



**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

Fiscal Years	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	<u>144,000</u>	_____	_____	_____
External Revenue	_____	<u>(144,000)</u>	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
<b>NET FISCAL IMPACT</b>	_____	<u>-0-</u>	_____	_____	_____
<b># ADDITIONAL FTS POSITIONS (Cumulative)</b>	_____	_____	_____	_____	_____

Is Item Included In Current Budget: Yes X No \_\_\_\_\_  
 Budget Account No.: Fund 0001 Dept. 148 Unit 1351 Obj. 3401  
 Program Code: HC11 Program Period: GY09

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**

Departmental Fiscal Review: *[Signature]*

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Dev. and Control Comments:**

<p><i>[Signature]</i> 7/30/09                  7/30/09 OFMB                  7/29/09                  7/30/09 TM                  7/24                  7/23/09</p>	<p><i>[Signature]</i> 7/30/09                  Contract Dev. and Control</p>
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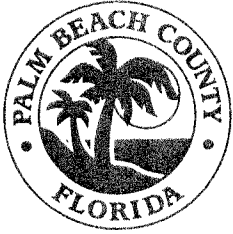
**B. Legal Sufficiency:**

*[Signature]* 7/31/09  
 Assistant County Attorney

**C. Other Department Review:**

\_\_\_\_\_  
 Department Director

This summary is not to be used as a basis for payment.



Department of Community Services  
Division of Human Services  
And Veteran Services

810 Datura Street, #350

West Palm Beach, FL 33401-5211

(561) 355-4775

Fax: (561) 355-4801

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**Palm Beach County  
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Commissioners**

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Karen T. Marcus

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Jess R. Santamaria

District 7

**County Administrator**

Robert Weisman



"An Equal Opportunity  
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# MEMO

**To:** Jeff Koons, Chairman Palm Beach County  
Board of County Commissioners  
**From:** Robert Weisman, County Administrator  
**Date:** July 1, 2009  
**Subject:** Request for Emergency Authorization  
2010 Homeless Challenge Grant Application

Pursuant to PPM # CW-F-003, Grant Administration Policy, I, B3, this memo is written to request your prior approval to Board review and action of a 2010 Homeless Challenge Grant Application.

This grant application is in response to the 2010 Homeless Challenge Grant Application. The Palm Beach County Division of Human Services is applying for funds as the Lead Entity for the Homeless Continuum of Care pursuant to 420.624 (6), F.S. These funds can be utilized for Transitional Housing. DCF will allocate funds based on application scores up to a maximum of \$144,000 per applicant. Upon receipt of a grant award, the county will contract with service providers as follows:

Funds will be sub-contracted based upon the approved level as follows:


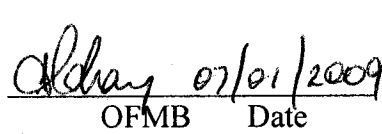
### Maximum Funding Level Allocation

\$144,000	Sub-Contractor	Type of Service	# to be Served
\$72,000	Faith, Hope, Love, Charity, Inc.	Transitional Housing	40
\$72,000	Salvation Army, A Georgia Corporation	Transitional Housing	73

Should the funding level be below the maximum, the contract amounts would be reduced to amounts agreed in advance between the providers and the County. No county match is required.

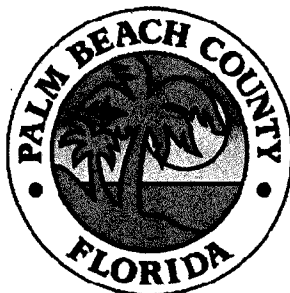
The complete application will be placed on the next agenda item for ratification.

Attachments: Grant Application and Signature Pages

 7/1/09       07/01/2009  
County Attorney      Date      OFMB      Date

Department of Children & Families  
Office on Homelessness

Homeless Continuum of Care  
Challenge Grant  
CSFA 60.014  
FY 2010



Submitted by

Palm Beach County, Division of Human Services  
810 Datura Street  
West Palm Beach, Florida 33401

July 6, 2009

**Original Document**

**Challenge Grant  
FY 2010**

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**Challenge Grant  
FY 2010**

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July 1, 2009

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Robert Weisman



"An Equal Opportunity  
Affirmative Action Employer"

Mr. Tom Pierce, Executive Director  
Office on Homelessness  
1317 Winewood Boulevard  
PDHO, Building 3, Room 201  
Tallahassee, FL 32399-0700

RE: Homeless Continuum of Care Challenge Grants, FY 2010 CFSA 60.014

Dear Mr. Pierce:

Enclosed please find the Palm Beach County Homeless Continuum of Care 2010 Challenge Grant Application. The Palm Beach County Division of Human Services serves as the Lead Entity for the Homeless Continuum of Care in Palm Beach County and submits this grant application on behalf of the applicant agencies.

The amount of funding requested based on grant award levels is as follows:

Level 1 Award \$144,000	Level 2 Award \$96,000	Level 3 Award \$57,600	Applicant Agency	Type of Service	Level 1 # to be Served	Level 2 # to be Served	Level 3 # to be Served
\$72,000	\$48,000	\$28,800	Faith, Hope, Love, Charity, Inc.	Transitional Housing	40*	26*	16*
\$72,000	\$48,000	\$28,800	Salvation Army, A Georgia Corporation	Transitional Housing	73*	49*	29*

\* Unit Cost adjusted to funding allocation.

The point of contact for the grant is as follows:

Georgiana Devine  
Homeless Program and Contract Manager  
Palm Beach County Division of Human Services  
810 Datura Street  
West Palm Beach, Florida 33401  
Telephone: 561-355-4778  
FAX: 561-355-4801

Thank you for your consideration of our grant.

Sincerely,

Claudia H. Tuck, LCSW  
Division Director

**Exhibit M**

**Checklist 2010 Challenge Grant Document**

<u>Threshold/Scoring</u>		<u>Your application Page #'s</u>
<u>Threshold</u>	<ul style="list-style-type: none"> <li>• Original signed certification of consistency with the continuum of care plan</li> </ul>	<u>10</u>
<u>Threshold</u>	<ul style="list-style-type: none"> <li>• Evidence from your 2008, as amended continuum of care plan of the inclusion of activities to be funded under the application, clearly denoting the use, the agency performing the activity, and that state funding will be sought to support the use.</li> </ul>	<u>11-15</u>
<u>Threshold</u>	<ul style="list-style-type: none"> <li>• Exhibits F and G, budget forms, are contained in application.</li> </ul>	<u>4-9</u>
<u>Scoring</u>	<p><u>Quality of Services</u></p>	
	<ul style="list-style-type: none"> <li>• Exhibit C, Quality of Service: Certification, has original signature</li> </ul>	<u>18-21</u>
	<ul style="list-style-type: none"> <li>• The following charts from your 2008 Exhibit 1 Continuum of Care plan"               <ul style="list-style-type: none"> <li>a. Chart 4B, Chronic Homeless Progress Chart</li> <li>b. 2007 Goals Achieved, Chart 4A</li> <li>c. Chart 4D, Mainstream Programs &amp; Employment Project Performance Chart</li> <li>d. Chart 4C, Housing Performance Chart</li> <li>e. Housing Inventory Charts for Permanent Supportive Housing</li> <li>f. Housing Inventory Charts for Emergency Shelter/Safe Haven</li> <li>g. Housing Inventory Charts for Transitional Housing</li> <li>h. Housing Inventory Charts for Safe Haven</li> <li>i. Chart 2I, Homeless Population and Subpopulation Chart</li> <li>j. Unexecuted Grants Awarded Prior to the 2007 CoC Competition (Exhibit L to Application. Instructions</li> </ul> </li> </ul>	<u>22 - 32</u>
		<u>22</u>
		<u>23</u>
		<u>24</u>
		<u>25</u>
		<u>26</u>
		<u>27</u>
		<u>28</u>
		<u>29</u>
		<u>30-31</u>
		<u>32</u>



Scoring Leverage

Your application page #'s

- Exhibit D: Leveraged Funding, has original signature 33 – 35
- For each and every McKinney-Vento grant award claimed as leverage, the fully executed grant award letter, dated between July 1, 2008 and June 30, 2009 is attached Begins on 36  
Ends on 75

For each and every participating continuum of care agency claiming private cash received within July 1, 2008 and June 30, 2009, a letter on agency letterhead, signed by the chief executive officer is attached stating the amount of cash received, and the homeless services supported by that cash.

Begins on 76  
Ends on 84

Scoring Need

- Exhibit E, Certification of Estimated Need per Catchment Area Population, has original signature. 85
- Continuum of Care Homeless Population and Subpopulations Charts for the last three years: 86-100
  - a.. 2007 HUD Form 40090-1, CoC - K 86
  - b. Chart 2I, 2008 HUD Exhibit 1 Plan 89 - 90

## Exhibit F

### Budget Form

<u>Persons</u>		<u>Agency</u>	<u>Existing</u>	<u>New</u>	<u>Number of</u>
<u>To Be</u>					<u>Homeless</u>
<u>Grant Activity/Use</u>	<u>\$ Requested</u>	<u>Provider Name</u>	<u>Service</u>	<u>Service</u>	<u>Served</u>
1 Transitional Housing	\$72,000	Salvation Army	X		73
2 Transitional Housing	\$72,000	Faith, Hope, Love	X		40
3 _____	_____	Charity, Inc.			
4 _____	_____	_____			
5 _____	_____	_____			
<b>TOTAL GRANT</b>	<b>\$144,000</b>				<b>113</b>

Total Persons  
To Be Served

#### Instructions

Please list your grant activity or use in order of priority. The maximum grant shall be \$144,000 in 2008. Only the top four (4) applications shall receive this level of award. All other grants will be awarded at \$96,000, \$57,600 or less, depending on the ranking of the application and available funding. Your order of use on this form shall be used to set the approved budget, if your award is at a lower grant level. Alternatively, you may submit three Exhibit F forms; one for each grant award level.

1. Grant Activity / Use  
Please use the same title or description used in the narrative. Be sure to identify and list each activity to be funded, if more than one is proposed for funding.
2. \$ Requested  
List the amount of Challenge Grant requested for each activity or use separately and the total amount of the Challenge Grant requested.
3. Provider Name  
Identify the specific entity, person, or agency to carry out each activity or use of the Challenge Grant Funding. If the lead agency will perform the activity directly, cite the name of the lead agency. If another entity will carry out the activity under contract with the lead agency, provide the legal name of that entity.
4. Existing or New Service  
Specify whether the activity or use to be funded will support an existing service or use, or whether the funded activity is a new service to fulfill an unmet need.
5. Number of Homeless Persons Served  
For each activity, identify the estimated number of homeless persons to be served.

**Exhibit F**

**Budget Form**

<b><u>Persons</u></b>		<b><u>Agency</u></b>	<b><u>Existing</u></b>		<b><u>New</u></b>	<b><u>Number of</u></b>
			<b><u>Service</u></b>	<b><u>Service</u></b>		<b><u>Homeless</u></b>
<b><u>To Be</u></b>	<b><u>\$ Requested</u></b>	<b><u>Provider Name</u></b>	<b><u>Service</u></b>	<b><u>Service</u></b>		<b><u>Served</u></b>
1 <u>Transitional Housing</u>	<u>\$48,000</u>	<u>Salvation Army</u>	<u>X</u>			<u>49</u>
2 <u>Transitional Housing</u>	<u>\$48,000</u>	<u>Faith, Hope, Love</u>	<u>X</u>			<u>26</u>
3 _____	_____	<u>Charity, Inc.</u>				
4 _____	_____	_____				
5 _____	_____	_____				
<b>TOTAL GRANT</b>	<b><u>\$96,000</u></b>					<u>75</u>

Total Persons  
To Be Served

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## Exhibit F

### Budget Form

<u>Persons</u>		<u>Agency</u>	<u>Existing</u>	<u>New</u>	<u>Number of</u>
<u>To Be</u>					<u>Homeless</u>
<u>Grant Activity/Use</u>	<u>\$ Requested</u>	<u>Provider Name</u>	<u>Service</u>	<u>Service</u>	<u>Served</u>
1 Transitional Housing	\$28,800	Salvation Army	X		29
2 Transitional Housing	\$28,800	Faith, Hope, Love	X		16
3 _____	_____	Charity, Inc.			
4 _____	_____				
5 _____	_____				
<b>TOTAL GRANT</b>	<b>\$57,600</b>				<b>45</b>

Total Persons  
To Be Served

### Instructions

Please list your grant activity or use in order of priority. The maximum grant shall be \$144,000 in 2008. Only the top four (4) applications shall receive this level of award. All other grants will be awarded at \$96,000, \$57,600 or less, depending on the ranking of the application and available funding. Your order of use on this form shall be used to set the approved budget, if your award is at a lower grant level. Alternatively, you may submit three Exhibit F forms; one for each grant award level.

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5. **Number of Homeless Persons Served**  
For each activity, identify the estimated number of homeless persons to be served.

## Exhibit G

### Expenditure Schedule

	<u>Grant Activity/Use</u>	<u>\$ Budgeted</u>	<u>Estimate Draw By Quarter Ending</u>			
			<u>9/30/09</u>	<u>12/31/09</u>	<u>3/31/10</u>	<u>6/30/10</u>
1.	Transitional Housing	\$72,000	\$18,000	\$18,000	\$18,000	\$18,000
2.	Transitional Housing	\$72,000	\$18,000	\$18,000	\$18,000	\$18,000
3.		\$	\$	\$	\$	\$
4.		\$	\$	\$	\$	\$
5.		\$	\$	\$	\$	\$
<b>TOTAL GRANT</b>		<b>\$144,000</b>	<b>\$36,000</b>	<b>\$36,000</b>	<b>\$36,000</b>	<b>\$36,000</b>

**NOTE:**

The funding for the Challenge Grant is state general revenue. It is estimated that no more than 25 percent of the grant budget authority will be released in each quarter of the fiscal year. It may be less than 25 percent. Accordingly, the lead agency shall manage the expenditures to assure that funding available for grant activities is spread across the fiscal year. The actual amount of the release of the Challenge Grant funds may be less than 25% per quarter, and the Department may be required to adjust the quarterly draws accordingly.

**ALL GRANT FUNDS SHALL BE OBLIGATED, AND SERVICES PROVIDED BY JUNE 30, 2010.  
FURTHER, ALL CHALLENGE GRANT FUNDS SHALL BE DRAWN PRIOR TO JUNE 30, 2010.**

AS WITH EXHIBIT F, you may submit three Exhibit G forms to correspond to the three possible grant award levels.

## Exhibit G

### Expenditure Schedule

	<u>Grant Activity/Use</u>	<u>\$ Budgeted</u>	<u>Estimate Draw By Quarter Ending</u>			
			<u>9/30/09</u>	<u>12/31/09</u>	<u>3/31/10</u>	<u>6/30/10</u>
1.	Transitional Housing	\$48,000	\$12,000	\$12,000	\$12,000	\$12,000
2.	Transitional Housing	\$48,000	\$12,000	\$12,000	\$12,000	\$12,000
3.		\$	\$	\$	\$	\$
4.		\$	\$	\$	\$	\$
5.		\$	\$	\$	\$	\$
<b>TOTAL GRANT</b>		<b>\$96,000</b>	<b>\$24,000</b>	<b>\$24,000</b>	<b>\$24,000</b>	<b>\$24,000</b>

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			<u>9/30/09</u>	<u>12/31/09</u>	<u>3/31/10</u>	<u>6/30/10</u>
1.	Transitional Housing	\$28,800	\$7,200	\$7,200	\$7,200	\$7,200
2.	Transitional Housing	\$28,800	\$7,200	\$7,200	\$7,200	\$7,200
3.	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
4.	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
5.	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL GRANT</b>		<b>\$57,600</b>	<b>\$14,400</b>	<b>\$14,400</b>	<b>\$14,400</b>	<b>\$14,400</b>

**NOTE:**

The funding for the Challenge Grant is state general revenue. It is estimated that no more than 25 percent of the grant budget authority will be released in each quarter of the fiscal year. It may be less than 25 percent. Accordingly, the lead agency shall manage the expenditures to assure that funding available for grant activities is spread across the fiscal year. The actual amount of the release of the Challenge Grant funds may be less than 25% per quarter, and the Department may be required to adjust the quarterly draws accordingly.

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AS WITH EXHIBIT F, you may submit three Exhibit G forms to correspond to the three possible grant award levels.



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*"An Equal Opportunity  
Affirmative Action Employer"*

July 1, 2009

Mr. Tom Pierce, Executive Director  
Office on Homelessness  
1317 Winewood Boulevard  
PDHO, Building 3, Room 201  
Tallahassee, FL 32399-0700

RE: Certification of Consistency with Continuum of Care Plan

Dear Mr. Pierce:

Enclosed please find the Palm Beach County Continuum of Care 2010 Challenge Grant Application. This letter certifies the applicant agencies proposed services are consistent with the Continuum of Care Plan. The Continuum of Care Plan is enclosed for your reference with the applicant agencies highlighted, including the service(s) to be provided. The plan may be found in the amended 2007 Exhibit 1, Chart N, CoC 10-Year Plan, Objectives, and Action Steps Chart, submitted to your office along with this grant application.

Additionally, the Palm Beach County Continuum of Care 2008 Housing Inventory Chart for Transitional Housing is enclosed for your reference with the two applicant agencies providing Transitional Housing highlighted. The Palm Beach County Continuum of Care has identified Transitional Housing for Veterans as a funding priority in view of: 1) diminishing funding for Transitional Housing from HUD and 2) the growing need for programs that can help our returning soldiers reintegrate into society after their tours in Iraq and Afghanistan, many of whom struggle with mental health problems and addiction.

Funding received from the Office on Homelessness through the 2010 Challenge Grant will support these services as outlined in the application and reflected in the Continuum of Care Plan and Housing Inventory Charts.

Sincerely,

Claudia H. Tuck, LCSW  
Division Director



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

Objectives to End Chronic Homelessness and Move Families and Individuals to Permanent Housing	2007 Local Action Steps How are you going to do it? List action steps to be completed within the next 12 months.	Lead Person List name and title or organization of one person responsible for accomplishing each action step.	Baseline (Current Level)	Numeric Achievement in 12 months	Numeric Achievement in 5 years	Numeric Achievement in 10 years
1. Create new PH beds for chronically homeless persons.	Implement Project Succeed 3 (8 beds)	Rhonda Counes, Assistant Vice President, Gulfstream Goodwill Industries,	71 Beds	8 Beds	30 Beds	60 Beds
2. Increase percentage of homeless persons staying in PH over 6 months to at least 71%.	Implement Peer Mentoring Program to serve 30 individuals the first year	Missy Malaney, The Lord's Place, Chair – Housing Services Committee	59%	71%	73%	75%
	Participants will utilize available benefit software ie: Benefits Navigator and Medicator and/or educational opportunities to increase self sufficiency.	Carol Shaffer, Division of Human Services				
3. Increase percentage of homeless persons moving from TH to PH to at least 61.5%.	Create 49 new PH beds through Community Land Trust (Adopt A Family)	Wendy Tippett, Adopt A Family	55%	61.5%	63%	65%
	Convert 212 TH beds for families to PSH (Adopt A Family and The Lord's Place)	Wendy Tippett, Adopt A Family Missy Malaney, The Lord's Place				
	Convert 15 TH beds for individuals to PSH beds ( The Lord's Place)	Missy Malaney, The Lord's Place				
4. Increase percentage of homeless persons employed at exit to at least 18%.	Enroll clients 300 in Prosperity Centers and Job Readiness Programs	Carol Shaffer, Division of Human Services	38%	40%	42%	44%
	Enroll 20 clients in Chef's Apprentice Program	Missy Malaney, The Lord's Place				
	Enroll 100 clients in Educational And Vocational Program	Carol Shaffer, Division of Human Services				

5. Ensure that the CoC has a functional HMIS system.	Increase the number of HMIS licenses to non-HUD funded programs that serve homeless	Chris Harris, HMIS Lead Agency and HMIS Steering Committee	Maintain 100% Bed Coverage for HUD funded beds	Maintain 100% Bed Coverage for HUD funded beds	Maintain 100% Bed Coverage for HUD funded beds	Maintain 100% Bed Coverage for HUD funded beds
	Increase percentage of non-HUD funded programs that regularly enter data into HMIS					
	Participate in a National HUD Data Integrity Program	Chris Harris, HMIS Lead Agency and HMIS Steering Committee				
	Provide training and updates to HMIS participants to improve data integrity of the HUD APR	Chris Harris, HMIS Lead Agency and HMIS Steering Committee				
	Generate aggregated statistical client data for HUD AHAR Report	Chris Harris, HMIS Lead Agency and HMIS Steering Committee				

**Barriers: If your CoC will not meet one or more of the above objectives, briefly describe why not (use less than two paragraphs).**

**Other CoC Objectives in 2007**

1. Create and Publish 10-Year Plan to End Homelessness	Homeless Advisory Board will conduct six (6) Strategic Planning Workshops to finalize draft 10 Year Plan.	Georgiana Devine, PBC Division of Human Services & Monique Elton, Langton Associates	Complete assessment of current homeless delivery system	Finalize 10-year plan and present to Board of County Commissioners	Submit progress and achievement report as well as any revisions to 10 Year Plan to Board of County Commissioners	Submit 10-year review of achievements and outcomes of 10 Year Plan to Board of County Commissioners
	Individual and Family Strategic Planning Sub-Committees will conduct four planning workshops to finalize evaluation and assessment of current homeless service delivery system and present written documentation to Advisory Board for inclusion in 10-Year Plan	Georgiana Devine, PBC Division of Human Services & Monique Elton, Langton Associates				
	Submit 10-Year Plan to End Homelessness for approval by Board of County Commissioners.	Georgiana Devine, PBC Division of Human Services & Monique Elton, Langton Associates				

2. Ensure Faith-based Community is represented	Participate in the Interfaith Hospitality Network through development of Family Promise (a national model ) to provide housing to 5 homeless families and linkage to housing resources	Carol Shaffer, PBC Division of Human Services	Individual Interfaith Organizations develop a hospitality network	Individual Hospitality Network is implemented	Increase the number of Interfaith Hospitality Networks and increase participation of Faith Based Organizations in the CoC	Expand the percentage of Faith-based organization that participate in the CoC and develop a County Wide Faith Based Network
3. Advocate for Affordable Housing	Acquire surplus housing list as mandated by state legislature HB 1363 from each municipality to evaluate for future planning and use.	Matt Constantine, Adopt A Family	Acquire surplus housing list	Identify non-profit organizations to utilize surplus housing	Develop and produce 30 new housing units	Develop and produce 50 new housing units
4. Advocate for the Needs of the Homeless	Establish a legislative committee	Wendy Tippet, Adopt A Family	Legislative Committee will be developed by October 2007.	Develop Legislative agenda	Establish partnership with Homeless Advisory Board, CoC Members and Florida Coalition for the Homeless to develop a united agenda to present to legislature	Full release of State of Florida Housing Trust Fund Funding
5. Expand Health Services to Homeless Individuals/ Families by facilitating access to comprehensive array of medical/health services	Provide Health related services to Homeless Individuals and Families from non mainstream resources.	Carol Shaffer, PBC Division of Human Services	Establish a Tracking Mechanism by June 2007	150 additional health services will be provided	165 additional health services will be provided	180 additional health services will be provided
6. Increase the number of permanent housing beds based on the State of Florida's definition of homelessness	Create 74 PSH beds in western Palm Beach County through the Mc Curdy Project for homeless individuals	Joe Glucksman, Florida Housing Corporation	0	Obtain a certificate of occupancy	74	74
7. Maintain quality housing standards in current housing inventory.	Adopt-A-Family of the Palm Beaches will apply for ESG funds to rehabilitate Project Safe, a 128 bed transitional housing program for families.	Wendy Tippet, Adopt-A-Family	Apply for ESG funds September 2007	Rehab 32 apartments.		
8. Increase homeless prevention services.	Center for Family Services will apply for ESG funds for homeless prevention services.	Dorla Leslie, Center for Family Services	Apply for ESG funds Sept. 2007	Serve 27 families.		

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9. Increase emergency shelter beds.	Realign usage of existing shelter beds to address local need for emergency shelter beds for chronically homeless males.	Diana Stanley, The Lord's Place	Apply for state grant funds for emergency shelter	Serve up to 30 individuals on any given night.		
10. Increase emergency shelter beds.	Address local need for emergency shelter beds for homeless veterans.	Roy Foster, Faith, Hope, Love, Charity, Inc.	Apply for state grant funds for emergency shelter	Serve up to 15 individuals on any given night.		
11. Increase homeless prevention services.	Prevent homelessness and ensure ongoing housing stability for pregnant mothers and families with children.	Julie Swindler, Families First	Apply for state grant funds for homeless prevention.	Serve up to 50 households.		
12. Increase homeless prevention services.	Prevent homelessness and ensure ongoing housing stability for individuals with disabilities and families with a member with a disability.	Genevieve Cousminer, Coalition for Independent Living Options	Apply for state grant funds for homeless prevention.	Serve up to 40 households.		
13. Support existing transitional housing beds for homeless veterans.	Address local need for transitional housing beds for homeless veterans.	Roy Foster, Faith, Hope, Love, Charity, Inc.	Apply for state grant funds for transitional housing.	Serve up to 21 individuals on any given night.		
14. Support existing transitional housing beds for homeless veterans.	Address local need for transitional housing beds for homeless veterans.	Greg Rydman, The Salvation Army Center of Hope	Apply for state grant funds for transitional housing.	Serve up to 45 individuals on any given night.		



**Narrative Section**

The activities to be funded under the Challenge grant include Transitional Housing for homeless Veterans. Two local organizations will be funded to provide services as outlined below:

**Faith\*Hope\*Love\*Charity, Inc. (Stand Down House)**

*Population To Be Served:* Single/chronic homeless veterans meeting HUD's definition of homelessness, with an emphasis on veterans with substance abuse and/or psychiatric conditions.

*Services to Be Provided:* Stand Down House provides a multi-tier transitional housing program designed to provide the veterans with tools and services necessary for personal achievement and the skills to maintain drug-free lifestyles. These services include transitional housing, comprehensive health care through the West Palm Beach VA Medical Center, access to filing of benefit claims, group and individual counseling (including PTSD and sexual abuse), individual training, and employment assistance.

The Stand Down House offer services to successfully assist residents to make a smooth transition from treatment to employment and from dependence to independence. The project is designed to provide transitional housing for honorably discharged veterans who have a desire to gain part/full-time employment, maintain sobriety and become independent, economically self-sufficient, productive citizens within the community. The services consist of daily peer support groups, psycho-educational lectures, in house and community based Alcoholics/Narcotics Anonymous meetings, Case Management, and social activities which include bowling, picnics, fishing and movies. The anticipated outcomes are established and measurable goals created by the agency Board of Directors who have consulted with the West Palm Beach Veteran Medical Center, VA Homeless Outreach Team and Stand Down House team which represent outcome-oriented elements.

**Performance Measures Narrative:**

- 86 % of residents will gain employment or attend classes;
- 90 % of residents will test negative on random alcohol/drug testing;
- 75% of residents will secure independent housing;
- 100% of residents will be entered into the CMIS (Service Point) database

**Budget Allocations**

\$144,000 in Challenge Grant Funding:

\$72,000.00 Transitional Housing - Stand Down House  
\$8.50/ day x 40 clients

\$96,000 in Challenge Grant Funding:

\$48,000.00 Transitional Housing – Stand Down House  
\$8.50/day x 26 clients

\$57,600 in Challenge Grant Funding:

\$28,800.00 Transitional Housing – Stand Down House  
\$8.50/day x 16 clients

**The Salvation Army - Center of Hope**

*Populations To Be Served:* Single adult homeless men and veterans meeting the HUD or VA definitions of homelessness, with an emphasis on persons with substance abuse issues, persons who are chronically homeless and / or those who suffer from co-occurring disorders of substance abuse/dependence and mental illness.

*Services to Be Provided:* The Center of Hope's two-year transitional housing program provides a full range of services designed to enable homeless individuals to obtain gainful employment and permanent housing. These services are offered within a Therapeutic Community environment and include substance abuse treatment, individual/group counseling, education (GED, computer skills, adult basic education), life skills (anger management, solution focus, building healthy relationships, nutrition, health and fitness, budgeting), drug education, NA/AA, employment assistance, and case management (including benefit applications, access to health care, long-term planning, and transitioning to independent housing).

**Performance Measures Narrative:**

- 100% of clients will be entered into the CMIS (Service Point) database
- 95% of clients will receive case management services
- 95% of clients will participate in program classes and activities
- 75% of clients will complete the 30-day orientation period
- 85% of clients who complete 3 months in the program will obtain employment

**Budget Allocations**

\$144, 000 in Challenge Grant Funding:

\$72,000.00 Transitional Housing – Center of Hope  
\$6.50/ day x 73 clients

\$96,000 in Challenge Grant Funding:

\$48,000.00 Transitional Housing – Center of Hope  
\$6.50/day x 49 clients

\$57,600 in Challenge Grant Funding:

\$28,800.00 Transitional Housing – Center of Hope  
\$6.50/day x 29 clients

## Exhibit C

### Quality of Service: Certification

#### 1. Chronic Homeless Goals/ Strategies: Past Performance

Using information from your 2008 Exhibit 1 Continuum of Care Plan, HUD Chart 4B, Chronic Homeless Progress Chart complete the following calculation.

New PH beds for Chronic Homeless (2/1/07 to 1/31/08)	<u>28</u>	Beds
Number of Permanent Beds for Chronic Homeless 2007	<u>71</u>	Beds

Divide the Number of New Beds (28) by the Total Permanent Beds in 2007 (71) to calculate the percentage change in Beds (39 %).

#### Documentation Required.

- Attach to this form, HUD Chart 4B (2008)

#### 2. Continuum of Care Achievements

Using information from Chart 4A, from your 2008 Exhibit 1 Plan, indicate the number of the five national objectives where your actual 12 month achievements for the continuums in 2007 equaled or exceeded the proposed achievement, found in the column "Proposed 12 Month Achievement."

3 Number of Proposed Achievements equaled or exceeded in 2007.

#### Documentation Required:

- Attach HUD Chart 4A (2008)

#### 3. Past Performance: Employment Income

Using information reported in your 2007 Exhibit 1 Plan, Chart 4D, Enrollment in Mainstream Programs and Employment Information Chart, enter the percentage of clients in all your projects who gained access to "employment income" at exit from the renewal projects. This data is reported as "employment income" under Income Source, with the percentage calculation reported in column 3, "Exit Percentage."

29 % of Adults with Employment Income at Exit  
       Check here if your continuum reported having no HUD projects on the form.

#### Documentation Required

- Chart 4D, Enrollment in Mainstream Programs and Employment Information Chart. (2008)

#### 4. Project Performance: Food Stamp Benefits

Using information reported in your 2008 Exhibit 1 Plan, Chart 4D, Enrollment in Mainstream Programs and Employment Information Chart, enter the percentage of clients in all your projects who gained access to "Food Stamps" at exit from the projects. This data is reported as "Food Stamps" under Income Source, with the percentage calculation reported in column 3, "Exit Percentage."

17 % of Adults with Food Stamps at Exit.  
       Check here if your continuum reported having no applicable HUD projects on the form.

- Documentation Required: Same as for 4 above. One copy only required.
- HUD Chart 4D, Enrollment in Mainstream Programs and Employment Information Performance Chart. (2008)



### 5. Project Performance - SSI

From your 2008 Exhibit 1 plan, report the percentage of clients in all your projects who had SSI income upon exit from the project. On HUD Chart 4D, report the percentage data as reported in "SSI" under Income Source, with the percentage calculation reported in column 3, "Exit Percentage."

  3   % of adults with SSI income at exit  
 Check here if your continuum reported having no applicable HUD projects on this form.

#### Documentation Required

- HUD Chart 4D, Enrollment in Mainstream Programs and Employment Information Chart. (2008). One copy only required for this form from 4 above.

### 6. Project Performance- SSDI

Using the HUD Chart 4D from your 2008 Exhibit 1 plan, report the percentage of clients in all your projects who had SSDI income upon exit from the project. Report the percentage data as required in "SSDI" under Income Source, with the percentage calculation reported in column 3, "Exit Percentage."

  3   % of adults with SSDI income at exit.  
 Check here if your continuum reported having no applicable projects on this form.

#### Documentation Required

- HUD Chart 4D Enrollment in Mainstream Programs. (2008)  
(Same as required for items 4, 5, and 6 above. One copy only required)

### 7. Project Performance: Permanency of Housing

From your 2008 Exhibit 1 Plan, report the percentage of the clients served with permanent housing who remained in this permanent housing for six months or longer. Using data reported on HUD Chart 4C, Housing Performance Chart, enter the percentage number reported in Participants in Permanent Housing, totaling the percentages from lines "c" and "d."

 64  % of Participants who stayed 6 months or longer.  
 Check here if your continuum reported having no applicable permanent housing projects.

#### Documentation Required

- HUD Chart 4C, Housing Performance Chart (2008)

### 8. Project Performance: Transition to Permanent Housing

Based on your 2008 Exhibit 1 Plan, report the percentage of all Transitional Housing Participants who moved to a permanent housing living arrangement. Using the data reported on HUD Chart 4C, Housing Performance Chart, enter the percentage number reported in Participants in Transitional Housing, item "b" [Number of participants who moved to permanent housing]

 65  % of participants in transitional housing who moved to permanent housing.  
 Check here if your continuum reported having no applicable transitional housing projects.

Documentation Required: Same as for 8 above, only one copy is required.

- HUD Chart 4C, Housing Performance Chart (2008)

**9. Homeless Management Information Systems (HMIS) Coverage.**

Using information contained in your 2008 Exhibit 1 Plan's Housing Inventory Charts (Chart 1G), fill in the following table, and calculate the percentage of all year round non-DV beds in emergency shelter, transitional housing, safe haven, and permanent supportive housing that are covered by HMIS, as defined in the instructions to the HUD form.

Housing Category	HMIS Covered # Year Round Beds			Year – Round Non DV Beds TOTAL Year Round
	Individual Column 1	Family Col. 2	Total Col. 3 (1+2)	Column. 4
A. Emergency Shelter	165	119	284	302
B. Transitional Housing	159	32	191	209
C. Perm. Supportive Housing	122	227	349	393
D. Safe Haven	14	0	14	14
E. TOTALS	460	378	838	918

Divide column 3, Total HMIS Covered Year Round Beds, by column 4, Total Year Round Non-DV Beds, to calculate the percentage of all year round beds for all housing categories that are covered by HMIS.

Line D. Column 3 838 divide by Line D. Column 4 918 equals 91 % of Year Round Beds Covered by HMIS (ALL HOUSING CATEGORIES).

**Documentation Required**

- HUD Chart 1G , Permanent Supportive Housing (2008)
- HUD Chart 1G Emergency Shelter (2008)
- HUD Chart 1G Transitional Housing (2008)
- HUD Chart 1G Safe Haven (2008)

**10. Homeless Population Sheltered**

Using information reported in your 2008 Exhibit 1 Plan's Homeless Population and Sub-population Chart, complete the calculation below for the percentage of homeless persons that are sheltered in emergency and transitional housing facilities. From HUD Chart 2I, enter the data below and complete the percentage calculation.

1,766 Total Homeless Persons in all Households (With dependent children and without dependent children).

727 Total Homeless Persons Sheltered in Emergency and Transitional housing for both households with and without dependent children.

Divide the Total Homeless Persons Sheltered 727 by the Total Homeless Persons 1,766 to determine the 41 % percentage of the Total Homeless Persons that are sheltered.

**Documentation Required**

- HUD Chart 2I (2008)

**11. Expanded Continuum of Care Catchment Area**

If your 2008 Exhibit 1 Plan has expanded its catchment area by one or more counties that were not covered by a continuum of care catchment area designated by the Office on Homelessness in 2007, please identify the county(s) added; or your continuum is new and represents one or more counties not covered by a plan in 2007.

N/A County(s) added to your Continuum: \_\_\_\_\_  
N/A New Continuum of Care covering county(s): \_\_\_\_\_

**12. Past Performance: Unexecuted HUD Grants.**

Using the information reported on Exhibit L to these instructions, report below the number of HUD McKinney-Vento Act awards announced prior to 2007 that are not yet under contract (i.e. signed grant agreement or executed ACC).

0 Total Number of McKinney-Vento Act awards Not Yet Under Contract.

Documentation Required

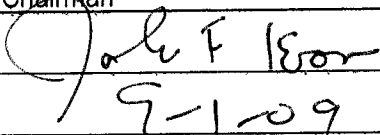
- Lead Agency Certification on Exhibit L

I hereby attest that all information reported above is true and accurate, based upon the evidence and documentation attached hereto, and made a part of this certification.

Name of Continuum of Care West Palm Beach/Palm Beach County CoC

Name of Lead Agency Palm Beach County Board of County Commissioners/Division of Human Services

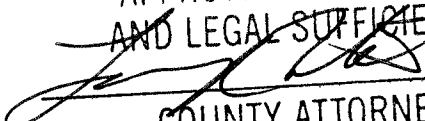
Name of Certifying Official John F. Koons, Chairman

Signature of Certifying Official 

Date Signed 9-1-09

**Failure to provide an original signed certification for quality of service shall be cause for the application to ranked last on the quality of service preference criteria.**

**Failure to attach the "Documentation Required" for any of the items above shall be cause for that item to receive Zero Points. Please check to ensure that all required documentation is attached immediately following this certification in your application.**

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY  
  
COUNTY ATTORNEY

## 4B. Continuum of Care (CoC) Chronic Homeless Progress

Complete the following fields using data from the last point-in-time (PIT) count and housing inventory count. For additional instructions, refer to the detailed instructions available on the left menu bar.

Indicate the total number of chronically homeless persons and total number of permanent housing beds designated for the chronically homeless persons in your CoC for each year

Year	Number of CH Persons	Number of PH beds for the CH
2006	119	68
2007	329	71
2008	329	99

Indicate the number of new PH beds in place 28  
and made available for occupancy for the  
chronically homeless between February 1,  
2007 and January 31, 2008

Identify the amount of funds from each funding source for the  
development and operations costs of the new CH beds created between  
February 1, 2007 and January 31, 2008.

Cost Type	HUD McKinney-Vento	Other Federal	State	Local	Private
Development	\$0	\$0	\$0	\$0	\$0
Operations	\$402,109	\$0	\$0	\$222,463	\$50,159
Total	\$402,109	\$0	\$0	\$222,463	\$50,159

## 4A. Continuum of Care (CoC) 2007 Achievements

### Instructions:

For the five HUD national objectives in the 2007 CoC application, enter the 12-month numeric achievements that you provided in Exhibit 1, Chart N of the 2007 CoC application in the first column, "Proposed 12-Month Achievement". Under "Actual 12-Month Achievement" enter the numeric achievement that you CoC attained within the past 12 months that is directly related to the relevant national objective.

Objective	Proposed 12-Month Achievement (number of beds or percentage)	Actual 12-Month Achievement (number of beds or percentage)
Create new PH beds for CH	8 Beds	8 Beds
Increase percentage of homeless persons staying in PH over 6 months to at least 71%	71 %	64 %
Increase percentage of homeless persons moving from TH to PH to at least 61.5%	62 %	64 %
Increase percentage of homeless persons employed at exit to at least 18%	40 %	29 %
Ensure that the CoC has a functional HMIS system	100 %	100 %

## 4D. Continuum of Care (CoC) Enrollment in Mainstream Programs and Employment Information

Using data from the most recently submitted APRs for each of the projects within the CoC, provide information about the CoCs progress in reducing homelessness by helping clients access mainstream services and gain employment.

Total Number of Exiting Adults: 496

Mainstream Program	Number of Exiting Adults	Exit Percentage (Auto-calculated)
SSI	13	3 %
SSDI	15	3 %
Social Security	2	0 %
General Public Assistance	2	0 %
TANF	9	2 %
SCHIP	2	0 %
Veterans Benefits	5	1 %
Employment Income	144	29 %
Unemployment Benefits	0	0 %
Veterans Health Care	19	4 %
Medicaid	59	12 %
Food Stamps	86	17 %
Other (Please specify below)	56	11 %
Health Care District / WIC/Child Support/Medicare		
No Financial Resources	17	3 %

The percentage values are automatically calculated by the system when you click the "save" button.

## 4C. Continuum of Care (CoC) Housing Performance

Using data from the most recently submitted APRs for each of the projects within the CoC, provide information about the CoCs progress in reducing homelessness by helping clients move to and stabilize in permanent housing.

Participants in Permanent Housing (PH)	
a. Number of participants who exited permanent housing project(s)	112
b. Number of participants who did not leave the project(s)	149
c. Number of participants who exited after staying 6 months or longer	73
d. Number of participants who did not exit after staying 6 months or longer	93
e. Number of participants who did not leave and were enrolled for 5 months or less	56
<b>TOTAL PH (%)</b>	<b>64</b>
Participants in Transitional Housing (TH)	
a. Number of participants who exited TH project(s), including unknown destination	384
b. Number of participants who moved to PH	250
<b>TOTAL TH (%)</b>	<b>65</b>

### Housing Inventory Chart: Permanent Supportive Housing

Total Year-Round Beds - Individuals	
1. Current Year-Round Individual Permanent Housing (PH) Beds	166
1A. Number of DV Year-Round Individual PH Beds	0
1B. Subtotal, non-DV Year-Round Individual PH Beds	166
2. New Year-Round Individual PH beds	83
3. Under Development Year-Round Individual Beds	40
4. Total Year Round Individual PH Beds in HMIS	122
5. HMIS Bed Coverage: Individual PH Beds	73%

**KEY: Inventory type**  
 C: Current Inventory  
 N: New Inventory  
 U: Under development

Total Year-Round Beds - Families	
6. Current Year-Round Family Permanent Housing (PH) Beds:	227
6A. Number of DV Year-Round Family PH Beds:	0
6B. Subtotal, non-DV Year-Round Family PH Beds	227
7. New Year-Round Family PH Beds	212
8. Under Development Year-Round Family PH Beds	46
9. Total Year-Round Family PH Beds in HMIS	227
10. HMIS Bed Coverage: Family PH Beds	100%

**KEY: Target Population A and B**  
 SM: single males                      YF: youth females  
 SF: single females                    YMF: youth males and females  
 SMF: single males and females      SMF + HC: Single male and female plus households with children  
 CO: couples only, no children  
 SMHC: single males and households with children  
 SFHC: single females and households with children  
 HC: households with children        DV - Domestic Violence victims only  
 YM: youth males                        VET - Veterans only  
     HIV - HIV/AIDS populations only

**Error Messages**  
 ERROR MSG: PROGRAM DETAILS    None  
 ERROR MSG: FAMILY BEDS/UNITS   None  
 ERROR MSG: DV HMIS COVERAGE   None

Program Information				Target Population	HUD Funding Information	All Year-Round Beds/Units					Year-Round Beds covered in HMIS				PIT Counts	Utilization Rates		
#	Provider	Facility Name	Geo Code	Inventory type	A	B	Does this facility receive HUD McKinney-Vento funding?	Family Beds	Family Units	Individual Beds	CH Beds	Total Year-Round Beds	Year-Round Family beds covered in HMIS	Year-Round Individual Beds covered in HMIS	Percentage family beds covered in HMIS	Percentage individual beds covered in HMIS	Point-in-Time Homeless Count	Program Utilization Rate
PH1	Adopt-A-Family of the Palm Beaches, Inc.	Project Safe II	129099	N	HC		Yes	128	32	0	0	128	128	0	100%		95	74%
PH2	Adopt-A-Family of the Palm Beaches, Inc.	Reynolds Gardens	129099	U	HC		No	46	9	0	0	46	0	0	0%		0	0%
PH3	Gulfstream Goodwill Industries, Inc.	Project Succeed 1	129099	N	SMF		Yes	0	0	2	2	2	0	2		100%	2	100%
PH4	Gulfstream Goodwill Industries, Inc.	Project Succeed 1	129099	C	SMF		Yes	0	0	11	7	11	0	11		100%	9	82%
PH5	Gulfstream Goodwill Industries, Inc.	Project Succeed II	129099	C	SMF		Yes	0	0	13	3	13	0	13		100%	11	85%
PH6	Gulfstream Goodwill Industries, Inc.	Project Succeed 3	129099	N	SMF		Yes	0	0	8	8	8	0	8		100%	0	0%
PH7	Gulfstream Goodwill Industries, Inc.	Project Succeed 4	129099	U	SMF		Yes	0	0	32	3	32	0	32		100%	0	0%
PH8	Housing Partnership, Inc.	St. Charles Place	129099	N	SMF		No	0	0	11	0	11	0	0		0%	10	91%
PH9	Housing Partnership, Inc.	Celtic Apartments	129099	N	SMF		No	0	0	16	0	16	0	0		0%	16	100%
PH10	Oakwood Center of the Palm Beaches, Inc.	Flagler Project	129099	C	SMF		Yes	0	0	15	12	15	0	15		100%	15	100%
PH11	Oakwood Center of the Palm Beaches, Inc.	Project Home	129099	C	SMF		Yes	0	0	17	16	17	0	17		100%	17	100%
PH12	Oakwood Center of the Palm Beaches, Inc.	Project Home II	129099	N	SMF		Yes	0	0	8	8	8	0	8		100%	8	100%
PH13	Operation Hope, Inc.	Serenity House II	129099	C	SMF+HC		Yes	15	4	2	0	17	15	2	100%	100%	13	76%
PH14	Operation Hope, Inc.	Rebirth House	129099	C	SM		No	0	0	17	0	17	0	0		0%	17	100%
PH15	The Lord's Place, Inc.	Joshua House	129099	N	SM		Yes	0	0	20	17	20	0	20		100%	17	85%
PH16	The Lord's Place, Inc.	Project Family Care	129099	N	HC		Yes	84	24	0	0	84	84	0	100%		60	71%
PH17	The Lord's Place, Inc.	Operaton Home-Ready	129099	U	SM		Yes	0	0	8	8	8	0	8		100%	0	0%
PH18	Palm Beach County Board of County Commissioners	ALF Program	129099	N	SMF		No	0	0	18	18	18	0	18		100%	18	100%
PH19	Palm Beach County Board of County Commissioners	ALF Program	129099	C	SMF		No	0	0	8	8	8	0	8		100%	8	100%
	Insert provider name											0						
	Insert provider name											0						
	Insert provider name											0						
	Insert provider name											0						





## Housing Inventory Chart: Transitional Housing

Total Year-Round Beds - Individuals	
1. Current Year-Round Individual Transitional Housing (TH) Beds	177
1A. Number of DV Year-Round Individual TH Beds	0
1B. Subtotal, non-DV Year-Round Individual TH Beds	177
2. New Year-Round Individual TH Beds	12
3. Under Development Year-Round Individual Beds	0
4. Total Year Round Individual TH Beds in HMIS	159
5. HMISBed Coverage: Individual TH Beds	90%

KEY: Inventory type
C: Current Inventory
N: New Inventory
U: Under development

Total Year-Round Beds - Families	
6. Current Year-Round Family Transitional Housing (TH) Beds:	110
6A. Number of DV Year-Round Family TH Beds:	78
6B. Subtotal, non-DV Year-Round Family TH Beds	32
7. New Year-Round Family TH Beds	0
8. Under Development Year-Round Family TH Beds	0
9. Total Year-Round Family TH Beds in HMIS	32
10. HMIS Bed Coverage: Family TH Beds	100%

KEY: Target Population A and B	
SM: single males	YF: youth females
SF: single females	YMF: youth males and females
SMF: single males and females	SMF + HC: Single male and female plus
CO: couples only, no children	households with children
SMHC: single males and households with c	
SFHC: single females and households with	DV - Domestic Violence victims only
HC: households with children	VET - Veterans only
YM: youth males	HIV - HIV/AIDS populations only

Error Messages	
ERROR MSG: PROGRAM DETAILS	None
ERROR MSG: FAMILY BEDS/UNITS	None
ERROR MSG: DV HMIS COVERAGE	None

#	Program Information				Target Population		HUD Funding Information	All Year-Round Beds/Units				Year-Round Beds covered in HMIS				PIT Counts	Utilization Rates
	Provider	Facility Name	Geo Code	Inventory type	A	B	Does this facility receive HUD McKinney-Vento funding?	Family Beds	Family Units	Individual Beds	Total Year-Round Beds	Year-Round Family beds covered in HMIS	Year-Round Individual Beds covered in HMIS	Percentage family beds covered in HMIS	Percentage individual beds covered in HMIS	Point-in-Time Homeless Count	Program Utilization Rate
TH1	Aid to Victims of Domestic Abuse, Inc.	Transitional Housing	129099	C	HC	DV	Yes	32	8	0	32	0	0	0%		25	78%
TH2	Children's Home Society of Florida, Inc.	Transitions Home	129099	C	HC		Yes	12	5	0	12	12	0	100%		10	83%
TH3	Gulfstream Goodwill Industries, Inc.	Project Success	129099	C	SMF		Yes	0	0	30	30	0	30		100%	30	100%
TH4	Housing Partnership, Inc.	Crossroads	129099	N	SMF		No	0	0	12	12	0	0		0%	7	58%
TH5	Housing Partnership, Inc.	Recovery Village	129099	C	HC		Yes	20	5	0	20	20	0	100%		17	85%
TH6	Faith, Hope, Love, Charity, Inc.	Stand Down House	129099	C	SM	VET	Yes	0	0	21	21	0	21		100%	17	81%
TH7	The Phoenix House	The Phoenix House	129099	C	SM		No	0	0	6	6	0	0		0%	6	100%
TH8	Oakwood Center of the Palm Beaches, Inc.	Phoenix II	129099	C	SMF		No	0	0	23	23	0	23		100%	19	83%
TH9	The Salvation Army, A Georgia Corporation	The Center of Hope	129099	C	SMF		Yes	0	0	85	85	0	85		100%	58	88%
TH10	YWCA of Palm Beach County	Harmony House West	129099	C	HC	DV	Yes	46	10	0	46	0	0	0%		26	57%
	<i>Insert provider name</i>										0						

### Housing Inventory Chart: Safe Haven Housing

Total Year-Round Beds - Individuals	
1. Current Year-Round Individual Safe Haven (SH) Beds	14
1A. Number of DV Year-Round Individual SH Beds	0
1B. Subtotal, non-DV Year-Round Individual SH Beds	14
2. New Year-Round Individual SH beds	14
3. Under Development Year-Round Individual Beds	0
4. Total Year Round Individual SH Beds in HMIS	14
5. HMIS Bed Coverage: Individual SH Beds	100%

KEY: Inventory type	
C:	Current inventory
N:	New Inventory
U:	Under development

Total Year-Round Beds - Families	
6. Current Year-Round Family Save Haven (SH) Beds:	0
6A. Number of DV Year-Round Family SH Beds:	0
6B. Subtotal, non-DV Year-Round Family SH Beds	0
7. New Year-Round Family SH Beds	0
8. Under Development Year-Round Family SH Beds	0
9. Total Year-Round Family SH Beds in HMIS	0
10. HMIS Bed Coverage: Family SH Beds	0

KEY: Target Population A and B			
SM:	single males	YF:	youth females
SF:	single females	YMF:	youth males and females
SMF:	single males and females	SMF + HC:	Single male and female plus households with children
CO:	couples only, no children		
SMHC:	single males and households with c		
SFHC:	single females and households with	DV -	Domestic Violence victims only
HC:	households with children	VET -	Veterans only
YM:	youth males	HIV -	HIV/AIDS populations only

Error Messages	
ERROR MSG: PROGRAM DETAILS	None
ERROR MSG: FAMILY BEDS/UNITS	None
ERROR MSG: DV HMIS COVERAGE	None

#	Program Information				Target Population		HUD Funding Information	All Year-Round Beds/Units				Year-Round Beds covered in HMIS				PIT Courts	Utilization Rates
	Provider	Facility Name	Geo Code	Inventory type	A	B	Does this facility receive HUD McKinney-Vento funding?	Family Beds	Family Units	Individual Beds	Total Year-Round Beds	Year-Round Family beds covered in HMIS	Year-Round Individual Beds covered in HMIS	Percentage family beds covered in HMIS	Percentage individual beds covered in HMIS	Point-in-Time Homeless Count	Program Utilization Rate
SH11	Oakwood Center of the Palm Beaches, Inc.	Haven House	129099	N	SMF		Yes	0	0	14	14	0	14		100%	11	79%
	Insert provider name										0						
	Insert provider name										0						
	Insert provider name										0						
	Insert provider name										0						
	Insert provider name										0						

## 2I. Continuum of Care (CoC) Point-in-Time Homeless Population

**Instructions:**

This section must be completed using statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations on a single night. HUD requires CoCs to conduct a point-in-time count at least every two years during the last 10 days of January - January 22nd to 31st - and requests that CoCs conduct a count annually if resources allow. The last required count was in January 2007. Data entered in this chart must reflect a point-in-time count that took place during the last 10 days of January in 2007 or 2008, unless a waiver was received by HUD.

There are six (6) categories of homeless populations on this form. They are:

Households with Dependent Children - Sheltered Emergency  
 Households with Dependent Children - Sheltered Transitional  
 Households with Dependent Children - Unsheltered

Households without Dependent Children - Sheltered Emergency  
 Households without Dependent Children - Sheltered Transitional  
 Households without Dependent Children - Unsheltered

For each category, the number of households must be less than or equal to the number of persons. For example, in Households with Dependent Children - Sheltered Emergency, the number entered for ?Number of Households? must be less than or equal to the number entered for ?Number of Persons (adults with children).?

For additional instructions, refer to the detailed instructions available on the left menu bar.

**Indicate the date of the last PIT count:** 01/24/2007

**For each homeless population category, the number of households must be less than or equal to the number of persons.**

Households with Dependent Children				
	Sheltered Emergency	Transitional	Unsheltered	Total
<b>Number of Households</b>	59	74	17	150
<b>Number of Persons (adults and children)</b>	188	225	51	464

Households without Dependent Children				
	Sheltered Emergency	Transitional	Unsheltered	Total
<b>Number of Households</b>	157	157	988	1,302
<b>Number of Persons (adults and unaccompanied youth)</b>	157	157	988	1,302

All Households/ All Persons				
	Sheltered Emergency	Transitional	Unsheltered	Total
<b>Total Households</b>	216	231	1,005	1,452

West Palm Beach/Palm Beach County CoC			COC_REG_v10_000263	
Total Persons	345	382	1,039	1,766

Exhibit L

Certification of Unexecuted HUD CoC Grant Agreements

The lead agency shall complete the following table, and execute the certification.

Provide a list of ALL HUD McKinney-Vento Act awards made prior to the 2007 competition that are not yet under contract (i.e. signed grant agreement or executed ACC).

<u>Project Number</u>	<u>Applicant Name</u>	<u>Project Name</u>	<u>Grant Amount</u>
<u>EXAMPLE</u>			
M123B901022	Michiana Homes	TH for Homeless	\$500,000
1.			
2.			
3.			
4.			
5.			

If NONE, check here .

Certification

I hereby attest that all information reported above is true and accurate.

Name of Continuum of Care West Palm Beach/Palm Beach County CoC

Name of Lead Agency Palm Beach County Board of County Commissioners/Division of Human Services

Name of Certifying Official John F. Koons, Chairman

Signature of Certifying Official *John F. Koons*

Date Signed 9-1-09

APPROVED AS TO FORM AND LEGAL SUFFICIENCY  
*[Signature]*  
COUNTY ATTORNEY

**EXHIBIT D  
LEVERAGED FUNDING**

A. McKinney-Vento Homeless Assistance Act Grants  
List each grant award claimed separately under the McKinney-Vento Program.

<u>Program</u>	<u>Grant Amount</u>	<u>Grant Award # /Reference</u>	<u>Page #</u>	<u>Date of Grantor Executed Award Letter (Attach copy)</u>
1. Homeless Veterans Reintegration	\$ N/A			
2. Health Care for the Homeless	\$318,257	6 H80CS00184-08-01	36	06/19/2009
3. PATH	\$180,498	Oakwood Letter	37-38	06/26/2009
4. Education for Homeless Children	\$142,500	500-1279A-9CH01	39-40	12/03/2008
5. Emergency Shelter Grant	\$304,558	S-08-UC120016	41-42	10/22/2008
6. Shelter Plus Care	\$197,280	FL0281C4D050801	43-47	04/23/2009
	\$86,304	FL0277C4D050800	48-50	06/23/2009
7. Supportive Housing Program	\$207,038	FL0275B4D050800	51-52	02/19/2009
	\$106,540	FL0279B4D050801	53-54	02/19/2009
	\$233,735	FL0280B4D050801	55-56	02/19/2009
	\$229,547	FL0282B4D050801	57-58	02/19/2009
	\$386,104	FL0283B4D050801	59-60	02/19/2009
	\$20,636	FL0284B4D050801	61-62	02/19/2009
	\$134,441	FL0285B4D050801	61-62	02/19/2009
	\$182,984	FL0286B4D050801	63-64	02/19/2009
	\$283,023	FL0287B4D050801	63-64	02/19/2009
	\$137,615	FL0276B4D050800	59-60	02/19/2009
	\$207,811	FL0288B4D050801	51-52	02/19/2009
	\$184,029	FL0289B4D050801	65-66	02/19/2009
	\$607,322	FL0291B4D050801	65-66	02/19/2009
	\$198,867	FL0290B4D050801	65-66	02/19/2009
	\$442,158	FL0292B4D050801	67-69	06/11/2009
	\$62,587	FL0278B4D050800	70-71	02/19/2009
	\$129,156	FL0293B4D050801	72-73	02/19/2009
8. Section 8 Moderate Rehab., SRO	\$ N/A			
9. Emergency Food & Shelter	\$908,781	27-1686-00	74	12/29/2008
10. ARRA-Emergency Food & Shelter	\$449,459	AR-1686-00	75	04/28/2009
<b>TOTAL GRANTS</b>	<b>\$6,341,230</b>			

A. Private Cash for Services to Homeless Persons

List each agency separately, and the total private cash received by that agency.

<u>Participating Continuum Agency</u>	<u>Cash Received</u>	<u>Page #</u>	<u>Source Documentation</u>
1. Faith, Hope, Love, Charity, Inc.	\$72,515.35	76	(Attach letter from agency chief executive officer on agency letterhead certifying the cash received and the homeless services supported by that cash.)
2. The Salvation Army	\$558,353.00	77	
3. Children's Home Society of Florida	\$31,246.00	78	
4. Gulfstream Goodwill Industries, Inc.	\$99,821.00	79	
5. Florida Resource Center for Women and Children, Inc.	\$45,000.00	80	
6. The Lord's Place	\$1,205,552.00	81	
7. The Center for Family Services of Palm Beach County, Inc.	\$139,738.00	82	
8. Adopt-A-Family of the Palm Beaches	\$79,000.00	83	
9. YWCA	\$40,000.00	84	
<b>TOTAL PRIVATE CASH</b>	<b>\$ 2,271,225</b>		
<b>TOTAL LEVERAGE CLAIMED</b>			
A. McKinney Act Grants	\$ 6,341,230		
B. Private Cash	\$ 2,271,225		

(Attach letter from agency chief executive officer on agency letterhead certifying the cash received and the homeless services supported by that cash.)

Do not attach copies of checks or financial reports as documentation. These sources will not be accepted as evidence.

**Lead Agency Certification:**

I hereby attest that the above sources of grant and private cash claimed as leverage for this Challenge Grant application, is true and accurate, and that the lead agency has documented the receipt of the grant award(s) and private money leveraged by their continuum of care.

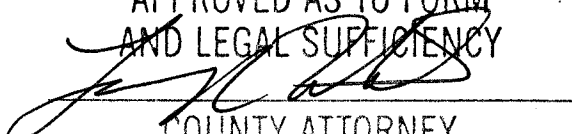
Name of Lead Agency: Palm Beach County Board of County Commissioners/Division of Human Services

Name of Certifying Official: John F. Koons

Title/Position: Chairman

Signature of Certifying Official: 

Date Signed: 9-1-09

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY  
  
COUNTY ATTORNEY



Leverage Ratio Calculations:

$$1. \frac{\$6,341,230}{\text{Total McKinney Act Grant Leverage Claimed}} \div \frac{1,131}{\text{Population of Catchment Area from Exhibit H}} = \frac{\$5,606.75}{\text{Ratio}} \text{ /1000 population}$$

Divide the total McKinney Act Grant leverage claimed by the total population of the catchment area (rounded to the nearest 1000 population), to calculate the McKinney Act grant leverage ratio expressed in dollars and cents per every 1000 population of the catchment area.

$$2. \frac{\$2,271,225}{\text{Total Private Cash Leverage Claimed}} \div \frac{1,131}{\text{Population of Catchment Area from Exhibit H}} = \frac{\$2008.15}{\text{Ratio}} \text{ /1000 population}$$

Divide the total Private Cash leverage claimed by the population of the catchment area (rounded to the nearest 1000 persons) to calculate the Private Cash leverage ratio expressed in dollar and cents per every 1000 persons in the catchment area.

**NOTES:**

1. To be eligible to be claimed as leveraged funding the grant award must have been executed, or the private money received, between the dates of July 1, 2008 and June 30, 2009.
2. If more than one grant award was received for a specific McKinney Act grant, use more than one line, reflecting each grant award separately, specifying the McKinney Act Program for each line used.

**FAILURE TO PROVIDE AN ORIGINAL SIGNED CERTIFICATION ON LEVERAGE IN THE GRANT APPLICATION SHALL BE CAUSE FOR THE APPLICATION TO BE RANKED LAST BY THE REVIEW TEAM ON THE LEVERAGE STATUTORY PREFERENCE CRITERIA.**

**Attach copies of the grant award evidence, as well as evidence of all cash claimed as leverage. Failure to document the leverage claimed shall be caused for that leverage to be deducted from the total leverage in calculating the leverage ratio.**

RECEIVED JUN 23 2009



Charlie Crist  
Governor

Ana M. Viamonte Ros, M.D., M.P.H.  
State Surgeon General

June 19, 2009

Ms. Claudia Tuck, Director  
Community Services Department  
Palm Beach County Board of County Commissioners  
810 Datura Street, Suite # 350  
West Palm Beach, FL 33401

Dear Ms. Tuck:

After reviewing our original grant award dated 6/3/05 which represented the new access point approval for our West Palm Beach Health Center site, I realized that sending you a copy of that award letter would only confuse things since the funds noted on that award letter represented a half year and the funding for two programs (Community Health –CH and Health Care For The Homeless –HCH) as well as an old grant award number, that is no longer being used.

For your records I thought it would be better to just tell you our grant award number and current HCH funding support amount:

- HRSA Award #: 6 H80CS00184-08-01
- Current Annual HCH Award Amount: \$318,257

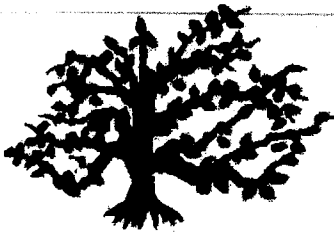
Please let me know if I can be of any further assistance.

Sincerely,

Jacqueline Lobban-Marsan, MPA  
Clinical Services Administrator  
C.L. Brumback FQHC Executive Director



Clinical Services Administration  
Palm Beach County Health Department  
P.O. Box 29 / 826 Evernia Street, West Palm Beach, FL 33401-5708  
(561) 355-2814 or FAX (561) 822-4509



# OAKWOOD CENTER

*of the Palm Beaches, Inc.*

1041 45<sup>th</sup> Street • West Palm Beach, FL 33407-2415 • (561) 383-8000 • Fax: (561) 514-1995  
406 S.E. Martin Luther King Jr. Blvd. • Belle Glade, FL 33430 • (561) 993-8080 • Fax: (561) 992-7783

June 26, 2009

Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of Oakwood Center of the Palm Beaches, Inc., I would like to certify that our agency will receive a total of \$180,498 in federal PATH funds, CFDA# 93.150, during the time period of July 1, 2008 - June 30, 2009.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,

Linda DePiano, Ph.D., Executive Director  
Oakwood Center of the Palm Beaches, Inc.

*A not-for-profit, Joint Commission Accredited, Community Behavioral Healthcare Organization*

Certified by Nonprofits First

37

[www.oakwoodcenter.org](http://www.oakwoodcenter.org)



**TABLE 1**  
**Proposed Florida PATH Funding Summary**  
**For 2008 Federal Fiscal Year**

Circuit	No	Provider	PATH	Match	% of Match	Total	# Served	Type of Agency
1	1.	Bridgeway	\$81,871	\$27,288	33.33%	\$109,159		MH
2	2.	Apalachee	\$138,464	\$46,151	33.33%	\$184,615		MH
4	3.	MHRC	\$289,531	\$96,501	33.33%	\$386,032		MH
5	4.	Marion-Citrus	\$139,403	\$46,463	33.33%	\$185,866		MH/SA
6	5.	Suncoast	\$104,090	\$34,693	33.33%	\$138,783		MH/SA
6	6.	Directions	\$104,090	\$34,693	33.33%	\$138,783		MH
7	7.	Serenity House	\$81,871	\$27,288	33.33%	\$109,159		SA
8	8.	Meridian	\$124,617	\$41,535	33.33%	\$166,152		MH/SA
9	9.	Lakeside	\$359,723	\$119,896	33.33%	\$479,619		MH
9	10.	Osceola-	\$72,623	\$24,205	33.33%	\$96,828		MH/SA
10	11.	Peace River	\$81,871	\$27,288	33.33%	\$109,159		MH
11	12.	New Horizons	\$348,486	\$116,150	33.33%	\$464,636		MH/SA
12	13.	First Step	\$67,362	\$22,452	33.33%	\$89,814		SA
13	14.	MHC	\$209,875	\$69,951	33.33%	\$279,826		MH
15	15.	Oakwood	\$180,498	\$60,160	33.33%	\$240,658		MH
16	16.	GC of the MK	\$72,248	\$24,080	33.33%	\$96,328		MH/SA
17	17.	Henderson	\$274,380	\$91,451	33.33%	\$365,831		MH
18	18.	Circles	\$72,182	\$24,058	33.33%	\$96,240		MH
18	19.	Seminole	\$72,182	\$24,058	33.33%	\$96,240		MH/SA
19	20.	NHTC	\$81,871	\$27,288	33.33%	\$109,159		MH
20	21.	David L.	\$92,421	\$30,804	33.33%	\$123,225		MH
20	22.	SWFAS	\$92,421	\$30,804	33.33%	\$123,225		SA
		Contract Totals	\$3,142,080	\$1,047,257	33.33%	\$4,189,337		
		PATH 4% Adm. Fee	\$130,920	-0-		\$130,920		
		PATH TOTALS	\$3,273,000	\$1,047,257		\$4,320,257		

MH = Mental Health

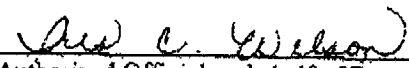

SA = Substance Abuse

Match federally mandated at 33.33% of grant allocation

DEPARTMENT OF EDUCATION  
Project Award Notification

**FILE COPY**

12/9/08

<b>1 PROJECT RECIPIENT</b> Palm Beach County School District	<b>2 PROJECT NUMBER</b> 500-1279A-9CH01
<b>3 PROJECT/PROGRAM TITLE</b> Title X Part C: Homeless Children & Youth - Year 3  TAPS 09A095	<b>4 AUTHORITY</b> 84.196A Homeless ED, Title X, Part C NCLB
<b>5 AMENDMENT INFORMATION</b> Amendment Number: 1 Type of Amendment: Budget: Increase Effective Date: 10/02/2008	<b>6 PROJECT PERIODS</b>  Budget Period: 07/01/2008 - 06/30/2009 Program Period: 07/01/2008 - 06/30/2009
<b>7 AUTHORIZED FUNDING</b> Current Approved Budget: \$ 125,000.00 Amendment Amount: \$ 17,500.00 Estimated Roll Forward: Certified Roll Amount: Total Project Amount: \$ 142,500.00	<b>8 REIMBURSEMENT OPTION</b> Federal Cash Advance
<b>9 TIMELINES</b> <ul style="list-style-type: none"> <li>Last date for incurring expenditures and issuing purchase orders: <u>06/30/2009</u></li> <li>Date that all obligations are to be liquidated and final disbursement reports submitted: <u>08/20/2009</u></li> <li>Last date for receipt of proposed budget and program amendments: <u>06/30/2009</u></li> <li>Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400:</li> <li>Date(s) for program reports:</li> </ul>	
<b>10 DOE CONTACTS</b> Program: Lorraine Allen Phone: (850) 245 - 0668 Email: <a href="mailto:Lorraine.Allen@fldoe.org">Lorraine.Allen@fldoe.org</a> Grants Management: Unit A (850) 245-0496	<b>11 DOE FISCAL DATA</b>  DBS: 40 90 20 EO: D3 Object: 720000
<b>12 TERMS AND SPECIAL CONDITIONS</b> <ul style="list-style-type: none"> <li>This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs.</li> <li>For federal cash advance projects, monthly expenditures must be submitted to the Comptroller's Office by the 20<sup>th</sup> of each month for the preceding month's disbursements utilizing the On-Line Disbursement Reporting System.</li> </ul>	
<b>13 APPROVED:</b>  <div style="display: flex; justify-content: space-between;"> <div data-bbox="211 1612 795 1747">                       Authorized Official on behalf of Dr. Eric J. Smith                      Commissioner of Education                 </div> <div data-bbox="893 1612 1185 1747"> <u>12/3/08</u>                      Date of Signing                 </div> <div data-bbox="1282 1505 1477 1706">  </div> </div>	

# FLORIDA DEPARTMENT OF EDUCATION PROJECT AMENDMENT REQUEST

RECEIVED  
 2008 OCT -2 PM 1:40  
 BUREAU OF  
 GRANTS MANAGEMENT

<b>Please return to:</b> Florida Department of Education GRANTS MANAGEMENT Room _____ Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400 (850) _____		<b>DOE USE ONLY</b> Date Received: _____	
<b>A) Agency Name</b> <p style="text-align: center;">Palm Beach</p>		<b>PROGRAM NAME</b> Title X, Part C - Education for Homeless Children and Youth Program	
<b>C) Amendment Type</b> <input type="checkbox"/> Program <input checked="" type="checkbox"/> Budget		<b>B) Amendment Number</b> <p style="text-align: center;">_____</p>	
		<b>D) Project Number</b> <b>TAPS Number</b> <p style="text-align: center;">500-1279A-9CH01 / 09A095</p>	

E) Amendment Request Contact Information	
<b>Contact Name:</b> Ann Faraone, Ed.D.	<b>Mailing Address:</b> Student Intervention Services 505 Congress Ave. Boynton Beach, FL 33426
<b>Telephone Number:</b> (561) 738-2902	<b>SunCom Number:</b> _____
<b>Fax Number:</b> (561) 738-2901	<b>E-mail Address:</b> faraonea@palmbeach.k12.fl.us

**F) Required Signature**

Superintendent/Agency Head \_\_\_\_\_

**G) Narrative**

The Florida Department of Education has increased the School District's allocation for the 2009 Title X, Part C - Education for Homeless Children and Youth Program from \$125,000 to \$142,500. Funds will be used to pay for additional tutoring hours at local homeless shelters and at non-Title I schools by part-time in-system teachers, benefits, and a consultant to assist with obtaining essential personal items for homeless students.



Grant No.: S-08-UC120016  
Official Contact Person: Mr. Edward Lowery  
Telephone No: (561) 233-3600  
FAX: (561) 233-3651  
Email No: ELowery@co.palm-beach.fl.us  
Tax ID No: 59-6000785  
Unit of Government No: 129099

## FY 2008 LOCAL GOVERNMENT GRANT AGREEMENT

This Grant Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and Palm Beach County the Grantee, for FY 2007 of the Emergency Shelter Grants Program in the amount of \$ 304,558. This grant was authorized by Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act, 42 USC 11301 (1988), as amended (the "Act"). In addition, the grant operates through HUD's regulations at 24 CFR Part 576, as now in effect and as may be amended from time to time, which are incorporated as part of this Agreement.

In reliance upon the Consolidated Plan and certifications, the Secretary agrees, upon execution of the Grant Agreement, to provide the Grantee with the agreed grant funds. The grantee must comply with requirements for record keeping and annual performance reporting to HUD within 90 days after the close of its consolidated program year, as required by 24 CFR 91.520. This includes the periodic information collected through HUD's Integrated Disbursements and Information System (IDIS). The grantee's IDIS reporting must include information on grant activities, project sponsors, project sites, and beneficiaries (including racial and ethnic data on participants). This information will be used for program monitoring and evaluation purposes.

The grantee agrees to comply with all applicable laws and regulations in distributing funds provided under this Grant Agreement and to accept responsibility for ensuring compliance by recipient entities which may receive funding assistance.

The grantee agrees to comply with the provisions of the environmental requirements of 24 CFR Part 58 as applicable under 24 CFR 576.57(e) with respect to funds provided under this Grant Agreement.

The grantee further agrees to provide sufficient detail on matching funds so as to identify the specific sources and amounts of the funds as required by 42 USC 11375(a)(1).

The following parties execute this Grant Agreement on the dates set forth below as follows:

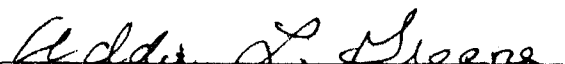
**UNITED STATES OF AMERICA**  
**Secretary of Housing and Urban Development**

By:  10/22/2008  
Signature and Date

Maria R. Ortiz-Hill  
Name of Signatory

Community Planning and Development Director  
Title

**GRANTEE**

By:   
Signature and Date

Addie L. Grne  
Typed Name of Signatory

Chairman, Board of County Commissioners  
Title



Grantee: Palm Beach Board of County Commissioners  
Grant No.: FL0281C4D050801  
Number of Units: 15  
Renewal Effective Date: 5/23/09      Renewal Expiration Date: 5/22/10  
Official Contact Person Georgiana Devine,  
Telephone No. (561) 355-4778    Fax No (561) 355-4891  
Email Address [gdivine@pbcgov.com](mailto:gdivine@pbcgov.com)  
Tax ID No.: 59-6000785

*2008 SHELTER PLUS CARE RENEWAL AGREEMENT*

This Agreement is made by and between the United States Department of Housing and Urban Development (HUD) and the Recipient, which is described in section 1 of Exhibit 4.

This Agreement will be governed by Subtitle F of Title IV of the McKinney-Vento Homeless Assistance Act 42 U.S.C. 11301 *et seq.* (the Act); the HUD Shelter Plus Care Program final rule codified at 24 CFR 582 ("the Rule"), which is attached hereto and made a part hereof as Exhibit 1, and the Notice of Funding Availability (NOFA) that was published in two parts. The first part was the Policy Requirements and General Section of the NOFA which was published March 29, 2008 at 73 FR 14883, and the second part was the Continuum of Care Homeless Assistance program section of the NOFA, which was published on July 10, 2008 at 73 FR 39840 . The terms "Grant" or "Grant Funds" mean the funds for rental assistance that are provided under this Agreement. The term "Application" means the application submission on the basis of which a Grant was approved by HUD, including the certifications and assurances and any information or documentation required to meet any grant award conditions (including the application submissions for grants being consolidated in this agreement). The Application is incorporated herein as part of this Agreement; however, in the event of any conflict between the Application and any provision contained herein, this Shelter Plus Care Agreement shall control.

The following are attached hereto and made a part hereof:

- Exhibit 1 - The Shelter Plus Care Program Rule
- Exhibit 2 - for Tenant-based Rental Assistance
- Exhibit 3 - for Project-based Rental Assistance
- Exhibit 4 - for Sponsor-based Rental Assistance
- Exhibit 5 – for Section 8 Moderate Rehabilitation for Single Room Occupancy
- Exhibit 5A – Subgrant for the Administration of Rental Assistance (for SRO)

HUD notifications to the Recipient shall be to the address of the Recipient as stated in the Application, unless HUD is otherwise advised in writing. Recipient notifications to HUD shall be to the HUD Field Office executing the Agreement.

Recipient agrees to conduct an ongoing assessment of the rental assistance and supportive services required by the participants in the program; to assure the adequate provisions of supportive services to the participants in the program; to be responsible for overall administration of this grant,

including overseeing any sub-recipients, contractors and subcontractors; and to comply with such other terms and conditions, including record keeping and reports (which must include racial and ethnic data on participants for program monitoring and evaluation purposes), as the Secretary may establish for purposes of carrying out the program in an effective and efficient manner.

The recipient and project sponsor, if any, will not knowingly allow illegal activities in any unit assisted with S+C funds.

Recipient agrees to draw Grant Funds for and to make rental assistance payments on behalf of eligible program participants at least quarterly. No more than eight cents of Grant Funds may be used by Recipient and its sub-recipients, combined, for eligible administrative expenses for every dollar expended for rental assistance over the grant term.

A default shall consist of any use of Grant Funds for a purpose other than as authorized by this Agreement, noncompliance with the Act, Rule, any material breach of the Agreement, failure to expend Grant Funds in a timely manner, or misrepresentations in the Application submissions that, if known by HUD, would have resulted in a grant not being provided. Upon due notice to the Recipient of the occurrence of any such default and the provision of a reasonable opportunity to respond, HUD may take one or more of the following actions:

- (a) direct the Recipient to submit progress schedules for completing approved activities;
- (b) issue a letter of warning advising the Recipient of the default, establishing a date by which corrective actions must be completed and putting the Recipient on notice that more serious actions will be taken if the default is not corrected or is repeated;
- (c) direct Recipient to establish and maintain a management plan that assigns responsibility for carrying out remedial actions;
- (d) direct the Recipient to suspend, discontinue or not incur costs for the affected activity;
- (e) reduce or recapture the grant;
- (f) direct the Recipient to reimburse the program accounts for costs inappropriately charged to the program;
- (g) continue the Grant with a substitute Recipient selected by HUD;
- (h) other appropriate action including, but not limited to, any remedial action legally available, such as affirmative litigation seeking declaratory judgment, specific performance, damages, temporary or permanent injunctions and any other available remedies.

No delay or omissions by HUD in exercising any right or remedy available to it under the Agreement shall impair any such right or remedy or constitute a waiver or acquiescence in any Recipient default.

This Agreement constitutes the entire agreement between the parties hereto, and may be amended only in writing executed by HUD and the Recipient. More specifically, Recipient shall not change sponsor or population to be served without the prior approval of HUD. No right, benefit, or advantage of the Recipient or Sponsor hereunder may be assigned without prior written approval of HUD. The effective date of the Agreement shall be (check one):

\_\_\_\_\_ the date of execution by HUD.

**the expiration of the prior grant that is being renewed (applicable only to renewals of grants whose terms have not been extended).**

\_\_\_\_\_ (fill in a date).

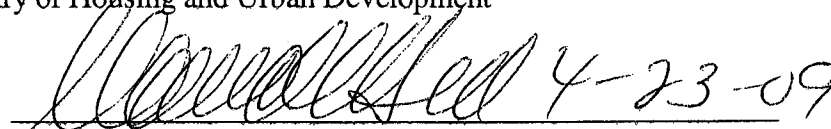
Execution of this Agreement terminates any S+C Amendment and Extension Agreement executed by the parties, as of the effective date of this Agreement.

By signing below, Recipients that are states and units of local government certify that they are following a current HUD approved CHAS (Consolidated Plan).

This agreement is hereby executed on behalf of the parties as follows:

UNITED STATES OF AMERICA,  
Secretary of Housing and Urban Development

BY:

  
(Signature)

Director, Community Planning and Development Division  
(Title)

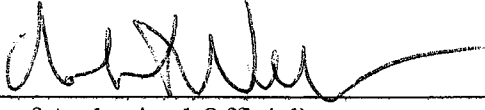
\_\_\_\_\_  
(Date)

Grantee: Palm Beach Board of County Commissioners  
Grant No.: FL0281C4D050801

RECIPIENT

Palm Beach County Board of County Commissioners  
(Name of Organization)

BY:

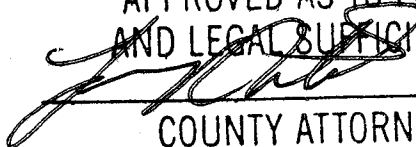


\_\_\_\_\_  
(Signature of Authorized Official)

County Administrator  
(Title)

5/4/09

\_\_\_\_\_  
(Date)

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY  
  
\_\_\_\_\_  
COUNTY ATTORNEY

Grantee: Palm Beach Board of County Commissioners  
Grant No.: FL0281C4D050801

:

EXHIBIT 4

SPONSOR-BASED RENTAL ASSISTANCE (SRA)

1. The Recipient is. the: Palm Beach Board of County Commissioners
2. HUD agrees, subject to the terms of the Agreement, to provide the Grant Funds in the amount specified below for the approved project(s) described in the Application. HUD's total funding obligation is \$197,280 for 15 units of sponsor-based rental assistance.
3. The term of this Grant Agreement shall be one (1) year. One-year renewal grants cannot be extended and unobligated balances will be recaptured by HUD at the end of the grant period.
4. Recipient shall administer the overall S+C/SRA component, ensure the provision of supportive services described in the Application and enter into contract(s) with the sponsor(s) listed in the Application, which either own or lease dwelling units. The contract shall provide that rental assistance payments shall be made to the sponsor and that the assisted units shall be occupied by eligible persons.
5. Recipient agrees to comply with all requirements of this Agreement and to accept responsibility for such compliance by any entities to which it makes Grant Funds available.
6. Recipient shall receive aggregate amounts of Grant Funds not to exceed the appropriate existing housing fair market rental value under Sec. 8(c)(1) of the United States Housing Act of 1937 in effect at the time the Application was approved. This fair market rent may be higher or lower than the fair market rent in effect at the time of application submission.
7. The effective date of the Agreement shall be (check one):

\_\_\_\_\_ the date of execution by HUD.

**the expiration of the prior grant that is being renewed (applicable only to renewals of grants whose terms have not been extended).**

\_\_\_\_\_ (fill in a date).

Grantee: Palm Beach Board of County Commissioners  
Grant No.: FL0281C4D050801



U.S. Department of Housing and Urban Development

Atlanta Region, Miami Field Office  
Brickell Plaza Federal Building  
909 SE First Avenue, Rm. 500  
Miami, FL 33131-3042

RECEIVED JUN 23 2009

June 23, 2009

Ms. Claudia Tuck, LCSW  
Director, Division of Human Services  
Palm Beach County Board of County Commissioners  
810 Datura St.  
West Palm Beach, FL 33401

Program: S+C Project Name: Project North side

Dear Ms. Tuck:

SUBJECT: Transmittal of FY2008 Homeless Assistance Grants  
CoC: FL-605 Project Number: FL0277C4D050800

Congratulations on your conditional selection for funding under the Department of Housing and Urban Development's (HUD) FY 2008 Homeless Assistance Grants competition. Addressing homelessness is one of the Department's top priorities and your project will make a significant contribution toward developing a continuum of care system in your community. This letter sets out the process by which you can receive your funding.

Enclosed are conditions or issues that were identified when your application was reviewed by HUD, and that require further information or clarification. If a condition is identified, it must be met before your grant can be executed. Issues, on the other hand, are concerns that we in the HUD Field Office will be reviewing as we ensure compliance with program requirements. If you have any questions about what any condition or issue means or how it might be resolved, please call your Community Planning and Development (CPD) Representative. You are encouraged to submit the information as soon as possible.

The enclosed documents will permit the processing of your grant:

1. Three copies of the Renewal Grant Agreement that constitutes the agreement between you and HUD. Please sign all three (3) originals and return two (2) original to our office.
2. Financial Instructions with copies of the following forms, which are explained in the Instructions:
  - a. The LOCCS/VRS Access Authorization Form (HUD 27054).
  - b. The Direct Deposit Form (SF-1199A).
  - c. The Request Voucher for Grant Payment (HUD-27053 A or B).

3. Sponsor Tax Identification Form, which is used to enter LOCCS/VRS for individual sponsors, if applicable. (Applicable only for Shelter Plus Care grant recipients with sponsors under SRA) Please complete and return.

If you have any questions about how to proceed on your grant, please contact your Community Planning and Development Representative. We look forward to working with you.

Sincerely,



Maria Rosa, Ortz-Hill, Director  
Community Planning and  
Development Division

Enclosure(s)



### CoC Maps, Contacts, Reports, and Awards

Switch among the tabs to view other CoC-related information

- [CoC Maps](#)
- [CoC Contacts](#)
- [Homelessness Reports](#)
- [Grant Awards](#)

### Search Results: Grant Awards

You can sort results by: Sponsor Name / Program / Amount

#### Search Results for:

- Year: 2008
- Type of Report: Continuum of Care (CoC) Awards
- Scope of Report: For a Continuum of Care (CoC)
- State: Florida
- Continuum of Care: FL08-605 - West Palm Beach/Palm Beach County CoC

[Go back and search again.](#)

Your search returned 19 records.

#### FL08-605 Continuum of Care (CoC) Awards

CoC No.	CoC Name	Sponsor Name	Program	Amount
FL08-605	West Palm Beach/Palm Beach County CoC	Bridges to Success	SHP	\$207,038
FL08-605	West Palm Beach/Palm Beach County CoC	Casa Vegso	SHPR	\$106,540
FL08-605	West Palm Beach/Palm Beach County CoC	Center of Hope Transitional Housing	SHPR	\$233,735
FL08-605	West Palm Beach/Palm Beach County CoC	Flagler Project	S+CR	\$197,280
FL08-605	West Palm Beach/Palm Beach County CoC	Harmony House West	SHPR	\$229,547
FL08-605	West Palm Beach/Palm Beach County CoC	Haven House	SHPR	\$386,104
FL08-605	West Palm Beach/Palm Beach County CoC	HMIS (2)	SHPR	\$20,636
FL08-605	West Palm Beach/Palm Beach County CoC	Homeless Management Information System	SHPR	\$134,441
FL08-605	West Palm Beach/Palm Beach County CoC	Joshua House	SHPR	\$182,984
FL08-605	West Palm Beach/Palm Beach County CoC	Project Family Care	SHPR	\$283,023
FL08-605	West Palm Beach/Palm Beach County CoC	Project Home III	SHP	\$137,615
FL08-605	West Palm Beach/Palm Beach County CoC	Project Northside	S+C	\$431,520
FL08-605	West Palm Beach/Palm Beach County CoC	Project SAFE II	SHPR	\$207,811
FL08-605	West Palm Beach/Palm Beach County CoC	Project Succeed 1	SHPR	\$184,029
FL08-605	West Palm Beach/Palm Beach County CoC	Project Succeed 4	SHPR	\$607,322
FL08-605	West Palm Beach/Palm Beach County CoC	Project Succeed II	SHPR	\$198,867
FL08-605	West Palm Beach/Palm Beach County CoC	Project SUCCESS	SHPR	\$442,158
FL08-605	West Palm Beach/Palm Beach County CoC	* Recovery Village Plus	SHP	\$62,587
FL08-605	West Palm Beach/Palm Beach County CoC	Transitions Home	SHPR	\$129,156
			<b>Total:</b>	<b>\$4,382,393</b>

$$\$431,520 \div 5 \text{ yrs.} = \$86,304 / \text{year}$$





U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Ms. Wendy Tippet  
Executive Director  
Adopt-A-Family of the Palm Beaches, Inc.  
1712 Second Avenue North  
Lake Worth, FL 33460-3210

Dear Ms. Tippet:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$414,849. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0275B4D050800  
FL-605 - NEW - Bridges to Success  
\$ 207,038

FL0288B4D050801  
FL-605 - REN - Project SAFE II  
\$ 207,811

Total Award : \$414,849

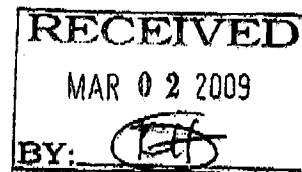


U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Ms. Pam OBrien  
Executive Director  
Aid to Victims of Domestic Abuse, Inc.  
PO Box 6161  
Delray Beach, FL 33482-6161



Dear Ms. OBrien:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$106,540. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0279B4D050801  
FL-605 - REN - Casa Vegso  
\$ 106,540

Total Award : \$106,540



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Ms. Cassandra Scott  
Executive Director  
The Salvation Army, a Georgia Corporation for the  
Salvation Army  
2100 Palm Beach Lakes Blvd  
West Palm Beach, FL 33409

Dear Ms. Scott:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$233,735. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

FL0280B4D050801  
FL-605 - REN - Center of Hope Transitional Housing  
S 233,735

Total Award : \$233,735



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Ms. Suzanne Turner  
Executive Director  
YWCA of Palm Beach County, FL  
2200 N Florida Mango Road  
Suite 102  
West Palm Beach, FL 33409

Dear Ms. Turner:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$229,547. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0282B4D050801  
FL-605 - REN - Harmony House West  
\$ 229,547

Total Award : \$229,547





U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Mr. Barbaro Cordoves  
Director of Continuing Care  
Oakwood Center of The Palm Beaches, Inc.  
1041 45th Street.  
West Palm Beach, FL 33407

Dear Mr. Cordoves:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$523,719. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0276B4D050800  
FL-605 - NEW - Project Home III  
\$ 137,615

FL0283B4D050801  
FL-605 - REN - Haven House  
\$ 386,104

Total Award : \$523,719



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Mrs. Susan Buza  
Executive Director  
211 Palm Beach/Treasure Coast  
415 Gator Drive  
P.O. Box 3588  
Lantana, FL 33465

RECEIVED MAR 03 2009

Dear Mrs. Buza:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$155,077. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Stck  
3/3/09

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0284B4D050801  
FL-605 - REN - HMIS (2)  
\$ 20,636

FL0285B4D050801  
FL-605 - REN - Homeless Management Information System  
\$ 134,441

Total Award :           \$155,077



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Ms. Gibbie Nauman  
Director of Development and Marketing  
The Lord's Place, Inc.  
2808 N. Australian Avenue  
West Palm Beach, FL 33407

Dear Ms. Nauman:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$466,007. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[cspanol.hud.gov](http://cspanol.hud.gov)

Enclosure

FL0286B4D050801  
FL-605 - REN - Joshua House  
\$ 182,984

FL0287B4D050801  
FL-605 - REN - Project Family Care  
\$ 283,023

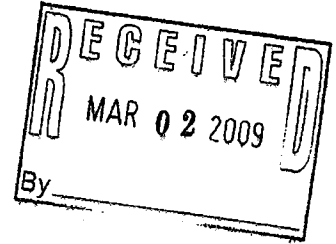
Total Award : \$466,007



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009



Ms. Susan Bykofsky  
Director of Program Development  
Gulfstream Goodwill Industries, Inc.  
1715 Tiffany Drive East  
West Palm Beach, FL 33407

Dear Ms. Bykofsky:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$990,218. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0289B4D050801  
FL-605 - REN - Project Succeed 1  
\$ 184,029

FL0290B4D050801  
FL-605 - REN - Project Succeed 2  
\$ 198,867

FL0291B4D050801  
FL-605 - REN - Project Succeed 4  
\$ 607,322

Total Award : \$990,218





U.S. Department of Housing and Urban Development

Atlanta Region, Miami Field Office  
Brickell Plaza Federal Building  
909 SE First Avenue, Rm. 500  
Miami, FL 33131-3042

June 11, 2009

Mr. Clauda Tuck, LCSW  
Director, Division of Human Services  
Palm Beach County Board of Commissioners  
810 Datura Street  
West Palm Beach, FL 33401

Dear Ms. Tuck

SUBJECT: Transmittal of FY2008 Homeless Assistance Grants  
Program: SHP Project Name: Project SUCCESS  
CoC: FL-605 Project Number: FL0292B4D050801

Congratulations on your conditional selection for funding under the Department of Housing and Urban Development's (HUD) FY 2008 Homeless Assistance Grants competition. Addressing homelessness is one of the Department's top priorities and your project will make a significant contribution toward developing a continuum of care system in your community. This letter sets out the process by which you can receive your funding.

Enclosed are conditions or issues (if applicable) that were identified when your application was reviewed by HUD, and that require further information or clarification. If a condition is identified, it must be met before your grant can be executed. Issues, on the other hand, are concerns that we in the HUD Field Office will be reviewing as we ensure compliance with program requirements. If you have any questions about what any condition or issue means or how it might be resolved, please call your Community Planning and Development (CPD) Representative. You are encouraged to submit the information as soon as possible.

The enclosed documents will permit the processing of your grant:

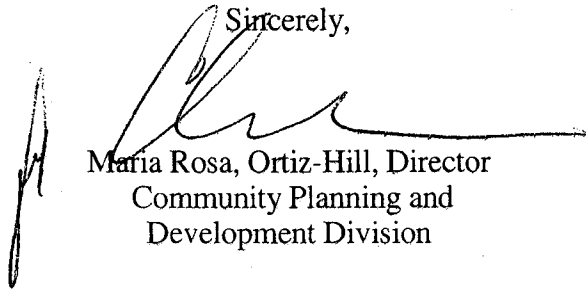
1. Three copies of the Renewal Grant Agreement that constitutes the agreement between you and HUD. Please sign all three (3) originals, keep one with the regulations attached and send the other two (2) originals back to our office.
2. Financial Instructions with copies of the following forms, which are explained in the instructions:
  - a. The LOCCS/VRS Access Authorization Form (HUD 27054).
  - b. The Direct Deposit Form (SF-1199A).
  - c. The Request Voucher for Grant Payment (HUD-27053 A or B).
3. Please sign "Leasing Certification Form" attached to the grant agreement. Before the grant is fully executed, you must certify that: the leased sites are not owned by V.O.A. or any of its parent organizations, and that, no SHP operating grant funds will be used for the payment of utilities, maintenance and repairs, or management fees associated with the sites, if the grantee is leasing units and utilities are included in the lease.

*HUD's mission is to increase homeownership, support community  
development and increase access to affordable housing free from discrimination.*  
www.hud.gov <sup>67</sup> espanol.hud.gov

If you have any questions about how to proceed on your grant, please contact Ronald M. Muscarlla, Senior CPD Representative at (305) 536-5014 or e-mail at [Ronald.m.muscarella@hud.gov](mailto:Ronald.m.muscarella@hud.gov)

We look forward to working with you.

Sincerely,

A handwritten signature in black ink, appearing to read 'Maria Rosa, Ortiz-Hill', is written over the typed name. The signature is fluid and cursive, with a long horizontal stroke at the end.

Maria Rosa, Ortiz-Hill, Director  
Community Planning and  
Development Division

Enclosures



### CoC Maps, Contacts, Reports, and Awards

Switch among the tabs to view other CoC-related information

- [CoC Maps](#)
- [CoC Contacts](#)
- [Homelessness Reports](#)
- [Grant Awards](#)

Export

### Search Results: Grant Awards

You can sort results by: Sponsor Name / Program / Amount

#### Search Results for:

- Year: 2008
- Type of Report: Continuum of Care (CoC) Awards
- Scope of Report: For a Continuum of Care (CoC)
- State: Florida
- Continuum of Care: FL08-605 - West Palm Beach/Palm Beach County CoC

[Go back and search again.](#)

Your search returned 19 records.

### FL08-605 Continuum of Care (CoC) Awards

CoC No.	CoC Name	Sponsor Name	Program	Amount
FL08-605	West Palm Beach/Palm Beach County CoC	Bridges to Success	SHP	\$207,038
FL08-605	West Palm Beach/Palm Beach County CoC	Casa Vegso	SHPR	\$106,540
FL08-605	West Palm Beach/Palm Beach County CoC	Center of Hope Transitional Housing	SHPR	\$233,735
FL08-605	West Palm Beach/Palm Beach County CoC	Flagler Project	S+CR	\$197,280
FL08-605	West Palm Beach/Palm Beach County CoC	Harmony House West	SHPR	\$229,547
FL08-605	West Palm Beach/Palm Beach County CoC	Haven House	SHPR	\$386,104
FL08-605	West Palm Beach/Palm Beach County CoC	HMIS (2)	SHPR	\$20,636
FL08-605	West Palm Beach/Palm Beach County CoC	Homeless Management Information System	SHPR	\$134,441
FL08-605	West Palm Beach/Palm Beach County CoC	Joshua House	SHPR	\$182,984
FL08-605	West Palm Beach/Palm Beach County CoC	Project Family Care	SHPR	\$283,023
FL08-605	West Palm Beach/Palm Beach County CoC	Project Home III	SHP	\$137,615
FL08-605	West Palm Beach/Palm Beach County CoC	Project Northside	S+C	\$431,520
FL08-605	West Palm Beach/Palm Beach County CoC	Project SAFE II	SHPR	\$207,811
FL08-605	West Palm Beach/Palm Beach County CoC	Project Succeed 1	SHPR	\$184,029
FL08-605	West Palm Beach/Palm Beach County CoC	Project Succeed 4	SHPR	\$607,322
FL08-605	West Palm Beach/Palm Beach County CoC	Project Succeed II	SHPR	\$198,867
FL08-605	West Palm Beach/Palm Beach County CoC	Project SUCCESS	SHPR	\$442,158
FL08-605	West Palm Beach/Palm Beach County CoC	Recovery Village Plus	SHP	\$62,587
FL08-605	West Palm Beach/Palm Beach County CoC	Transitions Home	SHPR	\$129,156
			<b>Total:</b>	<b>\$4,382,393</b>



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Ms. Carol Hughes  
Director of Supportive Housing  
Housing Partnership, Inc.  
2001 W. Blue Heron Blvd.  
Riviera Beach, FL 33404

Dear Ms. Hughes:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$62,587. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0278B4D050800  
FL-605 - NEW - Recovery Village Plus  
\$ 62,587

Total Award : \$62,587



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-7000

OFFICE OF ASSISTANT SECRETARY  
FOR COMMUNITY PLANNING AND DEVELOPMENT

February 19, 2009

Ms. Kathy Serock  
Program Manager  
Children's Home Society of Florida  
3333 Forest Hill Blvd  
West Palm Beach, FL 33406

Dear Ms. Serock:

Congratulations! I am delighted to inform you that the homeless assistance application(s) submitted by your organization in the 2008 McKinney-Vento homeless assistance competition was selected for funding in the amount of \$129,156. Enclosed is a list that contains the name of the individual projects and the project number for each funded application.

The Continuum of Care (CoC) Homeless Assistance Program is an important part of HUD's mission. CoCs all over the country continue to improve the lives of homeless men, women and children through their local planning efforts and through the direct housing and service programs funded in this year's competition. The programs and CoCs funded through the CoC Homeless Assistance Program continue to illustrate their value by improving accountability and performance every year. I commend you on the outstanding work of your program, and encourage you to continue to strive for excellence in the fight against homelessness.

Congratulations again on your award. You will be receiving a letter from your local HUD field office providing more information about finalizing your award. We are counting on you to use these important resources in a timely and effective manner.

Sincerely,

Nelson R. Bregón  
General Deputy Assistant Secretary

Enclosure(s)

[www.hud.gov](http://www.hud.gov)

[espanol.hud.gov](http://espanol.hud.gov)

Enclosure

FL0293B4D050801  
FL-605 - REN - Transitions Home  
\$ 129,156

Total Award : \$129,156

**EMERGENCY FOOD AND SHELTER NATIONAL BOARD PROGRAM**

701 North Fairfax Street, Suite 310, Alexandria, Virginia 22314-2064

703-706-9660

<http://www.efsp.unitedway.org>**FEMA**

DEC 29 2008

PHASE 27

FY 2009

PL 110-329

Award Notification

**ORGANIZATION ID: 168600****American  
Red Cross**

Your jurisdiction has been selected to receive an award under Phase 27 of the Emergency Food and Shelter Program (EFSP) based upon the available statistics. Congress has appropriated \$200 million to supplement and expand emergency food and shelter programs. Your jurisdiction's award is based upon your jurisdiction's total number of unemployed as compared to the total number of unemployed in all qualifying jurisdictions. Your I.D.#, award amount and maximum administrative allowance are indicated below:

**Palm Beach County**

ID#: 27-1686-00

Total Award:

**\$908,781.00**Amount available FROM ABOVE for  
administrative allowance:**\$18,176.00****Catholic  
Charities  
USA**

The award to the EFSP was increased significantly by Congress from \$153 million to \$200 million for Phase 27 (Fiscal Year 2009). Please remember that EFSP funding is appropriated annually and the program can receive level funding, be increased or be decreased each year. Your jurisdiction's award is directly related to the average number of unemployed individuals for the time period used for Phase 27 (October 2007 - September 2008).

**National Council of the  
Churches of Christ in the U.S.A.**

There is one significant new requirement for Phase 27 which will be included on the Local Board, LRO, and Fiscal Agent/Fiscal Conduit Certification Forms as well as in the program guidelines. Agencies will be required to certify if they are debarred or suspended from receiving Federal funds and Local Boards will be certifying that they have received this certification from each agency benefiting from EFSP funding.



There are no enclosures with this notice; award materials including the Phase 27 Responsibilities and Requirements Manual will be mailed to your Local Board after the beginning of the new year. Your Local Board should begin their process as soon as possible. Advertisement requirements remain the same. Please remember that your jurisdiction's Final Report for Phase 26 must be received along with documentation for LROs, if requested, before funds for Phase 27 can be released.

The award materials will include a due date for the Local Board Plan to be received by the National Board. Jurisdictions that do not claim their funds by this specified due date risk losing the funds.

Your Congressional representatives have been notified of this award.

A notice will be placed on the EFSP web site <http://www.efsp.unitedway.org> once award packets are mailed. Please contact the National Board staff at (703) 706-9660 if you have any questions or need assistance in preparing your plans.

Enclosures

**United Way of America**

**United Jewish  
Communities**  
The Federations of North America Live Generously



# EMERGENCY FOOD AND SHELTER NATIONAL BOARD PROGRAM

701 North Fairfax Street, Suite 310, Alexandria, Virginia 22314-2064

703-706-9660

<http://www.efsp.unitedway.org>



RECEIVED APR 28 2009

American Recovery and Reinvestment Act of 2009

Public Law 111-5

## FEMA

### Award Notification

Your jurisdiction has qualified for funding for the Emergency Food and Shelter National Board Program (EFSP) under the American Recovery and Reinvestment Act of 2009 (ARRA) which has made \$100 million available in supplemental funding to the EFSP. Your jurisdiction's award is based upon your jurisdiction's total number of unemployed as compared to the total number of unemployed in all qualifying jurisdictions. The Phase 27 Responsibilities and Requirements Manual and Phase 27 Addendum contain the requirements for this award under AARA as well as any funds received under Phase 27. Your I.D.#, award amount and maximum administrative allowance are indicated below:



American Red Cross



Catholic Charities USA

AR-1686-00	FLORIDA
Award:	\$449,459
Administrative Amount:	\$8,989

The Administrative Amount is included in the Award and NOT in addition to the Award.



National Council of the Churches of Christ in the U.S.A.



Local Boards should carefully read the enclosed "Local Board Instructions Specific to ARRA Funding" (orange) prior to advertising, determining community need, taking applications and making funding decisions for the ARRA award. Local Boards must meet to make an assessment of the current need in the jurisdiction and not rely on information used for any funds previously awarded and allocated under Phase 27. Local Boards should ensure that all agencies providing emergency food and shelter services are considered for funding. These funds must not be used to automatically fund the same agencies for the same services already funded under Phase 27. To make services widely available to all in need in a jurisdiction, Local Boards must seek out agencies providing services allowed under EFSP including agencies that may not have applied for funding.

The deadline for the receipt of the ARRA Local Board Plan is printed on the Local Board Certification page and is in keeping with the emergency nature of this award. Local Board Plans for the ARRA funding may be submitted over the EFSP web site. If submitting over the web site, please remember to mail or fax the Local Board Certification page and Local Board Roster (changes only for Phase 27 funded Local Boards).

Should you have questions regarding this award, please contact the National Board staff at (703) 706-9660.



United Jewish Communities  
The Federations of North America Live Generously



United Way of America



**FAITH \* HOPE \* LOVE \* CHARITY, INC.**  
**\* FULL FAMILY SUPPORT SYSTEM \***

---



June 30, 2009



Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of Faith\*Hope\*Love\*Charity, Inc., I would like to certify that our agency has received a total of \$72,515.35 in private cash funds in the time period of July 1, 2008 - June 30, 2009, for the following homeless services: Nutritional Food (3 meals a day), Transportation to and from WPB VA Medical Center, comprehensive health care, group counseling, peer-to-peer counseling, Psycho-educational groups by licensed psychologist, case management for each veteran to develop and work on goals for self sufficiency, individual training and employment assistance.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,

Roy J. Foster  
Executive Director  
Faith\*Hope\*Love\*Charity, Inc.



# Doing The Most Good

*William Booth, Founder  
Shaw Clifton, General  
Commissioner Maxwell Feener, Territorial Commander  
Lt. Colonel Vern Jewett, Divisional Commander  
Major Thomas McWilliams, Area Commander  
Major Stacie McWilliams, Coordinator of Women's Ministries*

June 26, 2009

Ms Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste 350  
West Palm Beach, FL 33401

**Re: Challenge Grant – 2010**

Dear Ms. Tuck:

On behalf of the Salvation Army of Palm Beach County, I would like to certify that our agency has received a total of \$558,353 in private cash funds for the time period from July 1, 2008 – June 30, 2009. This funding helped provide necessary and supportive services for our 95 homeless clients.

These services include, but are not limited to room and board, life skill education, transportation, physical activities, spiritual guidance, etc. Complete case management, full facility security and computer labs are also available to all clients. Rental assistance and various other social services are provided as well.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application as submitted by the Palm Beach County Continuum of Care.

Sincerely,

Cassandra L. Scott, LLMSW  
Executive Director  
The Salvation Army of Palm Beach County

*Palm Beach County Area Command 2100 Palm Beach Lakes Boulevard West Palm Beach, FL 33409  
PO Box 789 West Palm Beach, FL 33402 p: 561.686.3530 f: 561.686.7858  
Family Store 561.683.3513 www.salvationarmypalmbeachcounty.org*

No effort on behalf of  
children is ever wasted.

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June 23, 2009

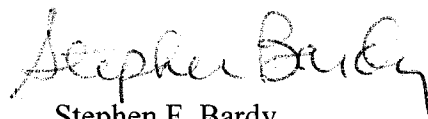
Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of the South Coastal Division of Children's Home Society of Florida (CHS), I would like to certify that our agency has received a total of \$31,246.00 in private cash funds during the time period of July 1, 2008 - June 30, 2009, for the following homeless services: Safe Harbor Runaway Center and Transitions Home.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,

  
Stephen F. Bardy  
Executive Director

**Barbara Watts**  
Division Chairman

**Stephen F. Bardy, MPA**  
Executive Director

**South Coastal Division**  
3333 Forest Hill Boulevard  
West Palm Beach, Florida 33406  
Phone: 561.868.4300  
Fax: 561.868.4499  
www.chsfl.org



Leave a Legacy...Remember Children's Home Society of Florida in your estate planning.

June 22, 2009

Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of Gulfstream Goodwill Industries, Inc., I would like to certify that our agency has received a total of \$99,821 in private cash funds in the time period of July 1, 2008 - June 30, 2009, for the following homeless services: Employment Training, Job Development and Placement, Job Coaching, Facilities Management and Coordination of Homeless programs.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,



Marvin A. Tanck, President and CEO  
Gulfstream Goodwill Industries, Inc.



# FRCWC

Florida Resource Center For Women & Children, Inc.  
*Promoting Social and Economic Self-Sufficiency*

June 19, 2009

Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of Florida Resource Center for Women and Children, Inc., I would like to certify that our agency has received a total of \$45,000 in private cash funds in the time period of July 1, 2008- June 30, 2009, for the following homeless services: Emergency Shelter and Hotel/Motel Shelter; individual/family/group counseling; therapeutic services; food/food vouchers; rental/utility/relocation assistance, as well as an array of other related supportive services for victims of domestic violence and those at risk.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,

A handwritten signature in cursive script that reads "Shandra Dawkins".

Shandra Dawkins  
Executive Director  
Florida Resource Center for Women and Children, Inc.



Breaking the Cycle  
of Homelessness

June 24, 2009

Board of Directors

Vince Borvento  
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Dr. Christopher Fox  
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David A. Unversaw  
Edward D. Welch, Esq.  
Bert Winkler, Esq.

Executive Director

Diana L. Stanley

Programs

Cafe Joshua  
Cafe Joshua Catering Company  
Engagement Center  
Family Campus:  
Family Emergency Program  
West Palm Beach Family Apts.  
Men's Campus:  
Joshua House  
Operation JumpStart  
Recovery Center  
One More Time. Thrift Shop & Coffee Bar

Mission

The Lord's Place is dedicated to  
breaking the cycle of homelessness  
by providing innovative, compassionate  
and effective services to men, women  
and children in our community.

Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of The Lord's Place, I would like to certify that our agency has received a total of \$1,205,552 in private cash funds in the time period of July 1, 2008 - June 30, 2009, for general operating costs for homeless programs and the following homeless services: food, supportive housing, job readiness training, counseling, case management, operations, and targeted personalized support services.

Please feel free to utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Regards,

Diana L. Stanley  
Executive Director



Town of Palm Beach  
United Way

P.O. Box 3265, West Palm Beach, FL 33402 Phone (561) 494-0125 Fax (561) 494-2922  
www.thelordsplace.org

The Lord's Place is a 501(c)(3) organization and all of our contributions are tax deductible according to IRS Rules and Regulations. Tax ID # 59-2216592



# THE CENTER FOR FAMILY SERVICES OF PALM BEACH COUNTY, INC.

RECEIVED JUN 30 2009

Individual and  
Family Counseling

Substance Abuse  
Treatment Services

Partners for Change

SAFE Kids Program

FAST Program

Pat Reeves Village  
Program REACH

Parenting Smart Babies

HIPPY Program

Life Enrichment EAP

### Branch Offices

1400 N. Federal Highway  
Suite 38  
Boca Raton, FL 33432  
Tel: 561-330-2266  
Fax: 561-330-2264

1776 Lake Worth Road  
Suite 103  
Lake Worth, FL 33460  
Tel: 561-540-1012  
Fax: 561-540-1014

12773 West Forest Hill Blvd.  
Suite 219  
Wellington, FL 33414  
Tel: 561-793-1698  
Fax: 561-795-7513

Pat Reeves Village  
Program REACH  
1320 Henrietta Avenue  
West Palm Beach, FL 33401  
Tel: 561-514-0564  
Fax: 561-514-0648

Licensed by the State of Florida,  
Department of Children and Families

Children's Services Council  
PALM BEACH COUNTY



4101 Parker Avenue



West Palm Beach, FL 33405



82



561-616-1222



561-616-1230 FAX



www.ctrfam.org

June 26, 2009

Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of The Center for Family Services of Palm Beach County, Inc., I would like to certify that our agency has received a total of \$139,738 in private cash funds in the time period of July 1, 2008 - June 30, 2009, for the following homeless services:

- Food vouchers
- Mass shelter
- Rent/mortgage/utility assistance
- Counseling

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,

Dorla Leslie  
Executive Director

The Center for Family Services of Palm Beach County, Inc.





# ADOPT-A-FAMILY

*of the Palm Beaches, Inc.*

June 19, 2009


Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of Adopt-A-Family of the Palm Beaches, Inc. I would like to certify that our agency has received a total of \$79,000 in private cash funds in the time period of July 1, 2008 - June 30, 2009, for the following homeless services: homeless housing, rent/utility assistance, childcare subsidy for homeless families, and mental health services to homeless populations.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,

  
Wendy A. Tippet, MNM  
Chief Executive Officer

*Leaders in helping families help themselves.*



1712 Second Avenue North, Lake Worth, FL 33460-3210  
Phone: (561) 253-1361 Fax: (561) 253-1370  
[www.adoptfamilypbc.org](http://www.adoptfamilypbc.org)



eliminating racism  
empowering women

**ywca**

RECEIVED JUN 26 2009

YWCA of Palm Beach County  
2200 N. Florida Mango Rd, Ste. 102  
West Palm Beach, Florida 33409  
(561) 640-0050 Office  
(561) 640-8155 FAX

www.ywcapbc.org

June 22, 2009

Board of Directors

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1st Vice President  
Jana Hirsekorn

2nd Vice President  
Ann Erlere

Secretary  
Allyson Samljan

Treasurer  
Alisa Padron

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Leslie Garcia-Furey

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Honorary Trustee

Anita Dubnoff

Advisory Committee

Rosa Liguno, Esquire

Marilyn Munoz

Robert Shalhoub, Esquire

Maria Stemon

Reverend Dr. William Stepp

Suzanne Turner  
Executive Director

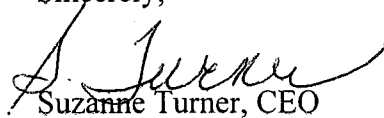
Ms. Claudia Tuck, LCSW  
Palm Beach County Homeless and Housing Alliance  
810 Datura Street, Ste. 350  
West Palm Beach, FL 33401

Dear Ms. Tuck,

On behalf of The YWCA of Palm Beach County, Florida, I would like to certify that our agency has received a total of \$40,000 in private cash funds in the time period of July 1, 2008 - June 30, 2009, for the following homeless services: case management, safety plans, hotline services, and temporary emergency housing.

Please utilize these funds as leveraging dollars for the 2010 Challenge Grant application submitted by the Palm Beach County Continuum of Care.

Sincerely,



Suzanne Turner, CEO  
YWCA of Palm Beach County, Florida



This project was supported by the YWCA of Palm Beach County, Florida, a 501(c)(3) organization. The YWCA of Palm Beach County is an Equal Opportunity Employer. The YWCA of Palm Beach County is an Equal Opportunity Employer.



**Exhibit E**  
**Certification of Estimated Need Per Catchment Area Population**

1. Enter the total homeless population from your last three years' of Continuum of Care Plans in the table below. This shall be the Total Homeless Population for individuals and persons in families with children, and shall include both sheltered and unsheltered.

<u>Year</u>	<u>HUD Form (Attach forms)</u>	<u>Total Homeless Population (Persons)</u>
2007	HUD 40090-1, CoC-K	<u>1,766</u>
2008	HUD Chart 2I	<u>1,766</u>
2009	Point-in-Time Number (Exhibit N)	<u>2,147</u>

2. Add the Total Homeless for ALL three years 5,679

3. Divide the 3 Year Total Homeless by 3 to calculate an "Average Total Homeless Population, 2005-2007".  
 Divide Total Number in line 2 above 5,679  
 By 3 years to calculate ÷ 3

Average Total Homeless Population, 2007-2009 1,893

3. Divide the Average Total Homeless Population, 2007-2009, by the population of the continuum's catchment area as reflected in Exhibit H, to calculate the ratio of your homeless population per 1000 persons in your area.

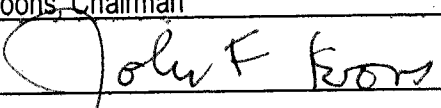
$$\frac{1,893}{\text{Average Total Homeless Population, 2007-2009}} \div \frac{1,131}{\text{2000 Population of Your Catchment Area, Exhibit H}} = \frac{1.674}{\text{Ratio of Homeless per 1000 persons in catchment area}}$$

**Lead Agency Certification:**

I hereby attest and certify that the above data is true and accurate; that the above data on estimated needs is based upon a homeless population chart which uses data that (1) represents the housing need for homeless persons in the catchment area on any given night; (2) is true and accurate for the continuum's catchment area; and (3) is derived in accordance with the federal grant instructions.

Name of Lead Agency: Palm Beach County Board of County Commissioners/Division of Human Services

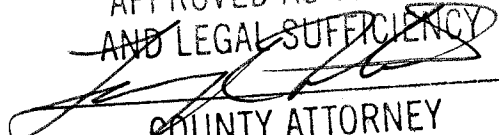
Name of Lead Agency Certifying Official: John F. Koons, Chairman

Signature of Certifying Official: 

Date Signed: 7-1-09

**FAILURE TO PROVIDE AN ORIGINAL SIGNED CERTIFICATION IN THE APPLICATION SHALL BE CAUSE FOR THE APPLICATION TO BE RANKED LAST ON THE NEED PREFERENCE CRITERIA.**

Attach your 2007 and 2008 HUD Homeless Population Tables and the narrative/chart describing the methods used to estimate this need. Failure to include this table and narrative/chart shall be cause to score your continuums need ratio as zero homeless persons per 1000 population.

APPROVED AS TO FORM  
 AND LEGAL SUFFICIENCY  
  
 COUNTY ATTORNEY

## CoC Homeless Population and Subpopulations

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

Indicate date of last point-in-time count: 1/24/2007				
Part 1: Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
1. Number of Households with Dependent Children:	59	74	17	150
1a. Total Number of Persons in these Households (adults and children)	188	225	51	464
2. Number of Households without Dependent Children**	157	157	988	1302
2a. Total Number of Persons in these Households	157	157	988	1302
<b>Total Persons (Add Lines 1a and 2a):</b>	<b>345</b>	<b>382</b>	<b>1039</b>	<b>1766</b>
Part 2: Homeless Subpopulations (below)	Sheltered		Unsheltered	Total
a. Chronically Homeless	34		295	329
b. Severely Mentally Ill	73		115	188
c. Chronic Substance Abuse	361		293	654
d. Veterans	71		140	211
e. Persons with HIV/AIDS	13		37	50
f. Victims of Domestic Violence	187		7	194
g. Unaccompanied Youth (Under 18)	7		4	11

\*Optional for unsheltered homeless subpopulations

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

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

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

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

<b>(1a) Check method(s) used to count sheltered homeless persons in the CoC (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Survey</b> – Providers count the total number of clients residing in their programs during the PIT count.
<input type="checkbox"/>	<b>HMIS</b> – CoC used HMIS to complete the PIT sheltered count and subpopulation information.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(1b) If multiple methods are checked, briefly describe how data collected using the methods were combined to produce the count.</b>	
<b>(2a) Check the method(s) used to gather the subpopulation information on sheltered homeless persons reported in Part 2: Homeless Subpopulations (check all that apply):</b>	
<input type="checkbox"/>	<b>Point-in-time (PIT) interviews with each adult and unaccompanied youth</b> – All sheltered adults and unaccompanied youth were interviewed to gather subpopulation information.
<input type="checkbox"/>	<b>Sample of PIT interviews plus extrapolation</b> – A sample of sheltered adults and unaccompanied youth were interviewed to gather subpopulation information, and extrapolation techniques were applied to produce the total sheltered homeless population.
<input checked="" type="checkbox"/>	<b>Non-HMIS client-level information</b> - Providers used individual client records (e.g., case management files) to provide subpopulation data for each adult and unaccompanied youth.
<input type="checkbox"/>	<b>Provider expertise</b> – Providers estimated the percentage of clients belonging to each subpopulation based on their knowledge of their client population as a whole.
<input type="checkbox"/>	<b>HMIS</b> – CoC used HMIS to gather subpopulation information on sheltered homeless persons.
<input type="checkbox"/>	<b>Other</b> –specify:
<b>(2b) If multiple methods are checked, briefly describe how the methods were combined to produce the subpopulation information.</b>	
<b>(3) Indicate CoC's steps to ensure data quality of the sheltered count (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Instructions</b> – Provided written instructions to providers for completing the sheltered PIT count.
<input checked="" type="checkbox"/>	<b>Training</b> – Trained providers on completing the sheltered PIT count.
<input checked="" type="checkbox"/>	<b>Remind and Follow-up</b> – Reminded providers about the count and followed up with providers to ensure the maximum possible response rate and accuracy.
<input checked="" type="checkbox"/>	<b>HMIS</b> – Used HMIS to verify data collected from providers for the sheltered PIT count.
<input type="checkbox"/>	<b>Other</b> –specify:
<b>(4) How often will sheltered counts of sheltered homeless people take place in the future?</b>	
<input checked="" type="checkbox"/>	<b>Biennial (every two years)</b>
<input type="checkbox"/>	<b>Annual</b>
<input type="checkbox"/>	<b>Semi-annual</b>
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(5) Month and Year when next count of sheltered homeless persons will occur: 01/2009</b>	
<b>(6) Indicate the percentage of providers providing populations and subpopulations data collected via survey, interview and/or HMIS:</b>	
90%	Emergency shelter providers
90%	Transitional housing providers

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

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

<b>(1) Check the CoC's method(s) used to count unsheltered homeless persons (check all that apply):</b>	
<input type="checkbox"/>	<b>Public places count</b> – CoC conducted a point-in-time (PIT) count <u>without</u> client interviews.
<input checked="" type="checkbox"/>	<b>Public places count with interviews</b> – CoC conducted a PIT count and interviewed unsheltered homeless persons encountered during the public places count: <input checked="" type="checkbox"/> ALL persons were interviewed <b>OR</b> <input type="checkbox"/> Sample of persons were interviewed
<input type="checkbox"/>	<b>Public places count using probability sampling</b> – High and low probabilities assigned to designated geographic areas based on the number of homeless people expected to be found in each area. The CoC selected a statistically valid sample of each type of area to include in the point-in-time count and extrapolated results to estimate the entire homeless population.
<input checked="" type="checkbox"/>	<b>Service-based count</b> – Interviewed people using non-shelter services, such as soup kitchens and drop-in centers, and counted those that self-identified as unsheltered homeless persons.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS for the count of unsheltered homeless people or for subpopulation information.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(2) Indicate the level of coverage of the PIT count of unsheltered homeless people:</b>	
<input checked="" type="checkbox"/>	<b>Complete coverage</b> – The CoC counted every block of the jurisdiction.
<input type="checkbox"/>	<b>Known locations</b> – The CoC counted in areas where unsheltered homeless people are known to congregate or live.
<input type="checkbox"/>	<b>Combination</b> – CoC combined complete coverage with known locations by conducting counts for every block in a portion of the jurisdiction (e.g. central city) AND conducting counts in other portions of the jurisdiction where unsheltered persons are known to live.
<input type="checkbox"/>	<b>Used service-based or probability sampling</b> (coverage is not applicable)
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(3) Indicate community partners involved in PIT unsheltered count (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Outreach teams</b>
<input checked="" type="checkbox"/>	<b>Law Enforcement</b>
<input checked="" type="checkbox"/>	<b>Service Providers</b>
<input checked="" type="checkbox"/>	<b>Community volunteers</b>
<input checked="" type="checkbox"/>	<b>Homeless and/or formerly homeless persons</b>
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(4) Indicate CoC's steps to ensure data quality of the unsheltered count (check all that apply):</b>	
<input checked="" type="checkbox"/>	<b>Training</b> – Conducted training(s) for PIT enumerators.
<input type="checkbox"/>	<b>HMIS</b> – Used HMIS to check for duplicate information.
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(5) How often will CoC conduct PIT counts of unsheltered homeless people in the future?</b>	
<input checked="" type="checkbox"/>	<b>Biennial (every two years)</b>
<input type="checkbox"/>	<b>Annual</b>
<input type="checkbox"/>	<b>Semi-annual</b>
<input type="checkbox"/>	<b>Quarterly</b>
<input type="checkbox"/>	<b>Other</b> – specify:
<b>(6) Month and Year when next PIT count of unsheltered homeless persons will occur: 01/09</b>	

\*Please refer to 'A Guide to Counting Unsheltered Homeless People' for more information on unsheltered enumeration techniques.

## 2l. Continuum of Care (CoC) Point-in-Time Homeless Population

### Instructions:

This section must be completed using statistically reliable, unduplicated counts or estimates of homeless persons in sheltered and unsheltered locations on a single night. HUD requires CoCs to conduct a point-in-time count at least every two years during the last 10 days of January - January 22nd to 31st - and requests that CoCs conduct a count annually if resources allow. The last required count was in January 2007. Data entered in this chart must reflect a point-in-time count that took place during the last 10 days of January in 2007 or 2008, unless a waiver was received by HUD.

There are six (6) categories of homeless populations on this form. They are:

Households with Dependent Children - Sheltered Emergency  
Households with Dependent Children - Sheltered Transitional  
Households with Dependent Children - Unsheltered

Households without Dependent Children - Sheltered Emergency  
Households without Dependent Children - Sheltered Transitional  
Households without Dependent Children - Unsheltered

For each category, the number of households must be less than or equal to the number of persons. For example, in Households with Dependent Children - Sheltered Emergency, the number entered for ?Number of Households? must be less than or equal to the number entered for ?Number of Persons (adults with children).?

For additional instructions, refer to the detailed instructions available on the left menu bar.

Indicate the date of the last PIT count: 01/24/2007

**For each homeless population category, the number of households must be less than or equal to the number of persons.**

Households with Dependent Children				
	Sheltered Emergency	Transitional	Unsheltered	Total
Number of Households	59	74	17	150
Number of Persons (adults and children)	188	225	51	464
Households without Dependent Children				
	Sheltered Emergency	Transitional	Unsheltered	Total
Number of Households	157	157	988	1,302
Number of Persons (adults and unaccompanied youth)	157	157	988	1,302
All Households/ All Persons				
	Sheltered Emergency	Transitional	Unsheltered	Total
Total Households	216	231	1,005	1,452
Exhibit 1	Page 44		10/02/2008	

West Palm Beach/Palm Beach County CoC			COC_REG_v10_000263	
Total Persons	345	382	1,039	1,766



## 2J. Continuum of Care (CoC) Point-in-Time Homeless Subpopulations

### Instructions:

Enter the number of sheltered and unsheltered adults who belong in each subpopulation category. As in the Homeless Populations chart, this chart must be completed using data from a point-in-time count conducted during the last ten days of January 2007 or January 2008. Only adults should be included in the counts for this chart, except for the Unaccompanied Youth (those under age 18) category. Subpopulation data is required for sheltered persons and optional for unsheltered persons, with the exception of Chronically Homeless.

**Complete the following information for the most recent point-in-time (PIT) count conducted using statistically reliable, unduplicated counts or estimates of homeless persons. Completion of the "Unsheltered" column is optional for all subpopulations, except for Chronically Homeless.**

	Sheltered	Unsheltered	Total
* Chronically Homeless (Federal definition)	34	295	
* Severely Mentally Ill	73	115	
* Chronic Substance Abuse	361	293	
* Veterans	71	140	
* Persons with HIV/AIDS	13	37	
* Victims of Domestic Violence	187	7	
* Unaccompanied Youth (under 18)	7	4	

## 2K. Continuum of Care (CoC) Sheltered Homeless Population & Subpopulation: Point-In-Time (PIT) Count

**Instructions:**

Separately calculate and enter the percentage of emergency shelter and transitional housing providers that provided data for the Homeless Population and Subpopulation charts. For example, if 9 out of 12 transitional housing programs provided point-in-time data, enter 75%. If all providers for a program type contributed data, enter 100%.

For additional instructions, refer to the detailed instructions available on the left menu bar.

**Annually (every year); Biennially (every other year); Semi-annually (every six months)**

How often will the CoC conduct a PIT count? Biennially

Enter the date in which the CoC plans to conduct its next annual point-in-time count: 01/28/2009  
(mm/dd/yyyy)

Indicate the percentage of providers supplying population and subpopulation data collected via survey, interview, and/or HMIS.

Emergency Shelter providers 80%

Transitional housing providers: 85%

## 2L. Continuum of Care (CoC) Sheltered Homeless Population and Subpopulation: Methods

### Instructions:

#### Survey Providers:

Providers counted the total number of clients residing in each program on the night designated as the point-in-time count.

#### HMIS:

The CoC used HMIS to complete the point-in-time sheltered count.

#### Extrapolation:

The CoC used extrapolation techniques to estimate the number and characteristics of sheltered homeless persons from data gathered at most emergency shelters and transitional housing programs.

For additional instructions, refer to the detailed instructions available on the left menu bar.

**Indicate the method(s) used to count sheltered homeless persons during the last point-in-time count:  
(Select all that apply):**

<b>Survey Providers:</b>	<input checked="" type="checkbox"/>
<b>HMIS:</b>	<input checked="" type="checkbox"/>
<b>Extrapolation:</b> (Extrapolation attachment is required)	<input type="checkbox"/>
<b>Other:</b>	<input type="checkbox"/>

**If Other, specify:**

**Describe how the sheltered population data was collected and the count produced. Additionally, comparing your most recent point-in-time count to the last biennial/annual count, describe any factors that may have resulted in an increase, decline or no change in the sheltered count.**

The most recent Bed Inventory occurred on the night of January 29, 2008, and served to collect the total number of beds available that night. Data was collected through surveys completed by CoC providers. Survey Training was held prior to the count. Current inventory and census is reflected in the eHIC. No subpopulation data was collected as this was not the required biennial count. The last biennial count was conducted on January 24, 2007. The survey instrument was updated prior to the count. Trainings were conducted and written instructions were incorporated into the survey. Copies of the survey were distributed both at the training sessions and in e-mail format. From 2006 to 2007, the number of sheltered persons decreased by 15.5%, 425 in 2006 to 314 in 2007. This was the result of an increase in PSH beds for individuals in 2007. The number of sheltered households with dependent children remained stable (132 in 2006 and 133 in 2007).

## 2M. Continuum of Care (CoC) Sheltered Homeless Population and Subpopulation Data

### Instructions:

#### HMIS:

Only HMIS used for subpopulation data on sheltered persons (no extrapolation for missing data).

#### HMIS plus extrapolation:

Extrapolation to account for missing HMIS data and HUD's extrapolation tool completed.

#### Sample of PIT interviews plus extrapolation:

Interviews conducted with a random or stratified sample of sheltered adults and unaccompanied youth and appropriate HUD extrapolation tool completed.

#### Interviews:

Interviews conducted with every person staying in an emergency shelter or transitional housing program on the night of the point-in-time count.

#### Non-HMIS client level information:

Providers used individual client records to provide subpopulation data for each sheltered adult and unaccompanied youth for the night of the point-in-time count.

#### Other:

CoC used a combination of methods.

For additional instructions, refer to the detailed instructions available on the left menu bar.

**Indicate the method(s) used to gather and calculate subpopulation data on sheltered homeless persons (select all that apply):**

	<b>HMIS</b>	<input checked="" type="checkbox"/>
	<b>HMIS plus extrapolation:</b>	<input type="checkbox"/>
<b>Sample of PIT interviews plus extrapolation:</b> <b>(PIT attachment is required)</b>		<input type="checkbox"/>
	<b>Sample Strategy:</b>	
	<b>Provider Expertise:</b>	<input checked="" type="checkbox"/>
	<b>Non-HMIS client level information:</b>	<input checked="" type="checkbox"/>
	<b>None:</b>	<input type="checkbox"/>
	<b>Other:</b>	<input checked="" type="checkbox"/>

#### If Other, specify:

The data was collected by the survey method and calculated by an Excel spreadsheet after analyzing the data for duplication.

**Describe how the sheltered subpopulation data was collected and the count produced. Additionally, comparing your most recent point-in-time count to the last biennial/annual count, describe any factors that may have resulted in an increase, decline or no change in the sheltered subpopulation counts, particularly the chronically homeless count.**

The sheltered subpopulation data was collected by surveys completed by ES/TH case managers on the night of the count through agency records and documents. The same method was utilized in the January 2006 count. There was an overall decrease in the number of sheltered individuals from 2006 to 2007, however, the number of chronically homeless remained relatively stable - 37 in 2006 to 34 in 2007. The most significant changes in subpopulation data were the 8% decrease in the number of sheltered mentally ill individuals and the 10% increase in the number of sheltered chronic substance abusers. The decline in the number of sheltered mentally ill may be related to the rise in the number of PSH beds that target mentally ill individuals. The increase in the number of sheltered chronic substance abusers was directly related to a pilot program administered by the Florida State Department of Children and Families entitled Access to Recovery. This pilot provided funding which allowed individuals to choose the least restrictive environment for substance abuse treatment and the increase indicates many of unsheltered chronic substance abusers chose emergency shelter and/or transitional housing along with outpatient treatment. When the pilot ended, the funding to support these placements was withdrawn as well.

## 2N. Continuum of Care (CoC) Sheltered Homeless Population and Subpopulation: Data Quality

### Instructions:

For additional instructions, refer to the detailed instructions available on the left menu bar.

**Indicate the steps used to ensure the data quality of the sheltered persons count:  
(select all that apply)**

Instructions:	<input checked="" type="checkbox"/>
Training:	<input checked="" type="checkbox"/>
Remind/Follow-up	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>
Other:	<input checked="" type="checkbox"/>

### If Other, specify:

Data quality is ensured by the utilization of provider case management records and agency documents as the official sources of data during the designated 24 hour time period. If questions arise, this information is also verified for accuracy with providers after the count. Upon verification by the providers, the data is entered into an Excel spreadsheet and sent to HMIS for comparison.

### Describe the non-HMIS de-duplication techniques (if Non-HMIS de-duplication was selected):

Once the data had been entered into Excel, duplicates were identified and removed by alphabetizing the names and comparing similar names with dates of birth. Only de-duplicated data was used in the final count.

## 20. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation: Methods

### Instructions:

#### Public places count:

Count conducted based on observation of unsheltered persons without interviews

#### Public places count with interviews:

Interviewed either all unsheltered persons encountered during public places count or a sample

#### Service-based count:

Counted homeless persons using non-shelter services based on interviews.

#### HMIS:

HMIS used to collect, analyze or report data on unsheltered persons.

For additional instructions, refer to the detailed instructions available on the left menu bar.

**Indicate the method(s) used to count unsheltered homeless persons:  
(select all that apply)**

Public places count:	<input type="checkbox"/>
Public places count with interviews:	<input checked="" type="checkbox"/>
Service-based count:	<input checked="" type="checkbox"/>
HMIS:	<input type="checkbox"/>
Other:	<input checked="" type="checkbox"/>

### If Other, specify:

The main method utilized in the unsheltered count was a survey instrument completed during face-to-face interviews by trained volunteers. A \$5 gift card was offered and given to every homeless individual willing to participate in a survey interview. In addition to the surveys, field reports from municipal police officers and County sheriff deputies obtained during the same 24-hour time frame of the count were also used as a source of data.

## 2P. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation - Level of Coverage

### Instructions:

#### Complete coverage:

Every part of a specified geography (e.g. entire city, downtown area, etc.) is covered by enumerators.

#### Known locations:

Counting in areas where unsheltered homeless people are known to congregate or live.

#### Combination:

Conducting counts for every block in a portion of the jurisdiction (e.g. central city) AND conducting counts in other portions of the jurisdiction where unsheltered persons are known to live.

For additional instructions, refer to the detailed instructions available on the left menu bar.

**Indicate the level of coverage of the PIT count of unsheltered homeless people:** Complete Coverage and Known Locations

**If Other, specify:**



## 2Q. Continuum of Care (CoC) Unsheltered Homeless Population and Subpopulation - Data Quality

### Instructions:

For additional instructions, refer to the detailed instructions available on the left menu bar.

Indicate the steps used by the CoC to ensure the data quality of the unsheltered persons count.  
(select all that apply)

Training:	<input checked="" type="checkbox"/>
HMIS:	<input type="checkbox"/>
De-duplication techniques:	<input checked="" type="checkbox"/>
Other:	<input type="checkbox"/>

If Other, specify:

**Describe the techniques used to reduce duplication.**

The first technique used to avoid duplication involved the recognition abilities of volunteers. All volunteers were instructed at the training to flag the surveys of individuals they may have encountered at other sites for possible duplication. If the individual admitted to being interviewed at another location, that survey was labeled a duplicate and not included in the data. Another technique employed the use of an Excel worksheet. All of the data was entered into Excel and the individuals were sorted alphabetically by first name and first initial of their last name. Birth dates were used to identify duplications. If this comparison was not definitive, the location of where the survey was taken helped determine whether or not it was a duplicate. Lastly, United Way assisted the Bed and Gaps Committee by engaging a Senior Actuary from an Insurance firm to evaluate the data for duplication and provide detailed analysis.

**Describe the CoCs efforts, including outreach plan, to reduce the number of unsheltered homeless households with dependent children.**

There are several entry points within the CoC to address the needs of unsheltered families. First, in October 2007, The Lords Place implemented the Engagement Center (Center), a walk-in-center which operates during work hours as well as after hours and on weekends. The Centers philosophy is to meet the family/individual where they are now. The Center provides a client-centered, client driven low demand environment. This offers a safe place for families/individuals to begin addressing their homelessness. Staff includes Peer Counselors who quickly develop rapport by relating their own experiences with those being served. The Center has developed partnerships with homeless services providers who operate emergency shelters or have local funds to access interim housing. One such provider is the Center for Family Services, who may place families/individuals on an emergency basis after hours and on weekends. Families/individuals can access after hours placement through the Engagement Center, 211 or through voluntary contact with law enforcement.

**Describe the CoCs efforts to identify and engage persons routinely sleeping on the streets and other places not meant for human habitation. Additionally, comparing your most recent point-in-time count to the last biennial/annual count, describe any factors that may have resulted in an increase, decline or no change in the unsheltered population (especially the chronically homeless and families with children).**

Street outreach is conducted twice a week by one of the CoC's three Homeless Outreach Teams (HOT Team). The Hot Team, accompanied by law enforcement, goes to different locations throughout the County where homeless individuals are known to congregate. This method has been very successful in bringing homeless individuals off the streets and into emergency shelter. Homeless families with children have been difficult to locate in the past as evidenced by the decline in the unsheltered count of individuals in homeless families with children going from 171 in 2006 to 51 in 2007. The opening of The Lord's Place Engagement Center in October of 2007 has been very successful in identifying and engaging homeless families with children to seek assistance. The Center's low demand setting is empowering with its client-driven, client-centered programming. The Engagement Center is centrally located in West Palm Beach and easily accessed by providing evening hours during the week and by being open on Saturdays. Additionally, Adopt-A-Family of the Palm Beaches began The Bridges Program in August 2008 in Lake Worth (the southern portion of the county), which is a neighborhood-oriented program designed to develop relationships with families with children in a non-threatening environment. The program offers a spectrum of services for low-income and homeless families with children. There is also a new program under development in Belle Glade which will help reach the western-most areas of the County. The Homeless Helpline at 211 remains an easily accessible method for homeless families/individuals to call for assistance when needed. The unsheltered chronically homeless numbers greatly increased from 119 in 2006 to 329 in 2007. This was largely due to an increased number of volunteers (up from 56 in 2006 to 72 in 2007) as well as the doubling of the amount of available trainings opportunities for these volunteers. Another method utilized to identify unsheltered homeless individuals was to engage faith based organizations as part of the planning process. These organizations largely operate Food Pantries and Soup Kitchens serving to provide additional known locations where homeless often congregate at. The 2007 count covered a much larger geographic area and doubled the amount of mobile outreach vans from three to six. Additional law enforcement agencies were also involved as compared to 2006. Finally, offering an incentive for completing the survey proved to be helpful in engaging the hard-to-reach homeless. The incentive was made available through a collaborative effort with United Way who funded the purchase of the gift cards.

## Ability to Complete Activities

The application process for the 2010 Challenge Grant was presented and discussed at the May 28, 2009, local Continuum of Care (CoC) meeting. All CoC agencies and service providers were notified of the agenda by e-mail prior to the meeting. The CoC members discussed how to effectively expend the grant funds based upon current need in the continuum. Upon voting, it was unanimously decided by the continuum to support proposals for Transitional Housing as funds for this type of program component has been drastically reduced, particularly with HUD now emphasizing Permanent Housing in its grant application process. All agencies interested in applying for the funds were given the opportunity to present their plans to the Continuum at the meeting and a vote was taken by those in attendance.

Two services providers were selected by the Continuum to apply for the funds. Faith\*Hope\*Love\*Charity, Inc. has been providing transitional housing to homeless Veterans for the past nine years. The Salvation Army Center of Hope has also been providing transitional housing to homeless individuals and Veterans for the past nine years as well. Both service providers are participating members in good standing with the Palm Beach County CoC. Having both of these service providers participate in the Challenge Grant will help ensure that funds will be available to assist the steadily increasing numbers of homeless Veterans in need throughout Palm Beach County.

Additionally, each of the above providers has a proven history of reliably entering client data into the Palm Beach County CMIS system. Referrals will be made by Palm Beach County's 211 Homeless Helpline, the Veteran's Administration, The Homeless Assessment Center, The Lord's Place walk-in Engagement Center, CoC providers, and the Palm Beach county Homeless Outreach Teams.

The following is a timeline for critical tasks including the development of contracts, draw downs, expenditure of funds and reporting.

1. Execute contract between Palm Beach County Human Services and State Office on Homelessness: 10-1-09
2. Draw down requests: 10-1-09, 1-2-10 and 4-1-10
3. Execute contracts between Palm Beach County Human Services and providers: 11-1-09
4. Submission of bills and progress reports to Palm Beach County Human Services from the providers by the 5<sup>th</sup> of each month as of 12-5-09
5. Monthly submission of Exhibit K to DCF and the State Office on Homelessness beginning 11-10-09
6. Total expenditure of funds and final report to DCF and State Office on Homelessness by 6-30-10