populations (Veterans, Chronically Homeless, Families, Youth, Domestic Violence Survivors)? Enter the number of units dedicated or prioritized for each population at turnover.

	Number of Units		
	Dedicated	Dedicated Plus	Prioritized
Veterans	Click here to enter text.	Click here to enter text.	Click here to enter text.
Chronically Homeless	25	Click here to enter text.	Click here to enter text.
Families	Click here to enter text.	Click here to enter text.	Click here to enter text.
Youth	Click here to enter text.	Click here to enter text.	Click here to enter text.
Domestic Violence	Click here to enter text.	Click here to enter text.	Click here to enter text.

4. Low Barrier

To earn points as Low Barrier, the project must answer affirmatively to all the following questions.

Does the project ensure that participants are NOT screened out (or denied project entry) due to the following:	
Having too little or not enough income	Yes
Active substance use or history of substance abuse	Yes
Having a criminal record (other than for state-mandated restrictions)	Yes
Domestic violence (requiring survivor to take specific actions or demonstrate distance from assailant)	Yes

5. Housing First

In addition to the answers above, a project must also answer affirmatively to the following questions to qualify as Housing First.

Does the project work to ensure that participants are NOT terminated from the program due to the following: (Table Continues on Following Page)	
Failure to participate in supportive services	Yes
Failure to make progress on a service plan	Yes
Loss of income or failure to improve income	Yes
Being a victim of domestic violence	Yes
Any other activity not typically covered in a lease agreement but found in the project's geographic area.	Yes
Does the project quickly move participants into permanent housing?	Yes

6. All recipients of HUD CoC Program funding are required to participate in Coordinated Entry. Did the project take 100% of all referrals from Coordinated Entry (or community process if Category 4 homeless) in the past grant year *or* will it once the grant year begins? (Verified by HMIS reports) Yes

7. What is the prioritization process for households referred to this project? How is it determined who is most vulnerable and the best fit for any referrals to this project? Provide detail from policy established by the Local Planning Body. (500 word limit)

We utilize the HUD PSH Prioritization Policy that our CoC adopted. Project eligibility is submitted to The Salvation Army's Housing Assessment Program (HAP) and HAP assesses and refers to the program. A

standardized assessment tool is used by HAP (VI-SPDAT) to assess for vulnerability as well as assessing for length of time homeless.

Efficient Use of Funding *(If the renewing project has not completed a full year, share information from the last completed year of another HUD funded project or similarly designed project through this agency)*

8. What was the project's utilization rate? *(Average of Quarterly Point- in-Time Counts in APR 9 divided by total contracted units.)* 90%

9. Expenditure of Funds: Use last completed HUD FY year.

a. Total amount authorized within eLOCCS	\$ 528,547.00
b. Remaining balance in eLOCCS	0
c. Percentage recaptured Divide answer b. by answer a. and multiply by 100	0

10. Were drawdowns made to eLOCCS at least quarterly? *(Demonstrated in eLOCCS attachment)*

Yes

HMIS Participation *(If the renewing project has not completed a full year, share information from the last completed year of another HUD funded project or similarly designed project through this agency)*

11. Indicate how many APR Data Quality Elements (DQE) have 5% or less null or missing values *(APR Q06; use data from alternative system if DV program):*

Data Quality Element APR 6a.-6d.			
Number of elements with 5% or less null or missing values			
DQE 6a.	DQE 6b.	DQE 6c.	DQE 6d.
6	5	4	3
Total the numbers above, divide by 16, multiply by 100 for a percent: 100%			

HUD Monitoring

12. a. Does the recipient have any HUD monitoring findings in any of the agency's projects? **No**

If yes, explain below findings in detail for the Funding Review Panel. Include details on the nature of the finding, resolution and corrective actions taken, if any.

[Click here to enter text.](#)

b. Has your organization been monitored by HUD in the past three (3) years? **No**

If yes, include as attachments: Monitoring report from HUD, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

If no, provide most recent monitoring by an entity other than HUD for federal or state funding (ESG, CDBG, etc) and include as attachments: Monitoring report, your organization's response to any findings, documentation from entity that finding or concern has been satisfied, and any other relevant documentation.

Impact on Homelessness

13. Please evaluate how the project would impact homelessness in the CoC if it were not awarded funding through this competition.

<input checked="" type="checkbox"/>	The project would close and 64 individuals would immediately become homeless if it were to not be funded.
<input type="checkbox"/>	Loss of funding would result in loss of housing options and could mean eventual displacement or increase in homelessness.
<input type="checkbox"/>	Loss of funding would negatively impact services and resources but not a clear loss of housing options.
<input type="checkbox"/>	Loss of funding would minimally impact the number of housing options or resources available.

14. Is this project the only CoC funded project with dedicated beds to a particular target population?

Answered by Funding Review Committee based on all applications submitted for this NOFA.

15. Funds that are reallocated may be added to renewal projects to increase the number of households served. If funding is available:

Would this project accept additional funds? ☒ Yes ☐ No

How would additional households be served with these funds?

Yes, additional funding would be used to serve additional households. This project is in high demand and could benefit from additional funds.

Serving High Need Populations *(If the renewing project has not completed a full year, share information from the last completed year of another HUD funded project or similarly designed project through this agency)*

16. What percentage of the households served met "hard to serve" criteria defined as having zero income at start/entry? (APR 18. Add values for No Income and divide by Total in last row):

29%

17. What percentage of the households served met "hard to serve" criteria defined as having two (2) or more physical or mental health conditions known at start/entry (APR 13.a.2. add totals for two and three or more conditions, then divide by total):

73%

18. What percentage of the households served were chronically homeless? (APR Q26a. divide total chronically homeless by total households):

100%

Section II. Project Performance

Performance Data (If the renewing project has not completed a full year, share information from the last completed year of another HUD funded project or similarly designed project through this agency)

19. Length of Stay (Joint TH/RRH projects – complete either option B or C below)

a. Permanent Supportive Housing: Calculate the percentage of leavers that remained in project more than 180 days (APR 22a.1)

100%

b. Rapid Re-Housing: Calculate the percentage of participants that took 30 days or less from project entry to lease up (CAPER 22C)

N/A

c. Transitional Housing: Calculate the average length of project stay in days (CAPER 22b)

N/A

20. Exits to Permanent Housing (Joint TH/RRH projects – complete either option B or C below)

a. Permanent Supportive Housing: Calculate the percentage of participants who remained in project, or exited to permanent housing destinations. (Total Persons Exiting to Positive Housing Destinations APR Q23.a. + Q23b. + Stayers 5.a.8/ [Total Served 5.a.1. – Excluded Q23.a. + Q23.b.])

95%

b. Rapid Re-Housing: Calculate the percentage of participants who exited to permanent housing destinations (Total Persons Exiting to Positive Housing Destinations APR Q23.a. + Q23b./ [Total Leavers 5.a.5. – Excluded Q23.a. + Q23.b.])

N/A

c. Transitional Housing: Calculate the percentage of participants who exited to permanent housing destinations (Total Persons Exiting to Positive Housing Destinations APR Q23.a. + Q23b./ [Total Leavers 5.a.5. – Excluded Q23.a. + Q23.b.])

N/A

21. New or Increased Income and Earned Income

a. PSH Only Project Stayers: What percent of project stayers had new or increased earned income with in the project contract year? APR 19a.1

20%

b. PSH Only Project Stayers: What percent of project stayers had new or increased other (non-employment) income? *APR 19a.1*

36%

c. Project Leavers: What percent of project leavers had new or increased earned income? *APR 19a.2*

13%

d. Project Leavers: What percent of project leavers had new or increased other (non-employment) income? *APR 19a.2*

13%

Financial Information

PROJECT BUDGET

Activity	Requested Funds	% of Requested Funds	Other Funding	Total Project Cost
Acquisition		%		
New Construction		%		
Rehabilitation		%		
Leasing	\$258,078	47 %		\$258,078
Rental Assistance		%		
Supportive Services	\$190,027	35 %		\$190,027
Operating Costs	\$12,522	2 %		\$12,522
HMIS	\$47,090	9 %		\$47,090
Project Administration (limited to 7%)	\$36,147	7 %		\$36,147
Total Project Cost	\$543,864			\$543,864

Attachment A

Identify all match and leveraging funds. Only those dollars or non-cash contributions (in-kind) that directly support the project should be listed. This may include federal, state, or local government funds, private funds, grants, and/or other sources, including donations. Worksheet should reflect information in eSnaps application.

Match must be at least 25% of total funding requested. Documentation of match must be provided with the application.

Resource	Cash or In Kind	Committed or Planned/ Pending	Available (MM/YY)	Amount/ Value	% of HUD Project Award	Serves as CoC Program Match? (Y/N)
Program Income	Cash	Committed	11/18	\$27,500	10%	Yes
HOME Funding	Cash	Committed	11/18	\$25,000	9%	Yes
In Kind Goods	In Kind	Planned/Pending	11/18	\$20,000	7%	Yes
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%.	Yes/No
Total leveraged from other sources				\$72,500	26%	

Attach additional forms as necessary

Attachment B

Attachments listed below are required but unscored. Failure to include any documentation that is required may result in disqualification of the application. *Please number all attachments in accordance with the list below.*

All projects must include:

☒ #1: Annual Progress Report (APR) for the project's most recent completed contract year, *or* the most recently completed contract year for another HUD-funded project or similar project if the renewing project has not yet completed a full year. Other structured outcome report for non-HMIS participating agencies are allowed (i.e. domestic violence agencies).

☒ #2: Line of Credit Control System (LOCCS) report showing drawdowns and final balance

☒ #3: Project Application submitted in *e-snaps*

☒ #4: Documentation of all match

Each applicant must include one of the following two (#5):

☐ Monitoring report from US Department of Housing and Urban Development (HUD)

☒ Monitoring report from an entity other than HUD for federal or state funding (ESG, CDBG, etc)

If relevant include (#6):

☐ A: Organization's response to any findings

☐ B: Documentation from HUD (or other entity) that finding or concern has been satisfied

☐ C: Any other relevant documentation

☐ D: Written communication to HUD requesting the significant change indicated in question 2.

☐ E: HUD's written approval of the change requested in question 2.

Attachment C

HUD General Section Certificates

The agency certifies to the Grand Rapids Area Coalition to End Homelessness that it and its principals are in compliance with the following requirements as indicated by checking the box.

☒ *Fair Housing and Equal Opportunity.* See CFR 578.93 for specific requirements related to Fair Housing and Equal Opportunity.

☒ *Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity.* See the Federal Register dated February 1, 2012, Docket No. FR 5359-F-02 and Section V.C.1.f. of the FY 2017 General Section.

☒ *Debarment and Suspension.* See Section III.C.4.c. of the FY 2015 General Section. Additionally, it is the responsibility of the recipient to ensure that all subrecipients are not debarred or suspended. (24 CFR 578.23((3)(c)(4)(v).d. Delinquent Federal Debts. See Section V.B.3. of the FY 2017 General Section.

☒ *Compliance with Fair Housing and Civil Rights.* See Section V.C.1.a. of the FY 2017 General Section.

☒ *Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency (LEP).* See Section V.C.1.d. of the FY 2017 General Section.

☒ *Economic Opportunities for Low- and Very Low-income Persons (Section 3).* See Section V.C.1.c. of the FY 2017 General Section.

☒ *Conducting Business in Accordance with Core Values and Ethical Standards/Code of Conduct.* See Section V.C.15. of the FY 2017 General Section.

☒ *Prohibition Against Lobbying Activities.* See Section V.C.15. of the FY 2017 General Section.

☒ *HUD Habitability Standards inspections* on all units, at a minimum.

☒ *Participation in HUD-Sponsored Program Evaluation.* See Section V.C.5. of the FY 2017 General Section.

☒ *Environmental Requirements.* Notwithstanding provisions at 24 CFR 578.31 and 24 CFR 578.99(a) of the CoC Program interim rule, and in accordance with Section 100261(3) of MAP-21 (Pub. L. 112-141, 126 Stat. 405), activities under this NOFA are subject to environmental review by a responsible entity under HUD regulations at 24 CFR part 58.

☒ *Drug-Free Workplace.* See Section VI.B.9. of the FY 2015 General Section. n. Safeguarding Resident/Client Files. See Section V.C.11 of the FY 2017 General Section.

☒ *Compliance with the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 209-282) (Transparency Act), as amended.* See Section V.C.13. of the FY 2017 General Section.

☒ *Lead-Based Paint Requirements.* For housing constructed before 1978 (with certain statutory and regulatory exceptions), CoC Program recipients must comply with the requirements of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801, et seq.), as amended by the Residential Lead-Based

☒ *Paint Hazard Reduction Act of 1992* (42 U.S.C. 4851, et seq.); and implementing regulations of HUD, at 24 CFR part 35; the Environmental Protection Agency (EPA) at 40 CFR part 745, or State/Tribal lead rules implemented under EPA authorization; and the Occupational Safety and Health Administration at 29 CFR 1926.62 and 29 CFR 1910.1025.

☒ Attestation that all attachments as required by HUD are uploaded in *e-snaps*. See Notice of Funding Availability for the 2018 Continuum of Care Program Competition FR-6200-N-25.

This list is not exhaustive of all HUD requirements. Applicants are encouraged to review the 2018 General Section, found at:

https://www.hud.gov/program_offices/spm/gmomgmt/grantsinfo/fundingopps to ensure eligibility.

Agency: **Community Rebuilders**

Acknowledged By: **Anna Díaz**

Title: Chief Operating Officer

Date: 8/7/2018

COMMUNITY REBUILDERS

PROJECT: HOUSING SOLUTIONS 11/1/2019 THRU 10/31/2020

CONTRACT: MI0412L5F061805

Attachment B1: Annual Progress Report



HUD Annual Performance Report 2017 - CSV upload only

Grant: Housing Solutions - MI0412L5F061502 Type: PH

Q04a: Project Identifiers in HMIS

Organization Name	Community Rebuilders - Kent/Grand Rapids CoC
Organization ID	2154
Project Name	Community Rebuilders - Kent/Grand Rapids - Housing Solutions
Project ID	10401
HMIS Project Type	3
Method of Tracking ES	
Is the Services Only (HMIS Project Type 6) affiliated with a residential project?	
Identify the Project ID's of the Housing Projects this Project is Affiliated with	
CSV Exception?	No
Uploaded via emailed hyperlink?	No

Q05a: Report Validations Table

Total Number of Persons Served	64
Number of Adults (Age 18 or Over)	38
Number of Children (Under Age 18)	26
Number of Persons with Unknown Age	0
Number of Leavers	11
Number of Adult Leavers	8
Number of Adult and Head of Household Leavers	8
Number of Stayers	53
Number of Adult Stayers	30
Number of Veterans	7
Number of Chronically Homeless Persons	58
Number of Youth Under Age 25	0
Number of Parenting Youth Under Age 25 with Children	0
Number of Adult Heads of Household	30
Number of Child and Unknown-Age Heads of Household	0
Heads of Households and Adult Stayers in the Project 365 Days or More	25

Q06a: Data Quality: Personally Identifying Information (PII)

Data Element	Client Doesn't Know/Refused	Information Missing	Data Issues	% of Error Rate
Name	0	0	0	0.00 %
Social Security Number	0	1	2	0.05 %
Date of Birth	0	0	0	0.00 %
Race	0	0	0	0.00 %
Ethnicity	0	0	0	0.00 %
Gender	0	0	0	0.00 %
Overall Score				0.05 %

Q06b: Data Quality: Universal Data Elements

	Error Count	% of Error Rate
Veteran Status	0	0.00 %
Project Start Date	0	0.00 %
Relationship to Head of Household	0	0.00 %
Client Location	0	0.00 %
Disabling Condition	0	0.00 %

Q06c: Data Quality: Income and Housing Data Quality

	Error Count	% of Error Rate
Destination	0	0.00 %
Income and Sources at Start	0	0.00 %
Income and Sources at Annual Assessment	0	0.00 %
Income and Sources at Exit	0	0.00 %

Q06d: Data Quality: Chronic Homelessness

	Count of Total Records	Missing Time In Institution	Missing Time in Housing	Approximate Date Started DK/R/missing	Number of Times DK/R/missing	Number of Months DK/R/missing	% of Records Unable to Calculate
ES, SH, Street Outreach	0	0	0	0	0	0	—
TH	0	0	0	0	0	0	—
PH (All)	5	0	0	0	0	0	0.00
Total	5	0	0	0	0	0	0.00

Q06e: Data Quality: Timeliness

	Number of Project Entry Records	Number of Project Exit Records
0 days	1	5
1-3 Days	8	0
4-6 Days	5	0
7-10 Days	6	3
11+ Days	44	3

Q06f: Data Quality: Inactive Records: Street Outreach & Emergency Shelter

	# of Records	# of Inactive Records	% of Inactive Records
Contact (Adults and Heads of Household in Street Outreach or ES - NBN)	0	0	—
Bed Night (All Clients in ES - NBN)	0	0	—

Q07a: Number of Persons Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Adults	38	25	13	0	0
Children	26	0	26	0	0
Client Doesn't Know/ Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	64	25	39	0	0

Q07b: Point-in-Time Count of Persons on the Last Wednesday

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	59	20	39	0	0
April	53	17	36	0	0
July	51	15	36	0	0
October	52	19	33	0	0

Q08a: Households Served

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Total Households	30	20	10	0	0

Q08b: Point-in-Time Count of Households on the Last Wednesday

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	25	15	10	0	0
April	22	13	9	0	0
July	20	11	9	0	0
October	23	15	8	0	0

Q09a: Number of Persons Contacted

	All Persons Contacted	First contact – NOT staying on the Streets, ES, or SH	First contact – WAS staying on Streets, ES, or SH	First contact – Worker unable to determine
Once	0	0	0	0
2-5 Times	0	0	0	0
6-9 Times	0	0	0	0
10+ Times	0	0	0	0
Total Persons Contacted	0	0	0	0

Q09b: Number of Persons Engaged

	All Persons Contacted	First contact – NOT staying on the Streets, ES, or SH	First contact – WAS staying on Streets, ES, or SH	First contact – Worker unable to determine
Once	0	0	0	0
2-5 Contacts	0	0	0	0
6-9 Contacts	0	0	0	0
10+ Contacts	0	0	0	0
Total Persons Engaged	0	0	0	0
Rate of Engagement	0.00	0.00	0.00	0.00

Q10a: Gender of Adults

	Total	Without Children	With Children and Adults	Unknown Household Type
Male	21	17	4	0
Female	16	7	9	0
Trans Male (FTM or Female to Male)	1	1	0	0
Trans Female (MTF or Male to Female)	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	0	0	0	0
Subtotal	38	25	13	0

Q10b: Gender of Children

	Total	With Children and Adults	With Only Children	Unknown Household Type
Male	16	16	0	0
Female	10	10	0	0
Trans Male (FTM or Female to Male)	0	0	0	0
Trans Female (MTF or Male to Female)	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	0	0	0	0
Subtotal	26	26	0	0

Q10c: Gender of Persons Missing Age Information

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	0	0	0	0	0
Female	0	0	0	0	0
Trans Male (FTM or Female to Male)	0	0	0	0	0
Trans Female (MTF or Male to Female)	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Subtotal	0	0	0	0	0

Q11: Age

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Under 5	4	0	4	0	0
5 - 12	17	0	17	0	0
13 - 17	5	0	5	0	0
18 - 24	3	2	1	0	0
25 - 34	11	4	7	0	0
35 - 44	7	4	3	0	0
45 - 54	12	11	1	0	0
55 - 61	5	4	1	0	0
62+	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	64	25	39	0	0

Q12a: Race

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
White	19	15	4	0	0
Black or African American	41	9	32	0	0
Asian	0	0	0	0	0
American Indian or Alaska Native	0	0	0	0	0
Native Hawaiian or Other Pacific Islander	1	1	0	0	0
Multiple Races	3	0	3	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	64	25	39	0	0

Q12b: Ethnicity

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Non-Hispanic/Non-Latino	61	24	37	0	0
Hispanic/Latino	3	1	2	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	64	25	39	0	0

Q13a1: Physical and Mental Health Conditions at Start

	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	23	14	9	0	0
Alcohol Abuse	4	4	0	0	0
Drug Abuse	3	3	0	0	0
Both Alcohol and Drug Abuse	3	2	1	0	0
Chronic Health Condition	15	11	4	0	0
HIV/AIDS	0	0	0	0	0
Developmental Disability	10	5	5	0	0
Physical Disability	19	15	4	0	0

Q13a2: Number of Conditions at Start

	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
None	22	1	21	0	0
1 Condition	19	7	12	0	0
2 Conditions	10	7	3	0	0
3+ Conditions	12	10	2	0	0
Condition Unknown	1	0	1	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	64	25	39	0	0

Q13b1: Physical and Mental Health Conditions at Exit

	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	5	2	3	0	0
Alcohol Abuse	2	2	0	0	0
Drug Abuse	0	0	0	0	0
Both Alcohol and Drug Abuse	2	1	1	0	0
Chronic Health Condition	2	1	1	0	0
HIV/AIDS	0	0	0	0	0
Developmental Disability	1	1	0	0	0
Physical Disability	2	1	1	0	0

Q13b2: Number of Conditions at Exit

	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
None	4	1	3	0	0
1 Condition	2	1	1	0	0
2 Conditions	2	2	0	0	0
3+ Conditions	3	1	2	0	0
Condition Unknown	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	11	5	6	0	0

Q13c1: Physical and Mental Health Conditions for Stayers

	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	20	13	7	0	0
Alcohol Abuse	1	1	0	0	0
Drug Abuse	3	3	0	0	0
Both Alcohol and Drug Abuse	2	2	0	0	0
Chronic Health Condition	14	11	3	0	0
HIV/AIDS	0	0	0	0	0
Developmental Disability	9	4	5	0	0
Physical Disability	17	14	3	0	0

Q13c2: Number of Conditions for Stayers

	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
None	18	0	18	0	0
1 Condition	15	3	12	0	0
2 Conditions	11	8	3	0	0
3+ Conditions	9	9	0	0	0
Condition Unknown	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	53	20	33	0	0

Q14a: Domestic Violence History

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Yes	13	7	6	0	0
No	25	18	7	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	38	25	13	0	0

Q14b: Persons Fleeing Domestic Violence

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Yes	1	0	1	0	0
No	4	2	2	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	8	5	3	0	0
Total	13	7	6	0	0

Q15: Living Situation

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations	0	0	0	0	0
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	17	9	8	0	0
Transitional housing for homeless persons (including homeless youth)	2	2	0	0	0
Place not meant for habitation	17	13	4	0	0
Safe Haven	0	0	0	0	0
Interim Housing	0	0	0	0	0
Subtotal	36	24	12	0	0
Institutional Settings	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison or juvenile detention facility	0	0	0	0	0
Foster care home or foster care group home	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Locations	0	0	0	0	0
Permanent housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Staying or living in a friend's room, apartment or house	1	1	0	0	0
Staying or living in a family member's room, apartment or house	1	0	1	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Subtotal	2	1	1	0	0
Total	38	25	13	0	0

Q16: Cash Income - Ranges

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
No income	11	7	5
\$1 - \$150	1	0	0
\$151 - \$250	0	0	0
\$251 - \$500	4	1	0
\$501 - \$1000	16	10	0
\$1,001 - \$1,500	3	4	0
\$1,501 - \$2,000	3	1	2
\$2,001+	0	2	1
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	0	0	0
Number of Adult Stayers Not Yet Required to Have an Annual Assessment	0	5	0
Number of Adult Stayers Without Required Annual Assessment	0	0	0
Total Adults	38	30	8

Q17: Cash Income - Sources

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	6	6	2
Unemployment Insurance	1	1	0
SSI	15	12	2
SSDI	6	3	1
VA Service-Connected Disability Compensation	1	0	0
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
TANF or Equivalent	0	0	0
General Assistance	0	0	0
Retirement (Social Security)	1	1	0
Pension from Former Job	0	0	0
Child Support	2	0	0
Alimony (Spousal Support)	0	0	0
Other Source	1	2	0
Adults with Income Information at Start and Annual Assessment/Exit	0	18	2

Q18: Client Cash Income Category - Earned/Other Income Category - by Start and Annual Assessment/Exit Status

	Number of Adults at Start	Number of Adults at Annual Assessment (Stayers)	Number of Adults at Exit (Leavers)
Adults with Only Earned Income (i.e., Employment Income)	4	2	1
Adults with Only Other Income	21	12	1
Adults with Both Earned and Other Income	2	4	1
Adults with No Income	11	7	5
Adults with Client Doesn't Know/Client Refused Income Information	0	0	0
Adults with Missing Income Information	0	0	0
Number of Adult Stayers Not Yet Required to Have an Annual Assessment	0	5	0
Number of Adult Stayers Without Required Annual Assessment	0	0	0
Total Adults	38	30	8
1 or More Source of Income	27	18	3
Adults with Income Information at Start and Annual Assessment/Exit	0	18	2

Q19a1: Client Cash Income Change - Income Source - by Start and Latest Status

	Had Income Category at Start and Did Not Have It at Annual Assessment	Retained Income Category But Had Less \$ at Annual Assessment Than at Start	Retained Income Category and Same \$ at Annual Assessment as at Start	Retained Income Category and Increased \$ at Annual Assessment	Did Not have the Income Category at Start and Gained the Income Category at Annual Assessment	Did Not have the Income Category at Start or at Annual Assessment	Total Adults (Including Those with No Income)	Performance Measure: Adults Who Gained or Increased Income from Start to Annual Assessment; Average Gain	Performance measure: Percent of persons who accomplished this measure
Number of Adults with Earned Income (i.e., Employment Income)	1	0	1	2	3	18	25	5	20.00 %
Average Change in Earned Income	-309.00	—	0.00	230.50	811.00	0.00	0.00	578.80	0.00
Number of Adults with Other Income	1	5	2	8	1	8	25	9	36.00 %
Average Change in Other Income	-783.00	-333.20	0.00	181.75	715.00	0.00	0.00	241.00	0.00
Number of Adults with Any Income (i.e., Total Income)	1	4	1	13	0	6	25	13	52.00 %
Average Change in Overall Income	-309.00	-247.25	0.00	277.15	—	0.00	92.00	277.15	0.00

Q19a2: Client Cash Income Change - Income Source - by Start and Exit

	Had Income Category at Start and Did Not Have it at Exit	Retained Income Category but Had Less \$ at Exit than at Start	Retained Income Category and Same \$ at Exit as at Start	Retained Income Category and Increased \$ at Exit	Did Not have the Income Category at Start and Gained the Income Category at Exit	Did Not have the Income Category at Start or at Exit	Total Adults (Including Those with No Income)	Performance Measure: Adults Who Gained or Increased Income from Start to Exit; Average Gain	Performance measure: Percent of persons who accomplished this measure
Number of Adults with Earned Income (i.e., Employment Income)	1	0	1	0	1	5	8	1	12.50 %
Average Change in Earned Income	-350.00	—	0.00	—	2600.00	0.00	0.00	2600.00	0.00
Number of Adults with Other Income	0	0	1	1	0	6	8	1	12.50 %
Average Change in Other Income	—	—	0.00	776.00	—	0.00	0.00	776.00	0.00
Number of Adults with Any Income (i.e., Total Income)	1	0	1	1	1	4	8	2	25.00 %
Average Change in Overall Income	-350.00	—	0.00	776.00	2600.00	0.00	378.00	1688.00	0.00

Q19a3: Client Cash Income Change - Income Source - by Start and Latest Status/Exit

	Had Income Category at Start and Did Not have it at Annual Assessment/Exit	Retained Income Category But Had Less \$ at Annual Assessment Than at Start	Retained Income Category and Same \$ at Annual Assessment/Exit as at Start	Retained Income Category and Increased \$ at Annual Assessment/Exit	Did Not Have the Income Category at Start and Gained the Income Category at Annual Assessment/Exit	Did Not have the Income Category at Start or Annual Assessment/Exit	Total Adults (Including Those with No Income)	Performance Measure: Adult Who Gained or Increased Income from Start to Annual Assessment/Exit Average Gain
Number of Adults with Earned Income (i.e., Employment Income)	2	0	2	2	4	23	33	6
Average Change in Earned Income	-329.50	—	0.00	230.50	1258.25	0.00	0.00	915.67
Number of Adults with Other Income	1	5	3	9	1	14	33	10
Average Change in Other Income	-783.00	-333.20	0.00	247.78	715.00	0.00	0.00	294.50
Number of Adults with Any Income (i.e., total income)	2	4	2	14	1	10	33	15
Average Change in Overall Income	-329.50	-247.25	0.00	312.78	2600.00	0.00	161.00	465.26

Q20a: Type of Non-Cash Benefit Sources

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
Supplemental Nutritional Assistance Program	28	20	5
WIC	4	3	0
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	0	0	0

Q20b: Number of Non-Cash Benefit Sources

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
No sources	9	3	2
1+ Source(s)	29	20	5
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	0	7	1
Total	38	30	8

Q21: Health Insurance

	At Start	At Annual Assessment for Stayers	At Exit for Leavers
Medicaid	57	43	10
Medicare	11	4	3
State Children's Health Insurance Program	0	0	0
VA Medical Services	3	2	0
Employer Provided Health Insurance	0	0	0
Health Insurance Through COBRA	0	0	0
Private Pay Health Insurance	0	0	0
State Health Insurance for Adults	0	0	0
Indian Health Services Program	0	0	0
Other	0	0	0
No Health Insurance	3	3	0
Client Doesn't Know/Client Refused	0	0	0
Data Not Collected	1	0	0
Number of Stayers Not Yet Required to Have an Annual Assessment	0	5	0
1 Source of Health Insurance	49	41	9
More than 1 Source of Health Insurance	11	4	2

Q22a1: Length of Participation – CoC Projects

	Total	Leavers	Stayers
30 Days or Less	5	0	5
31 to 60 Days	0	0	0
61 to 90 Days	0	0	0
91 to 180 Days	0	0	0
181 to 365 Days	1	1	0
366 to 730 Days (1-2 yrs)	19	8	11
731 to 1,095 Days (2-3 yrs)	39	2	37
1096 to 1,460 Days (3-4 yrs)	0	0	0
1461 to 1,825 Days (4-5 yrs)	0	0	0
More than 1,825 Days (>5 yrs)	0	0	0
Data Not Collected	0	0	0
Total	64	11	53

Q22b: Average and Median Length of Participation in Days

		Leavers	Stayers
Community Rebuilders - Kent/Grand Rapids - Housing Solutions	a. Average length in days	668.0000	687.0000
Community Rebuilders - Kent/Grand Rapids - Housing Solutions	b. Median length in days	667.0000	753.0000

Q22c: RRH Length of Time between Project Start Date and Housing Move-In Date

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 days (1-2 Yrs)	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	0	0	0	0	0

Q23a: Exit Destination – More Than 90 Days

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	3	0	3	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0
Permanent housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	4	1	3	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Subtotal	7	1	6	0	0
Temporary Destinations	0	0	0	0	0
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	0	0	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Subtotal	0	0	0	0	0
Institutional Settings	0	0	0	0	0
Foster care home or group foster care home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	1	1	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	2	2	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	3	3	0	0	0
Other Destinations	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	1	1	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	1	1	0	0	0
Total	11	5	6	0	0
Total persons exiting to positive housing destinations	7	1	6	0	0
Total persons whose destinations excluded them from the calculation	1	1	0	0	0
Percentage	70.00 %	25.00 %	100.00 %	—	—

Q23b: Exit Destination – 90 Days or Less

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0
Permanent housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations	0	0	0	0	0
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	0	0	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Subtotal	0	0	0	0	0
Institutional Settings	0	0	0	0	0
Foster care home or group foster care home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	0	0	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	—	—	—	—	—

Q25a: Number of Veterans

	Total	Without Children	With Children and Adults	Unknown Household Type
Chronically Homeless Veteran	4	3	1	0
Non-Chronically Homeless Veteran	3	3	0	0
Not a Veteran	31	19	12	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	0	0	0	0
Total	38	25	13	0

Q25b: Number of Veteran Households

	Total	Without Children	With Children and Adults	Unknown Household Type
Chronically Homeless Veteran	4	3	1	0
Non-Chronically Homeless Veteran	3	3	0	0
Not a Veteran	23	14	9	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	0	0	0	0
Total	30	20	10	0

Q25c: Gender - Veterans

	Total	Without Children	With Children and Adults	Unknown Household Type
Male	7	6	1	0
Female	0	0	0	0
Trans Male (FTM or Female to Male)	0	0	0	0
Trans Female (MTF or Male to Female)	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	0	0	0	0
Total	7	6	1	0

Q25d: Age - Veterans

	Total	Without Children	With Children and Adult	Unknown Household Type
18 - 24	0	0	0	0
25 - 34	1	1	0	0
35 - 44	1	1	0	0
45 - 54	3	3	0	0
55 - 61	2	1	1	0
62+	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0
Data Not Collected	0	0	0	0
Total	7	6	1	0

Q25e: Physical and Mental Health Conditions - Veterans

	Conditions At Start	Conditions at Latest Assessment for Stayers	Conditions at Exit for Leavers
Mental Health Problem	4	3	1
Alcohol Abuse	2	1	1
Drug Abuse	2	2	0
Both Alcohol Abuse and Drug Abuse	0	0	0
Chronic Health Condition	3	3	0
HIV/AIDS	0	0	0
Developmental Disability	0	0	0
Physical Disability	5	5	0

Q25f: Cash Income Category - Income Category - by Start and Annual /Exit Status - Veterans

	Number of Veterans at Start	Number of Veterans at Annual Assessment (Stayers)	Number of Veterans at Exit (Leavers)
Veterans with Only Earned Income (i.e., Employment Income)	0	0	0
Veterans with Only Other Income	5	2	1
Veterans with Both Earned and Other Income	0	0	0
Veterans with No Income	2	2	0
Veterans with Client Doesn't Know/Client Refused Income Information	0	0	0
Veterans with Missing Income Information	0	0	0
Number of Veterans Not yet Required to Have an Annual Assessment	0	2	0
Number of Veterans Without Required Annual Assessment	0	0	0
Total Veterans	7	6	1

Q25g: Type of Cash Income Sources - Veterans

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	0	0	0
Unemployment Insurance	0	0	0
SSI	4	2	1
SSDI	1	0	1
VA Service-Connected Disability Compensation	1	0	0
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
TANF or Equivalent	0	0	0
General Assistance	0	0	0
Retirement (Social Security)	0	0	0
Pension from Former Job	0	0	0
Child Support	0	0	0
Alimony (Spousal Support)	0	0	0
Other Source	0	1	0
Veterans with Income Information at Start and Annual Assessment/Exit	0	2	1

Q25h: Type of Non-Cash Income Sources - Veterans

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
Supplemental Nutritional Assistance Program	4	3	0
WIC	0	0	0
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	0	0	0

Q251: Exit Destination - Veterans

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0
Permanent housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations	0	0	0	0	0
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	0	0	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Subtotal	0	0	0	0	0
Institutional Settings	0	0	0	0	0
Foster care home or group foster care home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	1	1	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	1	1	0	0	0
Other Destinations	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	1	1	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0.00 %	0.00 %	—	—	—

Q26a: Number of Households w/at least one or more Chronically Homeless person

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	25	15	10	0	0
Not Chronically Homeless	4	4	0	0	0
Client Doesn't Know/Client Refused	1	1	0	0	0
Data Not Collected	0	0	0	0	0
Total	30	20	10	0	0

Q26b: Number of Chronically Homeless Persons by Household

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	58	19	39	0	0
Not Chronically Homeless	5	5	0	0	0
Client Doesn't Know/Client Refused	1	1	0	0	0
Data Not Collected	0	0	0	0	0
Total	64	25	39	0	0

Q26c: Gender of Chronically Homeless Persons

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	33	13	20	0	0
Female	24	5	19	0	0
Trans Male (FTM or Female to Male)	1	1	0	0	0
Trans Female (MTF or Male to Female)	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	58	19	39	0	0

Q26d: Age of Chronically Homeless Persons

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
0 - 17	26	0	26	0	0
18 - 24	2	1	1	0	0
25 - 34	11	4	7	0	0
35 - 44	7	4	3	0	0
45 - 54	9	8	1	0	0
55 - 61	3	2	1	0	0
62+	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	58	19	39	0	0

Q26e: Physical and Mental Health Conditions - Chronically Homeless Persons

	Conditions at Start	Conditions at Latest Assessment (Stayers)	Conditions at Exit (Leavers)
Mental Health Problem	19	16	5
Alcohol Abuse	3	0	2
Drug Abuse	2	2	0
Both Drug and Alcohol Abuse	3	2	2
Chronic Health Condition	13	12	2
HIV/AIDS	0	0	0
Developmental Disability	10	10	1
Physical Disability	14	12	2

Q26f: Client Cash Income - Chronically Homeless Persons

	Number of Chronically Homeless Persons at Start	Number of Chronically Homeless Persons at Annual Assessment (Stayers)	Number of Chronically Homeless Persons at Exit (Leavers)
Chronically Homeless Persons with Only Earned Income (i.e., Employment Income)	4	2	1
Chronically Homeless Persons with Only Other Income	17	10	1
Chronically Homeless Persons with Both Earned and Other Income	2	4	1
Chronically Homeless Persons with No Income	9	5	5
Chronically Homeless Persons with Client Doesn't Know/Client Refused Income Information	0	0	0
Chronically Homeless Persons with Missing Income Information	0	0	0
Number of Chronically Homeless Persons Not yet Required to Have an Annual Assessment	0	3	0
Number of Chronically Homeless Persons Without Required Annual Assessment	0	0	0
Total Chronically Homeless Persons	32	24	8

Q26g: Type of Cash Income Sources - Chronically Homeless Persons

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	6	6	2
Unemployment Insurance	1	1	0
SSI	13	11	2
SSDI	6	3	1
VA Service-Connected Disability Compensation	0	0	0
VA Non-Service Connected Disability Pension	0	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
TANF or Equivalent	0	0	0
General Assistance	0	0	0
Retirement (Social Security)	0	0	0
Pension from Former Job	0	0	0
Child Support	1	0	0
Alimony (Spousal Support)	0	0	0
Other Source	1	2	0
Chronically Homeless Persons with Income Information at Start and Annual Assessment/Exit	0	16	2

Q26h: Type of Non-Cash Income Sources - Chronically Homeless Persons

	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
Supplemental Nutritional Assistance Program	24	17	5
WIC	4	3	0
TANF Child Care Services	0	0	0
TANF Transportation Services	0	0	0
Other TANF-Funded Services	0	0	0
Other Source	0	0	0

Q27a: Age of Youth

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
12 - 17	0	0	0	0	0
18 - 24	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	0	0	0	0	0

Q27b: Parenting Youth

	Total Parenting Youth	Total Children of Parenting Youth	Total Persons	Total Households
Parent Youth <18	0	0	0	0
Parent Youth 18 to 24	0	0	0	0

Q27c: Gender - Youth

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	0	0	0	0	0
Female	0	0	0	0	0
Trans Male (FTM or Female to Male)	0	0	0	0	0
Trans Female (MTF or Male to Female)	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Total	0	0	0	0	0

Q27d: Living Situation - Youth

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations	0	0	0	0	0
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Place not meant for habitation	0	0	0	0	0
Safe Haven	0	0	0	0	0
Interim Housing	0	0	0	0	0
Subtotal	0	0	0	0	0
Institutional Settings	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison or juvenile detention facility	0	0	0	0	0
Foster care home or foster care group home	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Locations	0	0	0	0	0
Permanent housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Staying or living in a friend's room, apartment or house	0	0	0	0	0
Staying or living in a family member's room, apartment or house	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	0	0	0	0	0

Q27e: Length of Participation - Youth

	Total	Leavers	Stayers
30 Days or Less	0	0	0
31 to 60 Days	0	0	0
61 to 90 Days	0	0	0
91 to 180 Days	0	0	0
181 to 365 Days	0	0	0
366 to 730 Days (1-2 yrs)	0	0	0
731 to 1095 Days (2-3 yrs)	0	0	0
1,096 to 1,460 Days (3-4 yrs)	0	0	0
1,461 to 1,825 Days (4-5 yrs)	0	0	0
More than 1,825 Days (>5 yrs)	0	0	0
Data Not Collected	0	0	0
Total	0	0	0

Q27f: Exit Destination - Youth

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing housing subsidy	0	0	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	0	0	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other ongoing housing subsidy	0	0	0	0	0
Permanent housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations	0	0	0	0	0
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g. room, apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	0	0	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Subtotal	0	0	0	0	0
Institutional Settings	0	0	0	0	0
Foster care home or group foster care home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations	0	0	0	0	0
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	0	0	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	-	-	-	-	-

COMMUNITY REBUILDERS

PROJECT: HOUSING SOLUTIONS 11/1/2019 THRU 10/31/2020

CONTRACT: MI0412L5F061805

Attachment B2: LOCCS Report



COMMUNITY REBUILDERS, INC.

Grant Information

[Menu](#) [Auth](#)
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[Menu](#) [Portfolio](#) [Grant Information](#)
Grant: MI0412L5F061502 (SNAP) Special Needs Assistance
[General](#) [Budget](#) [Vouchers](#)

Contractual Organization		DUNS Organization		Contract Dates		HUD Funding	
		DUNS: 948960398	Renewal Date: 02-19-2019	LOCCS Created: 23-2016		Obligated: 528,547.00	
Tax ID: 38-3094108		Tax ID: 38-3094108 ✓ Matches contractual org.		Effective Date: 08-2016		Contracted: 528,547.00	
COMMUNITY REBUILDERS, INC.		COMMUNITY REBUILDERS		Expiration Date: 10-2017		LOCCS Authorized	
1136 Wealthy St SE		1120 MONROE AVE NW STE 220		Term (months): 12		Authorized: 528,547.00	
Grand Rapids, MI 49506-1543		GRAND RAPIDS, MI 49503-1038		Operating Start: 01-2016		Disbursed: 528,547.00	
Payee Organization:						In process: 0.00	
- same as contractual-		Region: 05 - MID WEST				Balance: 0.00	
		Office: 28 - MICHIGAN STATE OFC.					


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COMMUNITY REBUILDERS

PROJECT: HOUSING SOLUTIONS 11/1/2019 THRU 10/31/2020

CONTRACT: MI0412L5F061805

Attachment B4: Match Documentation

TOTAL MATCH REQUIRED: \$72,500

SOURCE DOCUMENTATION: CASH, Program Income, Private: \$27,500

SOURCE DOCUMENTATION: CASH, City HOME, Government: \$25,000

SOURCE DOCUMENTATION: IN- KIND, Private: \$20,000

6D. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the icon. To view or update a Matching source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$52,500
Total Value of In-Kind Commitments:	\$20,000
Total Value of All Commitments:	\$72,500

1. Does this project generate program income Yes
as described in 24 CFR 578.97 that will be
used as Match for this grant?

1a. Briefly describe the source of the program income:

Program participant contributions to rent payment

- 1b. Estimate the amount of program income \$72,500
that will be used as Match for this project:

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Match	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	Cash	Private	Program Income , ...	08/01/2018	\$27,500
Yes	Cash	Government	HOME FUNDING	08/01/2018	\$25,000
Yes	In-Kind	Private	in kind goods	08/01/2018	\$20,000

Sources of Match Detail

1. Will this commitment be used towards Match? Yes

2. Type of Commitment: Cash

3. Type of Source: Private

4. Name the Source of the Commitment: Program Income , participant rent contributions
(Be as specific as possible and include the office or grant program as applicable)

5. Date of Written Commitment: 08/01/2018

6. Value of Written Commitment: \$27,500

Sources of Match Detail

1. Will this commitment be used towards Match? Yes

2. Type of Commitment: Cash

3. Type of Source: Government

4. Name the Source of the Commitment: HOME FUNDING
(Be as specific as possible and include the office or grant program as applicable)

5. Date of Written Commitment: 08/01/2018

6. Value of Written Commitment: \$25,000

Sources of Match Detail

1. Will this commitment be used towards Match? Yes

2. Type of Commitment: In-Kind

3. Type of Source: Private

4. Name the Source of the Commitment: in kind goods
(Be as specific as possible and include the

office or grant program as applicable)

5. Date of Written Commitment: 08/01/2018

6. Value of Written Commitment: \$20,000

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

COMMUNITY REBUILDERS

PROJECT: HOUSING SOLUTIONS 11/1/2019 THRU 10/31/2020

CONTRACT: MI0412L5F061805

Attachment B5: Monitoring Report

Kent County Community Development Monitoring Checklist for Sub-Recipients

Subrecipient: Community Rebuilders

Project Name/Agreement: Subcontract for the Administration of Rental Assistance for the Recipient of the Continuum of Care-Permanent Housing; Permanent Supportive Housing/Sponsor-Based Rental Assistance (SRA) and Housing/Tentnat Based Rental Assistance (TRA) for Homeless Persons

Project Director: Vera Beech, Executive Director

In-house review held on: _____

Monitoring phone call made: _____

Monitoring letter sent: 7/28/2017

Person/s interviewed: Anna Diaz, Director of Program & Vicki Squires, PSH Supervisor

Follow-up monitoring letter sent: n/a

Follow-up visit conducted: n/a

DUNS #: 948960398

A. National Objective and Eligibility

1. National Objective is being met? (570.208)

Benefit to Low-and Moderate-Income Persons

 Low/Mod Area Benefit

 X Limited Clientele Benefit

 Low/Mod Housing Benefit

 Job Creation or Retention

Aid in the Prevention or Elimination of Slums or Blight

 on an Area Basis

 on an Spot Basis

An Urgent Need

 Needs having a Particular Urgency

2. Which eligibility category does the project meet?

24 CFR 582.105 (a) (e2)

B. Conformance to the Subrecipient Agreement

1. Contract Scope of Services - Is the full scope of services listed in the Agreement being undertaken? Describe scope:

The Shelter Plus Care program supports chronically or currently homeless persons. Beds are prioritized for the chronically homeless to easily link them to community resources. Program participants contribute 30% of their adjusted income toward rent. The SRA and TRA programs are designed to provide sustainable housing to homeless persons. Therefore, participants are not easily terminated. In addition, all program participants have a verifiable disability. In the TRA program participants hold the lease and are responsible for full compliance to the lease requirements. Community Rebuilders assumes full responsibility for the lease requirements for participants in the SRA program.

How many households or units to be served: 143 (93 TRA and 50 SRA)

How many served up to this point: 143 (93 TRA and 50 SRA)

2. Levels of Accomplishments - Is the project achieving the expected levels of performance (number of persons served, number of units rehabbed, etc.) and reaching the intended client group? yes

The program is achieving its expected levels of accomplishment. The demand is high and all openings are filled immediately. More funding needed.

Explain any problem the subrecipient may be experiencing.

List/acknowledge major accomplishments.

There has not been any notable problems in carrying out the SRA or the TRA program. Many program participants are thankful for the assistance. There are participants who have income out of the program. Some participants have also established trusting relationships with landlords. In addition, some of these tenant landlord relationships have led to tenants becoming employed by their landlord.

3. Time of Performance - Is the work being performed in a timely manner?

Yes

Explain any problem the subrecipient may be experiencing.

No problems were identified during the monitoring visit.

4. Budget - Compare actual expenditures versus planned expenditures?

Note any discrepancies or possible deviations.

Currently, expenditures are as planned. There were no discrepancies or deviations identified during the monitoring visit.

5. Requests for Payment - Are requests for payments being submitted in a timely manner and are they consistent with the level of work? Is program income properly accounted for and recorded? Explain.

and rental adjustment notifications support expenses on invoices that were submitted to the County for payment.

6. Progress Reports - Have progress reports been submitted on time and were they complete and accurate? Yes
-

7. Special Conditions - Does the project conform to any special terms and conditions included in the agreement? Explain.

NAP

C. Record-Keeping Systems (570.506)

1. Filing System - Are the subrecipient's files orderly, comprehensive, secured for confidentiality when necessary, and up-to-date?

Yes

Note any areas of deficiency, discrepancies or possible deviations.

During the monitoring visit there were no deficiencies, discrepancies nor deviations identified.

2. Documentation - Do the HUD project file and subrecipient records have necessary documentation supporting the National Objective (570.208) being met, eligibility (582.105(a)(e2)), and program costs (582.105(c) (e1))

Yes, a review of participant files evidence that the SRA and TRA program supports the National Objective.

Do the project files support the data for the CAPER?

At the time of the monitoring visit the CAPER had not been completed.

Note any areas of deficiency, discrepancies or possible deviations.

NAP

3. Record Retention - Is there a process for determining which records need to be retained and for how long?

Records are maintained for an indefinite period of time.

Note any discrepancies or possible deviations.

NAP

4. Site Visit - Is the information revealed at the site visit consistent with the records maintained by the subrecipient and with the data previously provided to Kent County Community Development Department?

Yes

Note any discrepancies or possible deviations.

There were no discrepancies or deviations identified during the monitoring review process.

- a. Who is running the day-to-day operations? Does the staff seem informed about the program requirements and

and expectations?

Vera Beech runs the day to day operations of the program. Staff that were interviewed during the review seemed well informed.

- b. Is the project accomplishing what it was designed to do?

Yes

Note any discrepancies or possible deviations.

There were no discrepancies nor deviations identified during the monitoring visit.

D. Financial Management Systems

1. **Systems for Internal Control** - Are systems in compliance with accounting policies and procedures for cash, real and personal property, equipment and other assets (85.20(b)(3) and 84.20(b)(3))?

Yes.

A system is in place for separation of duties as it pertains to handling cash, checks, and other assets.

Note any discrepancies or possible deviations.

There were no discrepancies nor deviations identified during the monitoring visit.

2. **Components of Financial Management System** - Review the chart of accounts, journals, ledgers, reconciliation, data processing and reporting system.

The chart of accounts, invoices and bank statements correlate.

Note any discrepancies.

There were no discrepancies identified during the monitoring process.

3. **Accounting** - Compare the latest performance report, drawdown requests, bank records, payroll records, receipts/disbursements, etc.
Drawdown requests are supported by rent payments made on behalf of program participants.

Note any discrepancies.

There were no discrepancies identified during the monitoring visit.

4. **Eligible, Allowable and Reasonable Costs** - See OMB Circulars A-87, A-122. View time distribution records where the subrecipient has employees who work on funded activities.

A review of invoices show that charges were eligible and reasonable.

Note any discrepancies.

There were no discrepancies identified during the review process.

5. **Cash Management/Drawdown Procedures** - See Treasury Circular 1075, 85.20(b)(7), and 84.20. Has all cash been drawn down and deposited? All drawdowns of Federal funds properly recorded?

Note any discrepancies.

Draw down procedures were not tested during this monitoring process.

6. Management of Program Income - If the subrecipient generates program income, refer to 570.504 and the Subrecipient Agreement about its use.

Note any discrepancies.

NAP

7. IPA Audit Reports/Follow-up - (OMB Circular A-133) Determine if the subrecipient has expended \$750,000 or more in Federal funds for the subject program year.

Single Audit Required? Yes X No
FYE

Any findings related to CDBG related activity?

None observed.

8. Maintenance of Source Documentation - (85.20(b) and 84.20(b)) Note any discrepancies in sample records, invoices, vouchers and time records traced through the system.

There were no discrepancies found in the review of sample records, invoices, vouchers and time records.

9. Budget Control - Do actual expenditures match the line item budget?
Refer to 85.20(b)(4) and 84.20. Yes

Note any discrepancies.

There were no discrepancies identified during the review process.

E. Insurance

- 1. Has subrecipient submitted a current copy of its Certificate of Insurance?**

Yes

- 2. Is Kent County named as an additional insured?**

Yes

F. Procurement

- 1. Procurement Procedures -Did the agency secure supplies for the project?**

A review of invoices submitted to the County for payment did not show expenses for supplies.

If yes, was the procurement policy followed?

NAP

2. Conflict of Interest - How does the subrecipient assure there was no conflict of interest, real or apparent? Review the process and comment.

During the monitoring process the Conflict of Interest Policy was reviewed and found to be in compliance with 24 CFR § 583.330 (e)

G. Equipment and Real Property

1. Has the subrecipient acquired or improved any property it owns in whole or in part with CDBG funds in excess of \$25,000? If yes, review 570.503(b)(7).

NAP

2. Has the subrecipient purchased equipment with CDBG funds in excess of \$1,000? Does the subrecipient maintain the records required in 84.34?

NAP

3. Has a physical inventory taken place and the results reconciled with property records within the last two years?

NAP

4. If the subrecipient disposed of equipment/property that was purchased with Federal funds with the last five years:

- a. Were proceeds from the sale reported as program income?

NAP

- b. Did Kent County Community Development approve expenditure of the program income?

NAP

- c. Was program income returned to Kent County Community Development?

NAP

H. Non-Discrimination and Actions to Further Fair Housing

1. Equal Employment Opportunity - Refer to 570.506, 601 and 602.

Note any discrepancies.

Community Rebuilders has an Equal Opportunity Policy. During the monitoring visit compliance was not tested.

2. Section 3 - Opportunities for Training and Employment for Local Residents
Refer to 570.506(g)(5) and 570.607(a)(affirmative action).

NAP

Note any discrepancies.

3. Fair Housing Compliance - Refer to 570.904 and 570.601(b).

Note any discrepancies.

There were no discrepancies identified during the monitoring visit.

4. Requirements for Disabled Persons - Refer to 8.6.

Note any concerns.

During the monitoring process there were no concerns as it pertains to treatment of, or housing for, disabled persons.

5. Women and Minority Business Enterprises - Refer to 570.506(g), 85.36(e) and 84.44, affirmative steps documentation.

Note any concerns.

Women and Minority Business Enterprise compliance was not tested.

I. Conclusion and Follow-Up

1. Is the subrecipient meeting the terms of the contract and HUD regulations?

Discuss both positive conclusions and concerns/weaknesses identified.

This program is designed to provide housing and supportive services on a long term basis for homeless persons with disabilities. During the monitoring visit, it was determined that Community Rebuilders is reaching all of its contracted units of service and that some participants have successfully income out of the program. In conclusion there were no findings or concerns identified during this monitoring visit.

2. Identify any follow-measures to be taken by Kent County Community Development and/or the subrecipient as a result of this monitoring review.

a. List the required schedule for implementing corrective actions (CAs) or making improvements.

NAP

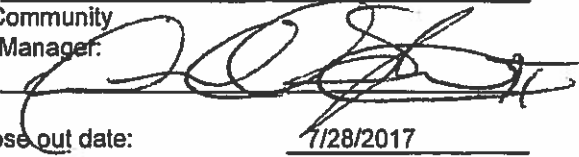
b. List the schedule for any needed technical assistance or training and identify who will provide the training.

NAP

Project Monitor: Darrell Singleton II

Date: 7/28/2017

Kent County Community
Development Manager:



Date: 7/28/2017

Monitoring Close out date: 7/28/2017