## PURCHASE OF SERVICE AGREEMENT

 THIS PURCHASE OF SERVICE AGREEMENT (hereinafter "Agreement"), made andentered into on the $\gamma^{r / 4}$ day of July, 2019, by and between the LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT, an urban county government of the Commonwealth of Kentucky created pursuant to KRS chapter 67A (hereinafter "Government"), 200 East Main Street, Lexington, Kentucky 40507, on behalf of its Department of Social Services (hereinafter "Sponsor"), and, GREENHOUSE17 with offices located 4400 Briar Hill Road, Lexington, Kentucky 40516, (hereinafter "Organization").

## RECITALS

WHEREAS, the Government and the Sponsor desire to provide to strengthen and enhance Food Insecurity and Nutritional Access by supporting programs and services for the provision of addressing having reliable access to a sufficient quantity of affordable, nutritious food and providing nutritional services, and to fund programs and services to provide low-barrier, rapid resolution; housing-oriented overnight emergency shelter for individuals and families experiencing homelessness.

WHEREAS, the Government and the Sponsor solicited Requests for Proposals from public organizations and private non-profit organizations to provide this service through RFP No. 13-2019 - Extended Social Resources (ESR) Grant Program; Priority Area: Food Insecurity and Nutritional Access and RFP No. 14-2019 - Extended Social Resources (ESR) Grant Program; Priority Area: Overnight Emergency Shelter;

WHEREAS, the Organization submitted a proposal which was deemed by the Government and Sponsor to be one of the best and most responsive proposals to implement and/or provide these services.

## WITNESSETH

NOW, THEREFORE, in consideration of the mutual promises and covenants herein expressed, the Government and the Organization agree as follows:

1. This Agreement shall include the following additional documents, which are attached hereto as exhibits and incorporated herein by reference as if fully stated:
a. Exhibit A - RFP No. 13-2019, consisting of 19 pages
b. Exhibit B - RFP No. 14-2019, consisting of 21 pages
c. Exhibit C - Organization's Formal Response to RFP No. 13 - 2019, consisting of 8 pages
d. Exhibit D - Organization's Formal Response to RFP No. 14 - 2019, consisting of 56 pages

In the event of a conflict between and among the provisions of these documents the provisions of this Agreement shall prevail, followed by Exhibit A and Exhibit B, and then Exhibit C and Exhibit D.
2. Government hereby retains Organization for the period beginning on July 1, 2019, and continuing for a period of one (1) year from that date. The Government may terminate this Agreement at any time and for any reason by providing the Organization with at least thirty (30) days written notice of termination. In such case this Agreement shall terminate thirty (30) days from the date notice is given to the Organization.
3. Government shall pay Organization the sum of ONE HUNDRED AND NINETY THOUSAND and 00/100 Dollars $(\$ 190,000)$ for the services required by this Agreement, said services being more particularly described in the Exhibit $C$ and Exhibit $D$ attached hereto and incorporated herein by reference as Exhibit A and Exhibit B, one-half $\left(1 / 2^{\text {th }}\right)$ of which shall be payable in August 2019 or shortly thereafter upon receipt of an invoice, and with one-half ( $\left.1 / 2^{\text {th }}\right)$ payable in January 2020 or shortly thereafter upon receipt of an invoice, and detailed
mid-year and year-end program reports. First biannual invoice shall be submitted by August $5^{\text {th }}, 2019$, and second biannual invoice and first six-month detailed program report shall be due January $13^{\text {th }}, 2020$. A year-end program report shall be submitted by July $17^{\text {th }}, 2020$. Reports shall reflect the services and programs directly related to the funding provided by Lexington Fayette Urban County Government with emphasis on measurable outcomes, and specifically outlined in the funding application. Forms for both the quarterly financial and program reports will be provided.
4. In the event of termination of this Agreement by Government as provided for in paragraph 1 above, Organization shall be entitled to that portion of total compensation due under this Agreement as the service rendered bears to the service required herein.
5. Organization shall perform all duties and services included in the Exhibit $C$ and Exhibit D, attached hereto faithfully and satisfactorily at the time, place and for the duration prescribed herein. Compensation paid pursuant to this Agreement shall be used exclusively for the services set forth in the Addendum and for no other purpose. Any alteration in the nature of such services and duties constitutes an amendment to this Agreement and must be in writing signed by both parties. Organization shall keep itself fully informed of all federal and state laws and all municipal ordinances and regulations in any manner affecting the work or performance of this Agreement, and shall at all times observe and comply with such laws, ordinances and regulations, whether or not such laws, ordinanceș or regulations are mentioned herein, and
6. Organization shall indemnify, defend and hoid harmless Government, its officers, agents and employees, from and against any and all liabilities, claims, demands, losses, damages, costs, and/or expenses arising out of, from, relating to, and/or based on the Organization's violation of any such laws, ordinances or regulations or Organization's breach of this Agreement.
7. Organization represents that it has filed all federal, state and local income tax returns required by law in the legally prescribed time and manner. This Agreement shall not become effective unless and until copies of all of the executed originals of the aforementioned tax returns filed for the Organization have been registered for the current tax year by the Organization in the office of the Sponsor, and the Organization shall not be compensated unless and until such registration has taken place.
8. The Organization shall, on such forms as the Sponsor shall provide, submit to Sponsor an annual report and financial statement which summarize the previous year's activities regarding the services enumerated in the addendum attached hereto.
9. Books of accounts shall be kept by the Organization and entries shall be made therein of all money, goods, effects, debts, sales, purchases, receipts, payments and any other transactions of the Organization. The books of accounts, together with all bonds, notes, bills, letters and other writings belonging to the Organization, shall be maintained at the principal place of business of the Organization as set forth in this Agreement. Government shall have free and complete access to the books, papers and affairs of the Organization, that relate to the performance of this Agreement, at all reasonable times, and if it desires, it may have the books and papers of the Organization, that relate to the performance of this Agreement, audited and examined by auditors, accountants or attorneys. Any examination shall be at the expense of the Government.
10. Government may designate such persons as may be necessary to monitor and evaluate the services rendered by the Organization. The Government, its agents and employees, shall, at all times, have unrestricted access to all places where or in which the services required hereunder are being carried on and conducted. Inspection and monitoring of the work by these authorities shall in no manner be presumed to relieve in any degree the
responsibility or obligations of Organization, nor to constitute the Organization as an agent of the Government.
11. Organization shall provide equal opportunity in employment for all qualified persons, shall prohibit discrimination in employment because of race, color, creed, national origin, sex or age, and shall cause each of its subcontracting agencies to do so. This program of equal employment opportunity shall apply to every aspect of its employment policies and practices.
12. Organization shall adopt a written sexual harassment policy, which shall, at a minimum, contain a statement of current law; a list of prohibited behaviors; a complaint process; and a procedure which provides for a confidential investigation of all complaints. The policy shall be given to all employees and clients and shall be posted at all locations where Organization conducts business. The policy shall be submitted to Sponsor for review within thirty (30) days of the execution of this Agreement.
13. Organization agrees that it shall apply all funds received by it from the Urban County Government in accordance with the following investment policy guidelines:
A. Objectives: Capital preservation with surety of income. Reasonable competitive income consistent with high investment quality and purpose of funds. All investments shall conform with state and local law and regulations and these policies.
B. Investment Funds Management: The governing board may elect to either:
(1) Manage its investment through its executive director where the size or complexity of funds to be managed is deemed by the board to be within the training, expertise and/or available time capacity of the executive director and the operating staff; or
(2) Utilize the professional investment management facilities of a local bank trust department acting in a fiduciary capacity within the same approved investment policies and federal, state, local and trust laws and regulation. The trust department may utilize its regular short-
term one hundred percent (100\%) US Treasury Fund for daily funds investment.

The election of option 1 or 2 should be made consistent with the relative cost incurred and in the case of option 2 the cost shall be competitive among local trust departments.
C. Investment Policies - - Safety and Prudence.
(1) Short-term liquidity funds shall be invested in "riskless" investment, i.e., deposits in Kentucky commercial banks or savings and loan associations that are fully federally insured or deposits collateralized by U.S. Treasury securities with a current market value of at least one hundred percent (100\%), or in direct obligations of U.S. Treasury securities.

Investments shall be diversified according to maturity in order to meet projected cash flow needs.

Collateral pledged to secure uninsured deposits shall be held at a federal reserve bank with the receipt providing absolute control by the agency.
(2) Retirement funds, endowiment funds, long-tem capital reserve funds and any other special funds may be held and invested by a local bank trust department under investment objectives and diversification in accordance with the individual nature of the funds and pursuant to the "prudent man" investment rule as well as general trust law.
(3) All investments shall be reviewed monthly by a finance or investment committee of the agency.
(4) Local brokerage firms may hold and invest funds provided that investments are located within Kentucky and are full insured.
D. Audit - All investments shall be audited at least annually by independent certified public accountant who shall express an opinion as to whether or not investments during the year audited have conformed with state and local law and regulation and with the approved investment policies.
14. This Agreement, and Exhibits incorporated herein, contains the entire agreement between the parties, and no statement, promises or inducements made by either party or agent of either party that is not contained in this written Agreement shall be valid and binding; and this Agreement may not be enlarged, modified or altered except in writing signed by the parties and endorsed hereon.
15. Organization shall not assign any interest, obligation, or benefit of this Agreement or transfer any interest in the same, whether by assignment or novation, without prior written consent of LFUCG.
16. Organization expressly agrees to abide by the General Conditions and Risk Management Provisions included in Exhibit A which is attached hereto and incorporated herein by reference.
17. This Agreement shall be governed by and construed in accordance with the laws of the Commonwealth of Kentucky. Organization acknowledges and agrees that any claims, legal proceedings or litigation arising in connection with this Agreement or the Services provided hereunder shall be brought solely in Fayette County, Kentucky.
18. If any particular provision of this Agreement is determined to be invalid or unenforceable, that determination will not affect any other provision hereto, which will be construed in all respects as if the invalid or unenforceable provision were omitted.
19. Notice - Any written notice required by the Agreement shall be delivered by certified mail, return receipt requested, to the following:

For Organization:


For Government:
Lexington-Fayette Urban County Gov.
200 East Main Street
Lexington, Kentucky 40507
Attn: Chris Ford, Commissioner Department of Social Services

IN WITNESS WHEREOF, the parties have executed this Agreement at Lexington, Kentucky, the day and year first above written.

LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT


Linda Gorton, Mayor


# Lexington-Fayette Urban County Government <br> Request for Proposal 

The Lexington-Fayette Urban County Government hereby requests proposals for RFP \#14-2019 Emergency Overnight Shelter - Extended Social Resources (ESR) Grant Program to be provided in accordance with terms, conditions and specifications established herein.

Proposals will be received online only at https://lexingtonky ionwave net until 2:00 PM, prevailing local time, on April 19, 2019.

Proposals received after the date and time set for opening proposals will not be considered for award of a contract/grant. It is the sole responsibility of the Proposer to assure that his/her proposal is submitted online before the date and time set for opening proposals.

Additional copies of this Request For Proposals are available from the Division of Central Purchasing, Room 338 Government Center, 200 East Main Street, Lexington, KY 40507, (859)-258-3320, at no charge.

Proposals, once submitted, may not be withdrawn for a period of sixty (60) calendar days.

The Lexington-Fayette Urban County Government reserves the right to reject any or all proposals, and to waive technicalities and informalities when such waiver is determined by the Lexington-Fayette Urban County Government to be in its best interest.

Electronic signature online at httos://lexingtonky.ionwave.net constitutes acceptance by the Proposer of terms, conditions and requirements set forth herein.

Pre-Proposal Meeting will be held on Monday, April 8 ${ }^{\text {th }}, 2019$ at 8:30AM at the Phoenix Building 3rd Floor Conference Room, 100 East Vine Street, Lexington, KY 40507.

Minor exceptions may not eliminate the proposal. Any exceptions to the specifications established herein shall be listed in detail on a separate sheet and attached hereto. The Lexington-Fayette Urban County Government shall determine whether any exception is minor.

Please do not contact any LFUCG staff member or any other person involved in the selection process other than the designated contact person(s) regarding the project contemplated under this RFP while this RFP is open and a selection has not been finalized. Any attempt to do so may result in disqualification of the firm's submittal for consideration.

## Laws and Regulations

All applicable state laws, municipal ordinances and regulations of all authorities having jurisdiction over the project shall apply to the contract, and shall be deemed to be incorporated herein by reference.

## Equal Employment Opportunity

The Entity (regardless of whether construction contractor, non-construction contractor or supplier) agrees to provide equal opportunity in employment for all qualified persons, to prohibit discrimination in employment because of race, color, creed, national origim, sex or age, and to promote equal employment thiough a positive, continuing program from itself and each of its subcontracting agents. This program of equal employment opportunity shall apply to every aspect of its employment policies and practices.

## Kentucky Equal Employment Opportunity Act

The Kentucky Equal Employment Opportunity Act of 1978 (KRS 45.560-45.640) requires that any "county, city, town, school district, water district, hospital district, or other political subdivision of the state shall include in directly or indirectly publicly funded contracts for supplies, materials, services, or equipment hereinafter entered into the following provisions:
"During the performance of this contract, the contractor agrees as follows:
(1) The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, or national origin;
(2) The contractor will state in all solicitations or advertisements for employees placed by or on behalf of the contractors that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age, or national origin;
(3) The contractor will post notices in conspicuous places, available to employees and applicants for employment, setting forth the provision of the nondiscrimination clauses required by this section; and
(4) The contractor will send a notice to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding advising the labor union or workers' representative of the contractor's commitments under the nondiscrimination clauses."

The Act further provides:
"KRS 45.610. Hiring minorities -- Information required
(1) For the length of the contract, each contractor shall hire minorities from other sources within the drawing area, should the union with which he has collective bargaining agreements be unwilling to supply sufficient minorities to satisfy the agreed upon goals and timetables.
(2) Each contractor shall, for the length of the contract, furnish such information as required by KRS 45.560 to KRS 45.640 and by such rules, regulations and orders issued pursuant thereto and will permit access to all books and records pertaining to his employment practices and work sites by the contracting agency and the department for purposes of investigation to ascertain compliance with KRS 45.560 to 45.640 and such rules, regulations and orders issued pursuant thereto.

KRS 45.620. Action against contractor -- Hiring of minority contractor or subcontractor
(1) If any contractor is found by the department to have engaged in an unlawful practice under this chapter during the course of performing under a contract or subcontract covered under KRS 45.560 to 45.640 , the department shall so certify to the contracting agency and such certification shall be binding upon the contracting agency unless it is reversed in the course of judicial review.
(2) If the contractor is found to have committed an unlawful practice under KRS 45.560 to 45.640, the contracting agency may cancel or terminate the contract, conditioned upon a program for future compliance approved by the contracting agency and the department. The contracting agency may declare such a contractor ineligible to bid on further contracts with that agency until such time as the
contractor complies in full with the requirements of KRS 45.560 to 45.640.
(3) The equal employment provisions of KRS 45.560 to 45.640 may be met in part by a contractor by subcontracting to a minority contractor or subcontractor. For the provisions of KRS 45.560 to 45.640, a minority contractor or subcontractor shall mean a business that is owned and controlled by one or more persons disadvantaged by racial or ethnic circumstances.

KRS 45.630 Termination of existing employee not required, when
Any provision of KRS 45.560 to 45.640 notwithstanding, no contractor shall be required to terminate an existing employee upon proof that employee was employed prior to the date of the contract.

KRS 45.640 Minimum skills
Nothing in KRS 45.560 to 45.640 shall require a contractor to hire anyone who fails to demonstrate the minimum skills required to perform a particular job."

It is recommended that all of the provisions above quoted be included as special conditions in each contract. In the case of a contract exceeding $\$ 250,000$, the contractor is required to furnish evidence that his workforce in Kentucky is representative of the available workforce in the area from which he draws employees, or to supply an Affirmative Action plan which will achieve such representation during the life of the contract.

## LFUCG Non-Appropriation Clause

Contractor acknowledges that the LFUCG is a governmental entity, and the contract validity is based upon the availability of public funding under the authority of its statutory mandate.

In the event that public funds are unavailable and not appropriated for the performance of the LFUCG's obligations under this contract, then this contract shall automatically expire without penalty to the LFUCG thirty (30) days after written notice to Contractor of the unavailability and non-appropriation of public funds. It is expressly agreed that the LFUCG shall not activate this nonappropriation provision for its convenience or to circumvent the requirements of this contract, but only as an emergency fiscal measure during a substantial fiscal crisis, which affects generally its governmental operations.

In the event of a change in the LFUCG's statutory authority, mandate and mandated functions, by state and federal legislative or regulatory action, which adversely affects the LFUCG's authority to continue its obligations under this contract, then this contract shall automatically terminate without penalty to the LFUCG upon written notice to Contractor of such limitation or change in the LFUCG's legal authority.

## AFFIDAVIT

Comes the Affiant, DARLENE THOMAS , and after being first duly sworn, states under penalty of perjury as follows:

1. His/her name is DARLENE THOMAS and he/she is the individual submitting the proposal or is the authorized representative of ff GREENHOUSE17 INC , the entity submitting the proposal (hereinafter referred to as "Proposer").
2. Proposer will pay all taxes and fees, which are owed to the Lexington-Fayette Urban County Government at the time the proposal is submitted, prior to award of the contract and will maintain a "current" status in regard to those taxes and fees during the life of the contract.
3. Proposer will obtain a Lexington-Fayette Urban County Government business license, if applicable, prior to award of the contract.
4. Proposer has authorized the Division of Central Purchasing to verify the abovementioned information with the Division of Revenue and to disclose to the Urban County Council that taxes and/or fees are delinquent or that a business license has not been obtained.
5. Proposer has not knowingly violated any provision of the campaign finance laws of the Commonwealth of Kentucky within the past five (5) years and the award of a contract to the Proposer will not violate any provision of the campaign finance laws of the Commonwealth.
6. Proposer has not knowingly violated any provision of Chapter 25 of the Lexington-Fayette Urban County Government Code of Ordinances, known as "Ethics Act."

## Continued on next page

7. Proposer acknowledges that "knowingly" for purposes of this Affidavit means, with respect to conduct or to circumstances described by a statute or ordinance defining an offense, that a person is aware or should have been aware that his conduct is of that nature or that the circumstance exists.

Further, Affiant sayeth naught.
state of Kentuaky COUNTY OF FayeHe

The foregoing instrument was subscribed, sworn to and acknowledged before me by Darlene Thomas on this the 18th day of April 2019. My Commission expires: $8 / 17 / 2019$


LETITIA A. MARSHALL

## EQUAL OPPORTUNITY AGREEMENT

## The Law

- Title VII of the Civil Rights Act of 1964 (amended 1972) states that it is unlawful for an employer to discriminate in employment because of race, color, religion, sex, age (40-70 years) or national origin.
- Executive Order No. 11246 on Nondiscrimination under Federal contract prohibits employment discrimination by contractor and sub-contractor doing business with the Federal Government or recipients of Federal funds. This order was later amended by Executive Order No. 11375 to prohibit discrimination on the basis of sex.
- Section 503 of the Rehabilitation Act of 1973 states:

The Contractor will not discriminate against any employee or applicant for employment
because of physical or mental disability.

- Section 2012 of the Vietnam Era Veterans Readjustment Act of 1973 requires Affirmative Action on behalf of disabled veterans and veterans of the Vietnam Era by contractors having Federal contracts.
- Section 206(A) of Executive Order 12086, Consolidation of Contract Compliance Functions for Equal Employment Opportunity, states:

The Secretary of Labor may investigate the employment practices of any Government contractor or sub-contractor to detemine whether or not the contractual provisions specified in Section 202 of this order have been violated.

The Lexington-Fayette Urban County Government practices Equal Opportunity in recruiting, hiring and promoting. It is the Government's intent to affirmatively provide employment opportunities for those individuals who have previously not been allowed to enter into the mainstream of society. Because of its importance to the local Government, this policy carries the full endorsement of the Mayor, Commissioners, Directors and all supervisory personnel. In following this commitment to Equal Employment Opportunity and because the Government is the benefactor of the Federal funds, it is both against the Urban County Government policy and illegal for the Government to let contracts to companies which knowingly or unknowingly practice discrimination in their employment practices. Violation of the above mentioned ordinances may cause a contract to be canceled and the contractors may be declared ineligible for future consideration.

Please sign this statement in the appropriate space acknowledging that you have read and understand the provisions contained herein. Return this document as part of your application packet.

## Bidders

IWe agree to comply with the Civil Rights Laws listed above that govern employment rights of mirorities, wpmen, Vietnam vgterans, handicapped and aged persons.


WORKFORCE ANALYSIS FORM

Name of Organization:
GREENHOUSE17

| Categories | Total | White <br> (Not <br> Hispani <br> cor <br> Latino) |  | Hispani cor Latino |  | Black or AfricanAmerican (Not Hispanic or Latino |  | Native <br> Hawailan and Other Pacific Islander (Not Hispanic or Latino |  | Asian <br> (Not <br> Hispani <br> cor <br> Latino |  | American Indian or Alaskan Native (not Hispanic or Latino |  | Two or more races <br> (Not Hispanic or Latino |  | Total |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | M | $F$ | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| Administrators |  |  | 4 |  |  |  |  |  |  |  |  |  |  |  |  |  | 4 |
| Professionals |  | 4 | 30 |  |  |  | 4 |  |  |  |  |  |  |  |  | 4 | 34 |
| Superintendents |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Supervisors |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Foremen |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Technicians |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Protective Service |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Para-Professionals |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Office/Clerical |  |  | 2 |  |  |  |  |  |  |  |  |  |  |  |  |  | 2 |
| Skilled Craft |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Service/Maintenanc e |  | 1 |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |  |
| Total: |  | 5 | 36 |  |  |  | 4 |  |  |  |  |  |  |  |  | 5 | 40 |

Prepared by: $\frac{\text { CORISSA PHILLIPS, EXTERNAL RELATIONS DIRECTOR }}{\text { (Name and Title) }}$ Date: $\quad \frac{4}{\text { Revised 2015-Dec-15 }}$

## GENERAL PROVISIONS

1. Each Respondent shall comply with all Federal, State \& Local regulations concerning this type of service or good.

The Respondent agrees to comply with all statutes, rules, and regulations governing safe and healthful working conditions, including the Occupational Health and Safety Act of 1970, 29 U.S.C. 650 et. seq., as amended, and KRS Chapter 338. The Respondent also agrees to notify the LFUCG in writing immediately upon detection of any unsafe and/or unhealthful working conditions at the job site. The Respondent agrees to indemnify, defend and hold the LFUCG harmless from all penalties, fines or other expenses arising out of the alleged violation of said laws.
2. Failure to submit ALL forms and information required in this RFP may be grounds for disqualification.
3. Addenda: All addenda, if any, shall be considered in making the proposal, and such addenda shall be made a part of this RFP. Before submitting a proposal, it is incumbent upon each proposer to be informed as to whether any addenda have been issued, and the failure to cover in the bid any such addenda may result in disqualification of that proposal.
4. Proposal Reservations: LFUCG reserves the right to reject any or all proposals, to award in whole or part, and to waive minor immaterial defects in proposals. LFUCG may consider any alternative proposal that meets its basic needs.
5. Liability: LFUCG is not responsible for any cost incurred by a Respondent in the preparation of proposals.
6. Changes/Alterations: Respondent may change or withdraw a proposal at any time prior to the opening; however, no oral modifications will be allowed. Only letters, or other formal written requests for modifications or corrections of a previously submitted proposal which is addressed in the same manner as the proposal, and received by LFUCG prior to the scheduled closing time for receipt of proposals, will be accepted. The proposal, when opened, will then be corrected in accordance with such written request(s), provided that the written request is contained in a sealed envelope which is plainly marked "modifications of proposal".
7. Clarification of Submittal: LFUCG reserves the right to obtain clarification of any point in a bid or to obtain additional information from a Respondent.
8. Bribery Clause: By his/her signature on the bid, Respondent certifies that no employee of his/hers, any affiliate or Subcontractor, has bribed or attempted
to bribe an officer or employee of the LFUCG.
9. Additional Information: While not necessary, the Respondent may include any product brochures, software documentation, sample reports, or other documentation that may assist LFUCG in better understanding and evaluating the Respondent's response. Additional documentation shall not serve as a substitute for other documentation which is required by this RFP to be submitted with the proposal,
10. Ambiguity, Conflict or other Errors in RFP: If a Respondent discovers any ambiguity, conflict, discrepancy, omission or other error in the RFP, it shall immediately notify LFUCG of such error in writing and request modification or clarification of the document if allowable by the LFUCG.
11. Agreement to RFP Terms: In submitting this proposal, the Respondent agrees that it has carefully examined the specifications and all provisions relating to the work to be done attached hereto and made part of this proposal. By acceptance of a Contract/Grant under this RFP, proposer states that it understands the meaning, intent and requirements of the RFP and agrees to the same. The successful Respondent shall warrant that it is familiar with and understands all provisions herein and shall warrant that it can comply with them. No additional compensation to Respondent shall be authorized for services or expenses reasonably covered under these provisions that the proposer omits from its Proposal.
12. Cancellation: If the services to be performed hereunder by the Respondent are not performed in an acceptable manner to the LFUCG, the LFUCG may cancel this contract for cause by providing written notice to the proposer, giving at least thirty (30) days notice of the proposed cancellation and the reasons for same. During that time period, the proposer may seek to bring the performance of services hereunder to a level that is acceptable to the LFUCG, and the LFUCG may rescind the cancellation if such action is in its best interest.
A. Termination for Cause
(1) LFUCG may terminate a contract because of the contractor's failure to perform its contractual duties
(2) If a contractor is determined to be in default, LFUCG shall notify the contractor of the determination in writing, and may include a specified date by which the contractor shall cure the identified deficiencies. LFUCG may proceed with termination if the contractor fails to cure the deficiencies within the specified time.
(3) A default in performance by a contractor for which a contract may be terminated shall include, but shall not necessarily be limited to:
(a) Failure to perform the contract according to its terms, conditions and specifications;
(b) Failure to make delivery within the time specified or according to a delivery schedule fixed by the contract;
(c) Late payment or nonpayment of bills for labor, materials, supplies, or equipment furnished in connection with a contract for construction services as evidenced by mechanics' liens filed pursuant to the provisions of KRS Chapter 376, or letters of indebtedness received from creditors by the purchasing agency;
(d) Failure to diligently advance the work under a contract for construction services;
(e) The filing of a bankruptcy petition by or against the, contractor; or
(f) Actions that endanger the health, safely or welfare of the LFUCG or its citizens.

## B. At Will Termination

Notwithstanding the above provisions, the LFUCG may terminate this contract at will in accordance with the law upon providing thirty (30) days written notice of that intent, Payment for services or goods received prior to termination shall be made by the LFUCG provided these goods or services were provided in a manner acceptable to the LFUCG. Payment for those goods and services shall not be unreasonably withheld.
13. Assignment of Contract: The contractor shall not assign or subcontract any portion of the Contract without the express written consent of LFUCG. Any purported assignment or subcontract in violation hereof shall be void. It is expressly acknowledged that LFUCG shall never be required or obligated to consent to any request for assignment or subcontract; and further that such refusal to consent can be for any or no reason, fully within the sole discretion of LFUCG.
14. No Waiver: No failure or delay by LFUCG in exercising any right, remedy, power or privilege hereunder, nor any single or partial exercise thereof, nor the exercise of any other right, remedy, power or privilege shall operate as a waiver hereof or thereof. No failure or delay by LFUCG in exercising any right, remedy, power or privilege under or in respect of this Contract shall affect the rights, remedies, powers or privileges of LFUCG hereunder or shall operate as a waiver thereof.
15. Authority to do Business: The Respondent must be a duly organized and
authorized to do business under the laws of Kentucky. Respondent must be in good standing and have full legal capacity to provide the services specified under this Contract. The Respondent must have all necessary right and lawful authority to enter into this Contract for the full term hereof and that proper corporate or other action has been duly taken authorizing the Respondent to enter into this Contract. The Respondent will provide LFUCG with a copy of a corporate resolution authorizing this action and a letter from an attorney confirming that the proposer is authorized to do business in the State of Kentucky if requested. All proposals must be signed by a duly authorized officer, agent or employee of the Respondent.
16. Governing Law. This Contract shall be governed by and construed in accordance with the laws of the Commonwealth of Kentucky. In the event of any proceedings regarding this Contract, the Parties agree that the venue shall be the Fayette County Circuit Court or the U.S. District Court for the Eastern District of Kentucky, Lexington Division. All parties expressly consent to personal jurisdiction and venue in such Court for the limited and sole purpose of proceedings relating to this Contract or any rights or obligations arising thereunder. Service of process may be accomplished by following the procedures prescribed by law.
17. Ability to Meet Obligations: Respondent affirmatively states that there are no actions, suits or proceedings of any kind pending against Respondent or, to the knowledge of the Respondent, threatened against the Respondent before or by any court, governmental body or agency or other tribunal or authority which would, if adversely determined, have a materially adverse effect on the authority or ability of Respondent to perform its obligations under this Contract, or which question the legality, validity or enforceability hereof or thereof.
18. Contractor understands and agrees that its employees, agents, or subcontractors are not employees of LFUCG for any purpose whatsoever. Contractor is an independent contractor at all times during the performance of the services specified.
19. If any term or provision of this Contract shall be found to be illegal or unenforceable, the remainder of the contract shall remain in full force and such term or provision shall be deemed stricken.


# Lexington-Fayette Urban County Government Request for Proposals 

# Extended Social Resources (ESR) Grant Program Priority Area: Emergency Overnight Shelter 

## Purpose

Each fiscal year the Mayor and Urban County Council allocate funds for use by selected 501(c)(3) non-profit partner agencies through the Department of Social Services' Extended Social Resource (ESR) Program. The Lexington-Fayette Urban County Government (hereinafter referred to as "LFUCG") has historically partnered with non-profit agencies for the purpose of providing priority social services to supplement and support the work of the Urban County Government. These agencies are diverse in their missions and work plans, and provide services to the most vulnerable populations in our community.

## Eligibility

- Eligible Responders shall be a non-profit 501(c)3 organization with a physical presence in Lexington-Fayette County
- Responders shall be registered and have a current, complete agency portrait on GoodGiving.net
- Programs receiving grant funds for Partners for Youth are not eligible to also receive funding from the ESR Grant Program (a Program cannot receive funding from both)
- ESR funds cannot be used to teach, advance, advocate or nromote any religion
- Be located in and/or serve Fayette County residents with ESR funds in Fayette County
- Applying organization agrees to comply with all applicable local, state, and federal laws

Applicants for overnight emergency shelter funding must meet or agree to implement the following items. Submission of a proposal constitutes agreement to these terms:

- All shelter guests must be entered into the Kentucky Homeless Management information System (KYHMIS) database. All emergency shelter program specific data elements per the LFUCG Homelessness Prevention and Intervention Board must be entered for each guest and they must be entered and exited from the shelter project in KYHMIS within three (3) days of occurrence. ${ }^{1}$
- Shelters must participate fully in the OneDoor Lexington Coordinated Entry System. For shelters this means conducting the VI-SPDAT assessment for guests who have reached an appropriate length of stay ${ }^{2}$, entering those guests into the Coordinated Entry project in KYHMIS, and meeting all responsibilities outlined in Lexington Coordinated Entry Policies \& Procedures adopted by the LFUCG Homelessness Prevention \& Intervention Board.
- Shelters must ensure that they do not contribute to unlawful gaps in access based on race, ethnicity, gender identity, sexuality, or other demographics, as defined by federal, state, and local laws and ordinances. Shelters will have a culture that exhibits cultural competency and responsiveness.


## Instructions

Please follow the attached instructions and submit all required forms no later than the deadline indicated below:

## Proposal Deadline - 2:00 PM EST Friday, April $19^{\text {th }}, 2019$. Proposals received after this deadline or incomplete proposals will not be considered.

[^0]
### 1.0 GENERAL INFORMATION \& SCOPE

### 1.1 Background

Each fiscal year the Mayor and Urban County Council allocate funds for use by selected 501(c)(3) nonprofit partner agencies through the Department of Social Services' Extended Social Resource (ESR) Program.

This grant cycle shall cover Fiscal Year 2020 (July 1, 2019—June 30, 2020), and will award grants between the four Funding Priorities, which each have separate required Proposal Submittals and criteria, and awarded on an approximate scale, listed below. Proposers may submit ONE Proposal per Funding Priority Area.

Lexington-Fayette Urban County Government (LFUCG) wishes to complete a purchase for service agreement with non-profit organizations operating within the city of Lexington, to provide low-barrier, rapid resolution, housing-oriented overnight emergency shelter for individuals and families experiencing homelessness.

Lexington-Fayette Urban County Government (LFUCG) wishes to contract with non-profit organizations operating within the city of Lexington to provide low-barrier, housing-oriented overnight emergency shelter for individuals and families experiencing homelessness. These funding agreements will be administered and monitored through the LFUCG Office of Homelessness Prevention \& Intervention (OHPI).

Emergency shelter contracts will be awarded to eligible applicants to assist in operating an emergency shelter in alignment with the goals of the Lexington-Fayette County Continuum of Care, the Office of Hiomeiessness Prevention and Intervention and the LFUCG Homelessness Prevention \& Intervention Board. This is a purchase service agreement with terms set by LFUCG. LFUCG intends to fund any organization which operates a rapid-resolution, housing oriented emergency shelter that assists individuals and families to exit into permanent housing quickly.

## Funding Priority Area: Emergency Overnight Shelter

Projected funding is $25 \%$ of total ESR Grant Program Award
LFUCG seeks to fund programs and services to provide low-barrier, rapid resolution, housing-oriented overnight emergency shelter for individuals and families experiencing homelessness.

### 2.0 GENERAL PROVISIONS

### 2.1 Purpose

The LFUCG is accepting applications from qualified non-governmental, non-profit agencies with current 501(c)3 tax exempt status and with a physical business or program site location in Fayette County (hereinafter, referred to as "Applicant") for ESR funding for FY2020 (July 1, 2019 - June 30, 2020). This funding is intended to support agency programs which respond to the funding priorities established herein. THIS FUNDING IS NOT INTENDED TO SUPPORT GENERAL AGENCY OPERATIONS, other than overhead required to support the subject program.

### 2.2 Funding Period

The funding period is from July 1, 2019 through June 30, 2020.

### 2.3 ESR Grant Informational Workshop

The Department of Social Services conducted a meeting on March 28, 2019 that provided potential proposers with an overview of the proposal and review process, instructions on completing the RFP, and presentation of funding priorities.

### 2.4 Proposal Submission

All Submissions must be uploaded to the LFUCG procurement website at https://lexingtonky.ionwave.net by FRIDAY, APRIL 19 ${ }^{\text {th }}, 2019$ before 2:00 PM EST. The Submission shall include an enclosed form that shall contain the required documents, and respond to one or more established funding priorities.

Proposal submissions containing significant omissions of required information will be considered nonresponsive and removed from the RFP funding process on the application deadline date (April 19 ${ }^{\text {th }}$, 2019). Significant missing responses to questions constitute an incomplete application. The final decision regarding application completeness and penalties will be determined by the LFUCG Division of Central Purchasing in consultation with the Commissioner of Social Services.

All proposals must be written in a clear and concise manner, as there will be no follow-up or clarifications to proposer's Proposal Submittal Form once the evaluation process begins.

Only include the attachments asked for in the RFP with the Proposal Submittal Form. Do not include additional documents or attachments with the Proposal Submittal Form, such as brochures or letters of support. These will be discarded.

If your agency is submitting a proposal for the funding of more than one program in a single priority area, please note that they must be included in a single Proposal Submittal completed and submitted for that priority area RFP. Only one Proposal Submittal per agency per priority area RFP will be accepted.

Submitted Proposal shall be comprised of the attached PDF formatted Proposal Submittal form. This form must be submitted in the original PDF form, and NOT be a scanned version of the original form.

### 2.5 Acceptance/Rejection of Submissions

The LFUCG reserves the right to reject any proposals which may be considered irregular, show serious omissions, contain unauthorized alteration of the Proposal Submittal form, or are incomplete.

The LFUCG reserves the right to accept or reject any or all applications in whole or in part, with or without cause, to waive technicalities, to implement scoring penalties, or to accept applications or portions thereof which, in the Urban County Government's judgment, best serve the interests of Urban County Government.
2.6 Inquiries/Questions

After thoroughly reading this Request for Proposals, Applicants must direct any questions to:
Todd Slatin, Director
Division of Central Purchasing 200 E. Main Street, Lexington, KY 40507
E-mail: tslatin@lexingtonky.gov Phone: (859) 258-3320
Deadline for questions is Friday, April $10^{\text {th }}, 2019$ at 5:00 p.m. EST

### 3.0 FUNDING PROCESS

### 3.1 Timeline

This Request for Proposals is being released on March $\mathbf{2 9}^{\text {th }}, \mathbf{2 0 1 9}$, and is made available to the public and all potentially eligible applicants. An informational and question and answer meeting will be held on Monday, April $\mathbf{8}^{\text {th }}, \mathbf{2 0 1 9}$, at 8:30 a.m. at the Phoenix Building $3^{\text {rd }}$ Floor Conference Room, 100 East Vine Street, Lexington, KY 40507. This meeting will be open to the public and any potentially eligible applicants are invited to attend and ask questions or seek clarification regarding the RFP. Attendance is NOT required in order to submit a proposal and will not affect scoring during the evaluation process.

Completed proposals must be submitted no later than 2 p.m. on FRIDAY, APRIL 19 ${ }^{\text {th }}, \mathbf{2 0 1 9}$, and late or incomplete proposals will not be accepted or evaluated.

The LFUCG intends to conduct proposal evaluation in April and May 2019 immediately following the proposal due date, with the intention to make funding announcements in late May, 2019. This timeline is subject to change without notice.

Successful applicants may be contacted on or about June 1, 2019, to negotiate a funding agreement with expectations that an award be in place for the funded programs to begin operations by July 1 , 2019. No funds may be expended prior to the execution of a funding agreement and grantees will not be reimbursed for pre-award costs.

### 3.1 Evaluation

Proposals will be evaluated by a neutral panel including LFUCG staff and third-party reviewers who have expertise in the field of human services. The scoring criteria are outlined in Section 5.0 Criteria.

### 3.2 Reporting

The funded project will be required to submit quarterly progress reports demonstrating progress toward outcomes established in the proposal and associated funding agreement. Report formats will be determined by the Department of Social Services, as will due dates and submission process. Failure to submit complete reports on time will delay processing of grant payments and may affect the grantee's competitiveness for any future funding opportunities with LFUCG.

### 4.0 PROPOSAL FORMAT

Proposal Submittal Forms must be uploaded to https://lexingtonky.ionwave.net before the 2:00 p.m. EST April 19 ${ }^{\text {th }}$, 2019 deadline. Late submissions will not be considered for funding.

### 5.0 SCORING CRITERIA/EVALUATION

Please see attached Proposal Submittal form to respond to the following; the Proposal Submittal form is the document that shall be completed with your responses and then uploaded as your RFP submittal. You will need to save the PDF formatted Proposal Submittal form to your hard drive before beginning to enter responses in it to ensure your responses are saved to the form.
Funding Priority Area: Overnight Emergency Shelter
LFUCG seeks to fund programs and services to provide low-barrier, rapid resolution, housing-oriented overnight emergency shelter for individuals and families experiencing homelessness.
ESR Grant Program RFP Criteria
5.1 Program Design \& Performance
5.1.1 General Shelter Information ..... 15
'5.1.2 Rapid Resolution, Housing Orientated ..... 25
5.1.3 Low Barrier ..... 15
5.1.4 Actual Results ..... 10
5.1.5 Capacity, Cost Effectiveness, \& Budget ..... 10
Subtotal 75
5.2 Capacity \& Sustainability
5.2.1 Staff Qualifications \& Experience ..... 5
5.2.2 Partnership \& Resource Leverage ..... 5
5.2.3 Outreach \& Inclusion Strategy ..... 15
Subtotal 25

### 5.1 Program Design, Performance, Budget

### 5.1.1 General Shelter Information

The following information is required in order to evaluate capacity and scope of programming and ensure a balance of shelter options for various sub-populations of people experiencing homelessness. While the overall narrative score is a major factor in funding recommendations, LFUCG will also consider factors such as ensuring availability of critical services and an adequate number of emergency shelter beds for vulnerable populations.

- Provide a description of the shelter including;
- shelter operating hours,
- population served included special populations served,
- shelter rules and procedures (submit documentation)
- how basic needs are met such as meals and personal care,
- operating hours outside of nighttime shelter, i.e. are staff operating during the day
- general staffing description for the emergency shelter
- Does your emergency shelter consistently implement practices to meet people where they are, and provide person-centered care that focuses on personal strengths? (submit documentation as an attachment)
- What policies or value statements convey clear expectations that guests will be treated with dignity and respect, and how does the shelter monitor adherence to these expectations? (submit documentation as an attachment)
- Are expectations of guests clearly communicated and easily accessible for review by guests? (submit documentation of communication process
- What specific practices help ensure that the shelter exhibits cultural competency and provides appropriate protections for shelter seekers across demographic differences?
- Does the shelter involve guests in governance and operations? (submit documentation as an attachment)

Up to 25 points will be awarded to applicants demonstrating a shelter project that is rapid resolution and housing oriented. This means a plan is presented for how the organization works with guests to develop and implement a housing plan including diversion techniques and how quickly people move to permanent housing. Narrative for this section should address all of the following prompts:

- Does your emergency shelter's process for accessing shelter assess options for diverting from shelter?
- Does your emergency shelter's diversion approach include, when needed, financial assistance, mediation, housing location, legal assistance, or other supports?
- What role do mainstream programs play in supporting shelter seekers and diversion efforts?
- How does your emergency shelter provide immediate assistance and link guests with housing options within the first 14 days of a shelter stay?
- How does your emergency shelter use data routinely to detect trends, identify frequent users, and monitor housing success and other performance measures?
- How your emergency shelter coordinate with the broader homelessness service and housing systems in system-level planning?
- Does your emergency shelter assess and address the safety risks for people fleeing domestic violence?
- Describe how shelter guests are assigned case management and detail how case management is provided in your emergency shelter. How often do case managers discuss housing options with guests? How and when do the conversations about obtaining housing begin? Do case managers utilize best practices when working with clients such as trauma informed care?
- How will shelter staff members or volunteers help shelter guests access documents needed for housing (birth certificates, Social Security cards, etc.) when needed?


### 5.1.3 Loww-Darrier

## 15 points

Up to 15 points will be awarded to applicants based on an evaluation of the shelter's commitment to a housing first, low-barrier model. Low-barrier shelter is a critical piece in the homeless assistance approach that prioritizes providing people experiencing homelessness with shelter as quickly as possible - and then providing voluntary supportive services as needed. A low-barrier shelter is one which has only the least restrictive entry criteria necessary to ensure health and safety in the facility.
Narrative for this section should address all of the following prompts:

- Does the shelter set only minimal and reasonable requirements for guests, and does the shelter enforce these requirements in a fair and transparent way? (submit documentation as an attachment)
- Does your emergency shelter have minimal expectations or requirements of people seeking shelter? (submit documentation as an attachment)
- Does your shelter welcome self-defined family and kinship groups to seek shelter together?
- Can your emergency shelter identify financial resources that can support the adoption of low-barrier policies and practices and support extended or flexible hours and adapted service-delivery models?
- Does your shelter accommodate pets and belongings?
- Does the shelter make accommodations to store belongings and if so, how?
- Do your shelter intake process and housing navigation services coordinate closely with community-based outreach services and coordinated entry?
- Does your shelter create flexible and predictable access for people seeking shelter?
- Are guests required or requested to contribute funds or labor to remain in the shelter? (submit documentation of any program fees or volunteer time required as an attachment)
- Are guests required to participate in classes or programs as a condition of remaining in the shelter? If yes, describe the process followed to determine whether someone is admitted or removed from the shelter and appeals available to those denied access. Applicants should include with their proposal a copy of written operation procedures for denial of services. This includes drug testing.
- How many participants were turned away or banned in the past 12 months for reasons described above?

Applicants will be evaluated based on actual results from the previous year. LFUCG will utilize access to KYHMIS for organizations with prior year participation. ONLY non-participating first-time applicants should provide a narrative describing outcome targets and actual results for relevant existing shelter. If the organization has not operated an overnight emergency shelter in the past year, the organization may submit performance reports for any transitional housing, rapid rehousing, or permanent supportive housing program. .
The OHPI reserves the right to negotiate final targets. Results will be evaluated based on reports from the KYHMIS database, not agency records, so KYHMIS data quality and timeliness is critical.

- Submit reports from January 1, 2018 to December 31, 2018 as attachments
- COC APR
- CoC CAPER


### 5.1.5 Capacity, Cost Effectiveness, \& Budget

10 points
Every community, including Lexington, faces the challenge of ensuring that shelter capacity is scaled to meet local need and that it is financed accordingly. This does assume that we should expand emergency shelter for those in the community that are currently experiencing unsheltered homelessness.

In making decisions regarding necessary capacity, LFUCG will consider how a broad range of changes and improvements within their crisis response systems will impact need and demand for emergency shelter, including: increased emphasis on diversion strategies and services; reductions in the length of time it takes for guests to move from shelter to permanent housing, including through expanded rapid resolution interventions; removal of barriers to entry; and increased emphasis on long-term or frequent users of emergency shelter.

| Complete -this table-by-indicating the total in the column to the right, then <br> respond to the narrative prompts below: |
| :--- |
| ${ }^{* * *}$ Number of individual beds available: | Total

- $\quad{ }^{* * *}$ Total beds above not reflect any overflow capacity such as mats on the floor, sleeping in lobbies, dining room chairs or overflow into other buildings owned by partners such as churches or other non-profits. Also exclude beds reserved for/supported by Department of Corrections, Veterans Administration, Department of Community Based Services, or other funding sources.
- Please describe all funding sources other than LFUCG that are included in your total emergency shelter budget.


## Program Budget Summary Form

Proposal Submittal shall be considered incomplete and shall be rejected without completed Budget Summary Form. (Including total amount of ESR grant request.)

### 5.2 Capacity \& Sustainability

### 5.2.1 Staff Qualifications \& Experience

5 Points
Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by title and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

### 5.2.2 Partnership \& Resource Leverage <br> 5 Points

How do your programs and services support our community's comprehensive response to the identified priority area of Overnight Emergency Shelter? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

### 5.2.3 Outreach \& Inclusion Strategy

15 Points
Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

## Required attachments with Proposal Submittal Form (8 total):

### 5.1.1 General Shelter Information

- Does your emergency shelter consistently implement practices to meet people where they are, and provide person-centered care that focuses on personal strengths? (submit documentation as an attachment)
- What policies or value statements convey clear expectations that guests will be treated with dignity and respect, and how does the shelter monitor adherence to these expectations? (submit documentation as an attachment)
- Does the shelter involve guests in governance and operations? (submit documentation as an attachment)
- Submit reports from January 1, 2018 to December 31, 2018 as attachments:
- CoCAPR
- CoC CAPER


### 5.1.3 Low Barrier

- Does the shelter set only minimal and reasonable requirements for guests, and does the shelter enforce these requirements in a fair and transparent way? (submit documentation as an attachment)
- Does your emergency shelter have minimal expectations or requirements of people seeking shelter? (submit documentation as an attachment)
- Are guests required or requested to contribute funds or labor to remain in the shelter? (submit documentation of any program fees or volunteer time required as an attachment)


# Lexington-Fayette <br> Urban County Government 

## Request for Proposal

The Lexington-Fayette Urban County Government hereby requests proposals for RFP \#13-2019 Food Insecurity \& Nutritional Access - Extended Social Resources (ESR) Grant Program to be provided in accordance with terms, conditions and specifications established herein.

Proposals will be received online only at https://lexingtonky, ionwave net until 2:00 PM, prevailing local time, on April 19, 2019.

Proposals received after the date and time set for opening proposais will not be considered for award of a contract/grant. It is the sole responsibility of the Proposer to assure that his/her proposal is submitted online before the date and time set for opening proposals.

Additional copies of this Request For Proposals are available from the Division of Central Purchasing, Room 338 Government Center, 200 East Main Street, Lexington, KY 40507, (859)-258-3320, at no charge.

Proposals, once submitted, may not be withdrawn for a period of sixty (60) calendar days.

The Lexington-Fayette Urban County Government reserves the right to reject any or all proposals, and to waive technicalities and informalities when such waiver is determined by the Lexington-Fayette Urban County Government to be in its best interest.

Electronic signature online at https://lexingtonky.ionwave.net constitutes acceptance by the Proposer of terms, conditions and requirements set forth herein.

Pre-Proposal Meeting will be held on Monday, April $8^{\text {th }}, 2019$ at 8:30AM at the Phoenix Building 3rd Floor Conference Room, 100 East Vine Street, Lexington, KY 40507.

Minor exceptions may not eliminate the proposal. Any exceptions to the specifications established herein shall be listed in detail on a separate sheet and attached hereto. The Lexington-Fayette Urban County Government shall determine whether any exception is minor.

Please do not contact any LFUCG staff member or any other person involved in the selection process other than the designated contact person(s) regarding the project contemplated under this RFP while this RFP is open and a selection has not been finalized. Any attempt to do so may result in disqualification of the firm's submittal for consideration.

## Laws and Regulations

All applicable state laws, municipal ordinances and regulations of all authorities having jurisdiction over the project shall apply to the contract, and shall be deemed to be incorporated herein by reference.

## Equal Employment Opportunity

The Entity (regardless of whether construction contractor, non-construction contractor or supplier) agrees to provide equal opportunity in employment for all qualified persons, to prohibit discrimination in employment because of race, color, creed, nationai origin, sex or age, and to promote equai empioyment through a positive, continuing program from itself and each of its subcontracting agents. This program of equal employment opportunity shall apply to every aspect of its employment policies and practices.

## Kentucky Equal Employment Opportunity Act

The Kentucky Equal Employment Opportunity Act of 1978 (KRS 45.560-45.640) requires that any "county, city, town, school district, water district, hospital district, or other political subdivision of the state shall include in directly or indirectly publicly funded contracts for supplies, materials, services, or equipment hereinafter entered into the following provisions:
"During the performance of this contract, the contractor agrees as follows:
(1) The contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, or national origin;
(2) The contractor will state in all solicitations or advertisements for employees placed by or on behalf of the contractors that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age, or national origin;
(3) The contractor will post notices in conspicuous places, available to employees and applicants for employment, setting forth the provision of the nondiscrimination clauses required by this section; and
(4) The contractor will send a notice to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding advising the labor union or workers' representative of the contractor's commitments under the nondiscrimination clauses."

The Act further provides:
"KRS 45.610. Hiring minorities -- Information required
(1) For the length of the contract, each contractor shall hire minorities from other sources within the drawing area, should the union with which he has collective bargaining agreements be unwilling to supply sufficient minorities to satisfy the agreed upon goals and timetables.
(2) Each contractor shall, for the length of the contract, furnish such information as required by KRS 45.560 to KRS 45.640 and by such rules, regulations and orders issued pursuant thereto and will permit access to all books and records pertaining to his employment practices and work sites by the contracting agency and the department for purposes of investigation to ascertain compliance with KRS 45.560 to 45.640 and such rules, regulations and orders issued pursuant thereto.

KRS 45.620. Action against contractor -- Hiring of minority contractor or subcontractor
(1) If any contractor is found by the department to have engaged in an unlawful practice under this chapter during the course of performing under a contract or subcontract covered under KRS 45.560 to 45.640 , the department shall so certify to the contracting agency and such certification shall be binding upon the contracting agency unless it is reversed in the course of judicial review.
(2) If the contractor is found to have committed an unlawful practice under KRS 45.560 to 45.640, the contracting agency may cancel or terminate the contract, conditioned upon a program for future compliance approved by the contracting agency and the department. The contracting agency may declare such a contractor ineligible to bid on further contracts with that agency until such time as the
contractor complies in full with the requirements of KRS 45.560 to 45.640.
(3) The equal employment provisions of KRS 45.560 to 45.640 may be met in part by a contractor by subcontracting to a minority contractor or subcontractor. For the provisions of KRS 45.560 to 45.640, a minority contractor or subcontractor shall mean a business that is owned and controlled by one or more persons disadvantaged by racial or ethnic circumstances.

KRS 45.630 Termination of existing employee not required, when
Any provision of KRS 45.560 to 45.640 notwithstanding, no contractor shall be required to terminate an existing employee upon proof that employee was employed prior to the date of the contract.

KRS 45.640 Minimum skills
Nothing in KRS 45.560 to 45.640 shall require a contractor to hire anyone who fails to demonstrate the minimum skills required to perform a particular job."

It is recommended that all of the provisions above quoted be included as special conditions in each contract. In the case of a contract exceeding $\$ 250,000$, the contractor is required to furnish evidence that his workforce in Kentucky is representative of the available workforce in the area from which he draws employees, or to supply an Affirmative Action plan which will achieve such representation during the life of the contract.

## LFUCG Non-Appropriation Clause

Contractor acknowledges that the LFUCG is a governmental entity, and the contract validity is based upon the availability of public funding under the authority of its statutory mandate.

In the event that public funds are unavailable and not appropriated for the performance of the LFUCG's obligations under this contract, then this contract shall automatically expire without penalty to the LFUCG thirty (30) days after written notice to Contractor of the unavailability and non-appropriation of public funds. It is expressly agreed that the LFUCG shall not activate this nonappropriation provision for its convenience or to circumvent the requirements of this contract, but only as an emergency fiscal measure during a substantial fiscal crisis, which affects generally its governmental operations.

In the event of a change in the LFUCG's statutory authority, mandate and mandated functions, by state and federal legislative or regulatory action, which adversely affects the LFUCG's authority to continue its obligations under this contract, then this contract shall automatically terminate without penalty to the LFUCG upon written notice to Contractor of such limitation or change in the LFUCG's legal authority.

## AFFIDAVIT

Comes the Affiant, dearlene thomaws Dar , and after being first duly sworn, states under penalty of perjury as follows:

1. His/her name is
dARLENE THOMAS and he/she is the individual submitting the proposal or is the authorized representative of GREENHOUSE17 INC the entity submitting the proposal (hereinafter referred to as "Proposer").
2. Proposer will pay all taxes and fees, which are owed to the Lexington-Fayette Urban County Government at the time the proposal is submitted, prior to award of the contract and will maintain a "current" status in regard to those taxes and fees during the life of the contract.
3. Proposer will obtain a Lexington-Fayette Urban County Government business license, if applicable, prior to award of the contract.
4. Proposer has authorized the Division of Central Purchasing to verify the abovementioned information with the Division of Revenue and to disclose to the Urban County Council that taxes and/or fees are delinquent or that a business license has not been obtained.
5. Proposer has not knowingly violated any provision of the campaign finance laws of the Commonwealth of Kentucky within the past five (5) years and the award of a contract to the Proposer will not violate any provision of the campaign finance laws of the Commonwealth.
6. Proposer has not knowingly violated any provision of Chapter 25 of the Lexington-Fayette Urban County Government Code of Ordinances, known as "Ethics Act."

## Continued on next page

7. Proposer acknowledges that "knowingly" for purposes of this Affidavit means, with respect to conduct or to circumstances described by a statute or ordinance defining an offense, that a person is aware or should have been aware that his conduct is of that nature or that the circumstance exists.

Further, Affiant sayeth naught.

## state of Kentucky

## county of Faye He

The foregoing instrument was subscribed, sworn to and acknowledged before me by Darlene Thomas on this the 18th day of Abri!

My Commission expires: $8 / 17 / 2019$

LETITIA A. MARSHALL NOTARY PUBLIC
Kentucky, State At Large ID \# 540079
My Commission Explores 8/17/2019

## EQUAL OPPORTUNITY AGREEMENT

## The Law

- Title VII of the Civil Rights Act of 1964 (amended 1972) states that it is unlawful for an employer to discriminate in employment because of race, color, religion, sex, age (40-70 years) or national origin.
- Executive Order No. 11246 on Nondiscrimination under Federal contract prohibits employment discrimination by contractor and sub-contractor doing business with the Federal Government or recipients of Federal funds. This order was later amended by Executive Order No. 11375 to prohibit discrimination on the basis of sex.
- Section 503 of the Rehabilitation Act of 1973 states:

The Contractor will not discriminate against any employee or applicant for employment because of physical or mental disability.

- Section 2012 of the Vietnam Era Veterans Readjustment Act of 1973 requires Affirmative Action on behalf of disabled veterans and veterans of the Vietnam Era by contractors having Federal contracts.
- Section 206(A) of Executive Order 12086, Consolidation of Contract Compliance Functions for Equal Employment Opportunity, states:

The Secretary of Labor may investigate the employment practices of any Government contractor or sub-contractor to determine whether or not the contractual provisions specified in Section 202 of this order have been violated.

The Lexington-Fayette Urban County Government practices Equal Opportunity in recruiting, hiring and promoting. It is the Government's intent to affirmatively provide employment opportunities for those individuals who have previously not been allowed to enter into the mainstream of society. Because of Its importance to the local Government, this policy carries the full endorsement of the Mayor, Commissioners, Directors and all supervisory personnel. In following this commitment to Equal Employment Opportunity and because the Government is the benefactor of the Federal funds, it is both against the Urban County Government policy and illegal for the Government to let contracts to companies which knowingly or unknowingly practice discrimination in their employment practices. Violation of the above mentioned ordinances may cause a contract to be canceled and the contractors may be declared ineligible for future consideration.

Please sign this statement in the appropriate space acknowledging that you have read and understand the provisions contained herein. Return this document as part of your application packet.

## Bidders

IWe agree to comply with the Civil Rights Laws listed above that govern employment rights of minofities, women, Vietnam veterans, handicapped and aged persons.


## WORKFORCE ANALYSIS FORM

Name of Organization:
GREENHOUSE17

| Categories | Total | White <br> (Not <br> Hispani cor Latino) |  | Hispani cor Latino |  | Black or AfricanAmerican (Not Hispanic or Latino |  | Native <br> Hawaiian and Other Pacific Islander (Not Hispanic or Latino |  | Asian <br> (Not Hispani cor Latino |  | American Indian or Alaskan Native (not Hispanic or Latino |  | Two or more races <br> (Not Hispanic or Latino |  | Total |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | M | $F$ | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| Administrators |  |  | 4 |  |  |  |  |  |  |  |  |  |  |  |  |  | 4 |
| Professionals |  | 4 | 30 |  |  |  | 4 |  |  |  |  |  |  |  |  | 4 | 34 |
| Superintendents |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Supervisors |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Foremen |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Technicians |  |  |  |  |  |  |  | . |  |  |  |  |  |  |  |  |  |
| Protective Service |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Para-Professionals |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Office/Clerical |  |  | 2 |  |  |  |  |  |  |  |  |  |  |  |  |  | 2 |
| Skilled Craft |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Service/Maintenanc e |  | 1 |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |  |
| Total: |  | 5 | 36 |  |  |  | 4 |  |  |  |  |  |  |  |  | 5 | 40 |

Prepared by:
CORISSA PHILLIPS, EXTERNAL RELATIONS DIRECTOR
(Name and Title)

Date: $\qquad$ 19

## GENERAL PROVISIONS

1. Each Respondent shall comply with all Federal, State \& Local regulations concerning this type of service or good.

The Respondent agrees to comply with all statutes, rules, and regulations governing safe and healthful working conditions, including the Occupational Health and Safety Act of 1970, 29 U.S.C. 650 et. seq., as amended, and KRS Chapter 338. The Respondent also agrees to notify the LFUCG in writing immediately upon detection of any unsafe and/or unhealthful working conditions at the job site. The Respondent agrees to indemnify, defend and hold the L'FUCG harmless from all penalties, fines or other expenses arising out of the alleged violation of said laws.
2. Failure to submit ALL forms and information required in this RFP may be grounds for disqualification.
3. Addenda: All addenda, if any, shall be considered in making the proposal, and such addenda shall be made a part of this RFP. Before submitting a proposal, it is incumbent upon each proposer to be informed as to whether any addenda have been issued, and the failure to cover in the bid any such addenda may result in disqualification of that proposal.
4. Proposal Reservations: LFUCG reserves the right to reject any or all proposals, to award in whole or part, and to waive minor immaterial defects in proposals. LFUCG may consider any alternative proposal that meets its basic needs.
5. Liability: LFUCG is not responsible for any cost incurred by a Respondent in the preparation of proposals.
6. Changes/Alterations: Respondent may change or withdraw a proposal at any time prior to the opening; however, no oral modifications will be allowed. Only letters, or other formal written requests for modifications or corrections of a previously submitted proposal which is addressed in the same manner as the proposal, and received by LFUCG prior to the scheduled closing time for receipt of proposals, will be accepted. The proposal, when opened, will then be corrected in accordance with such written request(s), provided that the written request is contained in a sealed envelope which is plainly marked "modifications of proposal".
7. Clarification of Submittal: LFUCG reserves the right to obtain clarification of any point in a bid or to obtain additional information from a Respondent.
8. Bribery Clause: By his/her signature on the bid, Respondent certifies that no employee of his/hers, any affiliate or Subcontractor, has bribed or attempted
to bribe an officer or employee of the LFUCG.
9. Additional Information: While not necessary, the Respondent may include any product brochures, software documentation, sample reports, or other documentation that may assist LFUCG in better understanding and evaluating the Respondent's response. Additional documentation shall not serve as a substitute for other documentation which is required by this RFP to be submitted with the proposal,
10. Ambiguity, Conflict or other Errors in RFP: If a Respondent discovers any ambiguity, conflict, discrepancy, omission or other error in the RFP, it shall immediately notify LFUCG of such error in writing and request modification or clarification of the document if allowable by the LFUCG.
11. Agreement to RFP Terms: In submitting this proposal, the Respondent agrees that it has carefully examined the specifications and all provisions relating to the work to be done attached hereto and made part of this proposal. By acceptance of a Contract/Grant under this RFP, proposer states that it understands the meaning, intent and requirements of the RFP and agrees to the same. The successful Respondent shall warrant that it is familiar with and understands all provisions herein and shall warrant that it can comply with them. No additional compensation to Respondent shall be authorized for services or expenses reasonably covered under these provisions that the proposer omits from its Proposal.
12. Cancellation: If the services to be performed hereunder by the Respondent are not performed in an acceptable manner to the LFUCG, the LFUCG may cancel this contract for cause by providing written notice to the proposer, giving at least thirty (30) days notice of the proposed cancellation and the reasons for same. During that time period, the proposer may seek to bring the performance of services hereunder to a level that is acceptable to the LFUCG, and the LFUCG may rescind the cancellation if such action is in its best interest.
A. Termination for Cause
(1) LFUCG may terminate a contract because of the contractor's failure to perform its contractual duties
(2) If a contractor is determined to be in default, LFUCG shall notify the contractor of the determination in writing, and may include a specified date by which the contractor shall cure the identified deficiencies. LFUCG may proceed with termination if the contractor fails to cure the deficiencies within the specified time.
(3) A default in performance by a contractor for which a contract may be terminated shall include, but shall not necessarily be limited to:
(a) Failure to perform the contract according to its terms, conditions and specifications;
(b) Failure to make delivery within the time specified or according to a delivery schedule fixed by the contract;
(c) Late payment or nonpayment of bills for labor, materials, supplies, or equipment furnished in connection with a contract for construction services as evidenced by mechanics' liens filed pursuant to the provisions of KRS Chapter 376, or letters of indebtedness received from creditors by the purchasing agency;
(d) Failure to diligently advance the work under a contract for construction services;
(e) The filing of a bankruptcy petition by or against the contractor; or
(f) Actions that endanger the health, safely or welfare of the LFUCG or its citizens.

## B. At Will Termination

Notwithstanding the above provisions, the LFUCG may terminate this contract at will in accordance with the law upon providing thirty (30) days written notice of that intent, Payment for services or goods received prior to termination shall be made by the LFUCG provided these goods or services were provided in a manner acceptable to the LFUCG. Payment for those goods and services shall not be unreasonably withheld.
13. Assignment of Contract: The contractor shall not assign or subcontract any portion of the Contract without the express written consent of LFUCG. Any purported assignment or subcontract in violation hereof shall be void. It is expressly acknowledged that LFUCG shall never be required or obligated to consent to any request for assignment or subcontract; and further that such refusal to consent can be for any or no reason, fully within the sole discretion of LFUCG.
14. No Waiver: No failure or delay by LFUCG in exercising any right, remedy, power or privilege hereunder, nor any single or partial exercise thereof, nor the exercise of any other right, remedy, power or privilege shall operate as a waiver hereof or thereof. No failure or delay by LFUCG in exercising any right, remedy, power or privilege under or in respect of this Contract shall affect the rights, remedies, powers or privileges of LFUCG hereunder or shall operate as a waiver thereof.
15. Authority to do Business: The Respondent must be a duly organized and
authorized to do business under the laws of Kentucky. Respondent must be in good standing and have full legal capacity to provide the services specified under this Contract. The Respondent must have all necessary right and lawful authority to enter into this Contract for the full term hereof and that proper corporate or other action has been duly taken authorizing the Respondent to enter into this Contract. The Respondent will provide LFUCG with a copy of a corporate resolution authorizing this action and a letter from an attorney confirming that the proposer is authorized to do business in the State of Kentucky if requested. All proposals must be signed by a duly authorized officer, agent or employee of the Respondent.
16. Governing Law: This Contract shall be governed by and construed in accordance with the laws of the Commonwealth of Kentucky. In the event of any proceedings regarding this Contract, the Parties agree that the venue shall be the Fayette County Circuit Court or the U.S. District Court for the Eastern District of Kentucky, Lexington Division. All parties expressly consent to personal jurisdiction and venue in such Court for the limited and sole purpose of proceedings relating to this Contract or any rights or obligations arising thereunder. Service of process may be accomplished by following the procedures prescribed by law.
17. Ability to Meet Obligations: Respondent affirmatively states that there are no actions, suits or proceedings of any kind pending against Respondent or, to the knowledge of the Respondent, threatened against the Respondent before or by any court, governmental body or agency or other tribunal or authority which would, if adversely determined, have a materially adverse effect on the authority or ability of Respondent to perform its obligations under this Contract, or which question the legality, validity or enforceability hereof or thereof.
18. Contractor understands and agrees that its employees, agents, or subcontractors are not employees of LFUCG for any purpose whatsoever. Contractor is an independent contractor at all times during the performance of the services specified.
19. If any term or provision of this Contract shall be found to be illegal or unenforceable, the remainder of the contract shall remain in full force and such term or provision shall be deemed stricken.


## PROPOSAL SUBMITTAL FORM

## Agency Information

Agency Name: $\qquad$
Mailing Address: PO Box 55190; Lexington, KY 40555-5190
Street Address: 4400 Briar Hill Road; Lexington, KY 40516
Phone: ( 800 ) 544

- 2022

Is your Agency registered with the IRS as a 501(c)3 organization?
Note: Agencies must be registered with the IRS as a 501(c)3 organization to be eligible for ESR Program funding.


Does your agency have a current profile with Blue Grass Community Foundation's GoodGiving.net?
Note: Agencies must have profiles with GoodGliving.net to be eligible for ESR funding. $\qquad$
Website Address: GreenHouse 17.org
Agency Representative (ívpicaily the Executive Director - Name, Title, Phone, Email):
Darlene Thomas, Executive Director 859-519-1904, dthomas@greenhouse17.org
Person Completing Application (Name, Title, Phone, Emall):
Corissa Phillips, External Relations Director, 502-435-8021, cphillips@greenhouse17.org

## Program Information

Name of program for which funds are being requested: Trauma-informed Farm Program
Total Funding Amount Requested: $\$ \mathbf{5 0 , 0 0 0}$

## RFP \#13-2019 PROPOSAL SUBMITTAL FORM

- Save this PDF formatted Proposal Submittal Form to your hard drive before beginning to enter responses in it to ensure your responses are saved to the form.
- LIMIT RESPONSES IN TEXT BOXES TO 250 WORDS
- REMINDER: All proposals must be written in a clear and concise manner, as there will be no followup or clarifications to proposer's submittal form once the evaluation process begins.


### 5.1 Program Proposal \& Design

### 5.1.1 Needs Statement—Purpose of the Program Proposal / Problem Statement

15 Points
Using local data, provide a description of the problem in Fayette Countr. Identify the specific population your program is targeting (i.e. age, geographical region, economic status, etc.) and explain why. Discuss whether this population is under-served or at-risk. Describe your understanding of the local system of services addressing this problem, obstacles and/or opportunities your clients face, and how your agency fits within this system of services.

The GreenHouse17 Trauma-informed Farm Program reduces food insecurity and improves nutritional access for adult victims of domestic violence and their dependent children in Lexington-Fayette County.

One in three women and as many as one in six men will be the victim of domestic violence. When these rates are applied to Lexington-Fayette census data, nearly 80,000 current residents will be victimized in their lifetimes. Kentucky Court Records report 1,673 domestic violence cases were filed in Fayette County Family Court last year. Domestic violence victims must navigate complex socio-economic obstacles to flee abuse. Fear of increased violence and homelessness are among the most prevalent barriers. Victims face loss of employment, reliable transportation, support networks, and other resources when able to safely escape violence. CDC research finds prolonged exposure to domestic violence increases likelihood of obesity, heart disease, gastrointestinal disorders, and depression.

Chronic and transitory food insecurity is common among domestic violence survivors and complicate physical, emotional, and economic healing after abuse. Our trauma-informed farm program responds to these challenges by offering survivors the opportunity to grow vegetables, greens, and berries for healthy field-to-table meals; heal body, mind, and spirit through nature-based activities; and participate in agricultural job training. Collectively, these efforts address the complex intersections of poverty, health, and food insecurity related to domestic violence.

Set amongst the 40-acre rural Fayette County property that surrounds the agency's emergency shelter, our farm is the only program in the region and one of only a handful in the nation providing nature-based services specifically responding to

### 5.1.2 Service Delivery Model

15 Points
What steps will you take or what activities will you provide to assist clients in achieving these goals? Describe each "unit of service" you will provide for clients and how often and how long this service will be provided (e.g. a one-time threehour training; a weekly one-hour support group for 12 weeks; one 30 -minute health exam twice a year; 1-3 hour advocacy services as needed; etc.) How will these services address the problem as identified in the Needs Statement above? Be specific.
1.) Daily Healthy Lunches and Dinners -- Engaging adults and children living in shelter through planning, preparing, and consuming healthy meals made with produce grown on the farm improves access to nutritious food, while addressing chronic and transient food insecurity.
2.) Daily Seasonal Nature-based Support Groups: Facilitated support groups connects adults and children to age-specific connections to the benefits of physical exercise, outdoor socializing, quiet reflection, and nature-based crafts while healing from physical and emotional abuse.
3.) Weekly Counseling Sessions: Conducted by program staff at least once weekly with program participants, a 30 -minute counseling discussions, typically facilitated in the fields from March - October or other farm space during cold months, address and assess emotional well-being and healing progress of participants.
4.) Weekly Healthy Kitchen Workshops: 1-hour facilitated workshops impart education about nutrition, benefits of healthy food consumption while healing from abuse, and opportunities for skills development related to the identification, preparation, and appreciation for budget-friendly produce-centered meals.
5.) 6 -week Farm-based Job Training: Completed through approximately 10 hours per week. Training improves job readiness (reporting on time, working with others, problem-solving,), encourages development of skills specific to the agricultural sector (seeding, tilling, harvesting); and provides cash stipend for emergency financial needs or deposit in matched savings account providing up to $\$ 4$ for every $\$ 1$ saved.
6.) Regular Healing Environment: The farm creates and provides therapeutic benefits by creating safety, privacy, and confidentiality on a private 40-acre rural property for duration of average 52 night stay in emergency shelter.

### 5.1.3 Client Eligibility and Requirements

## 5 Points

What eligibility requirements must clients meet to qualify for services? What are the expectations of clients while receiving services? (e.g. client must pay $\$ 30$ fee for each class; client must remain sober; client is responsible for chores; nothing other than participation in services; etc.)

GreenHouse17 commits to low-barrier service access and voluntary service philosophy. Victims are never required to participate in farm program as condition of receiving other domestic violence services. No fees are assessed for program participation. Farm tools, clothing, and other supplies are provided by agency.

Program eligibility is determined by self-disclosure of domestic violence victimization and expressed interest in benefits of farming, nutrition, and/or nature-based healing. Program participants agree to do no harm, to themselves or others, respect the farmland, and maintain confidentiality of other victims participating in the program. If choosing to engage in job training on the farm, participants agree to standard workplace expectations for timeliness, responsibility, and teamwork. Weapons, alcohol, \& illegal drugs are prohibited on program property.

Policy requires staff to make every effort to counsel residents not abiding by these expectations prior to involuntary exit from the program. Should behavior inconsistent with expectations continue, policies require agency to provide ample notification of program exit and, if requested, assist with grievance process. Exit from the farm program does not exclude participant from receiving shelter, advocacy, or other traditional domestic violence assistance provided by the agency.

### 5.1.4 Evidence-Based/Best Practice

## 10 Points

Describe the evidence-based or promising practice model on which this service approach is based. Provide particular sources that indicate what you are doing is best-practice.
1.) Trauma-Informed Care, a best practice supported by Substance Abuse and Mental Health Service Administration, adopted by National Network to End Domestic Violence, and integrated with Kentucky Coalition Against Domestic Violence Member Program Service Standards. Examples include honoring need for victims to be respected, informed, connected, and hopeful; respecting connection of trauma to depression and anxiety; and committing to solutions that have been self-determined by the victim.
2.) Therapeutic Horticulture best practices defined by Centre for Child and Family Research in the United Kingdom. Examples include therapeutic intent and practice, space for groups to socialize and eat together; opportunities to contribute to production activities; and routine and regular schedule of expectations.
3.) Evidence-based research of therapeutic horticulture benefits for women combat veterans (Department of Labor, 2011); patients in health care settings (Kirk et al, 2010); and "social farming" for inclusion in rural areas (Di lacovo and O'Connor, 2009). Input from food access and nutrition experts from the University of Kentucky Department of Agriculture and Grow Appalachia informs program design.
4.) A $\$ 4.5$ million three-year federal research investment from the Department of Justice Office on Violence Against Women awarded to the University of Kentucky Center for Research on Violence Against Women to evaluate effectiveness of our farm program's therapeutic horticulture outcomes to serve as evidence-based practice.
5.) Integration of the farm program with traditional domestic violence services has been identified as a national promising practice by the Mary Byron Project Celebrating Solutions Award and Kentucky Nonprofit Network Innovative Programming Award.

### 5.2 Program Measures \& Evaluation

### 5.2.1 Service Efficacy \& Desired Outcomes

## 10 Points

What do you hope to help your clients achieve? What are some examples of goals you will set with clients? What is your service philosophy in terms of helping your clients achieve these goals? Describe how you define "successful" completion of services. (e.g. service is complete if: client remains for entire three-hour training; client continues services until judge orders otherwise; etc.) What percentage of clients meet that criteria for success?

Our Trauma-Informed Farm Program commits to individualized and survivor-centered goals that respond to each participant's unique experiences, barriers, and healing needs. An estimated 300 participants ( 175 adults/125 children) surviving domestic violence during the one-year grant term will develop unique nature-based healing plan with the support of program staff. The following anticipated outcomes are informed by past years' program data:
$-95 \%$ of adult victims and dependent children experience decreased food insecurity through consumption of healthy and nutritious meals prepared with field-to-table produce grown on the farm.
$-75 \%$ of adult victims and dependent children experience physical and emotional healing benefits from nature-based support groups and activities on the farm.
$-50 \%$ of adult victims and dependent children improve understanding, appreciation, and skills related to nutritious meals and snacks; fresh produce processing and preparation; and healthy budget-saving recipes during participation in age-appropriate kitchen workshops.
$-30 \%$ of adult victims improve workplace readiness and agricultural skills through participation in farm-based job training program.
$-25 \%$ of adult victims completing farm-based job training program are connected to employment opportunities, benefit from positive current work reference from farm manager, and secure living-wage employment before exiting shelter to transitional or permanent housing.
$-15 \%$ of adult victims completing the farm-based job training program establish Individual Development Account (IDA) providing matched savings for purichase of reliable vehicie or education tuition to overcome barrier to economic stabiitity.

### 5.2.2 Client Empowerment \& Community Impact

10 Points
Describe what meaningful difference these services make in the lives of people served. What value is added to the community? Provide examples. (e.g. client demonstrates change in attitude; client has behavior change; etc.)

Food insecurity will be reduced for an estimated 300 adult victims of domestic violence and their dependent children through access to nearly 4,000 pounds of local vegetables, greens and berries grown on the farm and more than 25,000 nutritious meals. Physical, emotional, and financial well-being of program participants will benefit from improved understanding, appreciation, and attitude related to benefits of nature-based experiences. This outcome is especially important when research relating contact with nature to stronger community ties and violence prevention.

A consideration of reflections written by farm program participants, shared with their permission, provides further evidence of empowerment and community impact:
1.) "I never knew how relaxing working outside could be. I guess when it's warm and the sun is shining makes a lot of difference working in the greenhouses." 2.) "Working outside today has taken my mind off a lot of other things that I have going on inside my head. No matter what l'm doing in the garden, I love it all. The weeding, planting, and harvesting are my favorite and most rewarding. It's been so great to see the vegetables growing especially, the tomatoes and apples and the flowers. I can take what l've learned and use it for the rest of my life." 3.) "Working out on the farm, can make you be independent and enable you to be on your own. It makes me feel powerful and create positive friends in my life."

### 5.2.3 Data Assessment \& Quality Improvement

## 10 Points

While it doesn't have to be complicated, evaluation is more than saying "we provided this many 'units of service." How will you know if your services have been effective? How does this relate to the desired outcomes for your clients? How will the information gathered be used to improve your services in the future? Be specific (for example, data collection may be through focus groups, pre-and post-tests, client satisfaction surveys, etc.), and also be specific regarding sampling size and frequency of evaluation.

Program staff and administrators prioritize continuous improvement and evidence-informed practice. Staff and administrators review the following information during weekly check-ins and monthly meetings for formative program evaluation:

- 100\% sample of participant data includes demographics, duration and severity of abuse, earned and non-cash income, language accessibility needs, etc.
- 100\% sample of service-level data tracks counts for all formal and informal counseling, support groups, skills workshops, plates of healthy meals served, etc.
- 100\% sample of job training experience includes number of training hours scheduled and completed; timely or untimely reporting to training; demonstration of new skill development; observed improvements in job placement readiness; resume/application submission assistance; positive work referrals provided to employers; number of participants securing job.

Farm management data points measured daily, weekly, and seasonally provide critical information for effective programming. Examples include soil-quality measurements, pounds of produce harvested, weight of produce used in shelter meal preparation, inventory of produce from the farm processed and preserved for later use; number of meals prepared featuring farm produce.

All program participants are asked to complete a satisfaction and feedback survey upon completion or exit from the program, with typical 75\% response. Data tracking is maintained in a Victim Service Provider database, which adheres to

### 5.3 Capacity \& Sustainability

### 5.3.1 Staff Qualifications \& Experience

## 5 Points

Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by titie and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

Program staff complete 40 hours of training by Kentucky Coalition Against Domestic Violence to become Certified Domestic Violence Training within first year of hire. Responsibilities of four program staff include farm management, group facilitation, and victim advocacy:

- Christina Lane, Farm Co-manager, began career as a domestic violence crisis counselor. She was one of the first employees of the agency and planted the first garden on the farm. Lane contributes $100 \%$ of full-time focus to program.
- Savannah McGuire, Farm Co-manager, is a recent graduate of the UK Sustainable Agriculture program. She brings research experience, land and water management, and network of agricultural partnerships. McGuire brings research experience and contributes $100 \%$ of full-time focus to program.
- Bekah Fulcher, Farm Advocate, is a long-time employee of the agency. She began her tenure with the agency more than 15 years ago and contributed substantially to the vision and development of the farm's handmade enterprise. Fulcher contributes $100 \%$ of full-time focus to program.
- Tim Perkins, Food and Nutrition Specialist, brings Chef de Cuisine experience, training, and education to meal planning, preparation, and services. He also facilitates activity-based kitchen workshops for program participants. Perkins contributes approximately $60 \%$ of his full-time focus to program.

Diane Fleet, Associate Director; Diane Willoughby, Finance Director; and Corissa Phillips, External Relations Director, provide program oversight. Darlene Thomas, Executive Director, is a long-time and nationally recognized advocate for

### 5.3.2 Partnership \& Resource Leverage

## 5 Points

How do your programs and services support our community's comprehensive response to the identified priority area of Community Wellness \& Safety? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

Social services for domestic violence victims are identified as high priority in Consolidated Plan to end homelessness, while violence intervention and prevention is a Community Wellness \& Safety priority.

Working relationships with Grow Appalachia, an effort funded by John Paul Dejoria, an international entrepreneur, and the University of Kentucky Department of Agriculture provide technical expertise. Internship partnerships with area universities provide assistance with day-to-day farm operations. Local gardening clubs regularly provide donations of seedsand gently used tools. Donations of produce from Glean Kentucky and Reed Valley Orchard augment our annual harvest.
Partnerships with Seedleaf and local landscaping companies provide food and yard waste for onsite composting. The program also benefits from marketing associated with Kentucky Proud certified producer.

The farm provides tangible and meaningful opportunities for individuals, organizations, and companies to understand the mission and participate in solutions to end intimate partner abuse by volunteering on the farm and purchasing value-added products from the farm, such as fresh-cut flowers and handmade self-care products.

A diverse funding model provides additional program support, including a portion of our agency's annual member program subcontract with the Kentucky Coalition Against Domestic Violence, received per KRS and KAR statutes as the primary provider of domestic violence services in Fayette County and surrounding region; Victims of Crime Act federal pass-thru funding from the Kentucky Justice and Public Safety Cabinet; donations and special event fundraising; and revenue

### 5.3.3 Outreach \& Inclusion Strategy

## 15 Points

Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

GreenHouse17 commits to inclusivity and accessibility. We have adopted a comprehensive non-discrimination and inclusion policy that exceeds federal requirements. As a matter of policy and commitment, no person will be denied program participation, nor will they be subject to discrimination, on the basis of actual or perceived protected status.

Partnerships with Global Lex, Kentucky Refugee Ministries, and Pride Community Organization Services (PCOS) exemplify community outreach to assure diverse awareness of services. Recent expansion of the service publications, available in print and online, include translations (Spanish, French, Arabic) and topics specific to LGBTQIA+ and rural victimizations. Two Spanish bilingual advocates employed by the agency often provide farm-based interpretation, and the agency maintains interpreter and translator contracts to assure access for more than a hundred languages.

Parking, walkways, entrances, and corridors are handicapped accessible and meet ADA Accessibility Guidelines for Buildings and Facilities. Farm programming and services often are adapted to meet physical, mental, and other disabilities experienced by participants.

Every program participant earned less than $30 \%$ AMI for the region, with majority claiming zero income. Farm program services inherently respond to needs of persons living in poverty and economic distress through food access, job training with stipend, and matched savings accounts.

### 6.0 Program Budget Summary Form Instructions

Proposal Submittal shall be considered incomplete and shall be rejected without completed Budget Summary Form. (Including total amount of ESR grant request.)

For organizations requesting funding for more than one program in this RFP, combine into a single Program Budget narrative for the proposal.

Please note that the Program Budget will be part of the grantee agreement with LFUCG and regular tracking and expenditure reporting will be required.

To ensure readability and uniformity, please use the Program Budget form included. Provide brief line-item detail as specified in each section below and verify all calculations.

This section provides a summary of the total proposed Program Budget for FY 2020. It requests the allocation of all projected funding amounts (City and non-City sources) for anticipated FY 2020 program expenditures.

## Total Program Budget

Column A should reflect projected expenditures for the entire program (not just the proposed LFUCG ESR grant funding request portion). When the chart is completed this column should equal ESR Grant Funding Request plus other/non-ESR program funding. ( $A=B+C$ )

## ESR Grant Funding Request

Column B is the grant amount being requested from this RFP to support this program's services to eligible Fayette County Participants.

## Non-LFUCG Program Funding

Column $C$ is the non-LFUCG ESR funding that is allocated to the Total Program Budget ( $\mathrm{A}-\mathrm{B}=\mathrm{C}$ ).
This form is for the budget for the PROGRAM applying for ESR funds, not the total agency budget.

For each category identify the amount requested and the amount to be leveraged through other programs or organizations (if applicable).

Staff Salaries - Identify the number of Full-time position salaries allocated to the program, and part-time positions allocated to the program, and the amounts of each allocated to Columns A, B, \& C.

Consultant Services - In the "List Details" box, briefly describe any expenses associated with providing expanded supportive services or other services for which the organization intends to contract with another entity. Any of these expenses to be provided by the proposing organization should be included in other line items.

Space/Facilities - In the "List Details" box, briefly list the basis of the allocation of rental costs, utilities, janitorial costs, and any other facility costs for the Program. Identify any office or program space in an LFUCG owned building, and any other costs (rent, monthly utilities, etc.) reimbursed to LFUCG.

Scholarships/Stipends - In the "List Details" box, briefly list the type of scholarships or stipends, and include the number of people or organizations to receive funds.

Operating Expenses - In the "List Details" box, briefly list the costs associated with expenses, supplies, utilities, and any other expense associated directly with the operation of the project.

Other - In the "List Details" box, briefly list any other costs for the Program not covered above.

## PROGRAM BUDGET SUMMARY

Agency Name GreenHouse17 Inc
Program Name Trauma-informed Farm Program
FY 2020 (July 1, 2019-June 30, 2020) Total Program Budget

| 1. Staff Salaries for Program |  | Column A Total Program Budget [= B+C] | Column B ESR Grant Funding Request | Column C Non-ESR Program Funding [A-B] |
| :---: | :---: | :---: | :---: | :---: |
|  | \# of <br> Employees: |  |  |  |
| Full-Time (FTE) | 3 | 114,035 | 20,000 | 94,035 |
| Part-Time | 1 | 42,500 | 10,000 | 32,500 |
|  | Total Salaries | 156,535 | 30,000 | 126,535 |



| 5. Operating Expenses | \$ | 86,750 | 20,000 | 66,750 |
| :---: | :---: | :---: | :---: | :---: |

Ilst detalls
Consumables (seeds, fertilizer, cuttings, etc.); equipment (hand, small farm); fuel, farm truck repair/maintenance; subscriptions/memberships, value-added product packaging and labeis, publication printing, copies, postage, business fees, portion of auidt, accounting, CPA fees, basic office supplies, postage,

8. TOTAL PROGRAM BUDGET

| 267,935 | 50,000 | 217,935 |
| ---: | ---: | ---: |

Cost per Program Participant:
\$ 893
I understand that this document in its entirety is incorporated into my grant Agreement with the Lexington-Fayette Urban County Government.

Authorized Representative (typed name): Darlene Thomas
Title: Executive Director

## PROPOSAL SUBMITTAL FORM

## Agency Information

Agency Name: $\qquad$
Mailing Address: PO Box 55190; Lexington, KY 40555-5190
Street Address: 4400 Briar Hill Road; Lexington, KY 40516
Phone: (800) 544-2022

Is your Agency registered with the IRS as a 501(c)3 organization?
Note: Agencies must be registered with the IRS as a 501(c)3 organization to be eligible for ESR Program funding.
Yes $\square$ No

Does your agency have a current profile with Blue Grass Community Foundation's GoodGiving.net? $\qquad$ No Note: Agencies must have profiles with GoodGiving.net to be eligible for ESR funding.

Website Address:GreenHouse17.org
Agency Representative (typically the Executive Director - Name, Title, Phone, Email):
Darlene Thomas, Executive Director 859-519-1904, dthomas@greenhouse17.org
Person Completing Application (Name, Title, Phone, Email):
Corissa Phillips, External Relations Director, 502-435-8021, cphillips@greenhouse17.org

## Program Information

Name of program for which funds are being requested: Trauma-informed Farm Program
Total Funding Amount Requested: \$ 50,000

## RFP \#13-2019 PROPOSAL SUBMITTAL FORM

- Save this PDF formatted Proposal Submittal Form to your hard drive before beginning to enter responses in it to ensure your responses are saved to the form.
- LIMIT RESPONSES IN TEXT BOXES TO 250 WORDS
- REMINDER: All proposals must be written in a clear and concise manner, as there will be no followup or clarifications to proposer's submittal form once the evaluation process begins.


### 5.1 Program Proposal \& Design

### 5.1.1 Needs Statement—Purpose of the Program Proposal / Problem Statement

## 15 Points

Using local data, provide a description of the problem in Fayette County. Identify the specific population your program is targeting (i.e. age, geographical region, economic status, etc.) and explain why. Discuss whether this population is under-served or at-risk. Describe your understanding of the local system of services addressing this problem, obstacles and/or opportunities your clients face, and how your agency fits within this system of services.

The GreenHouse17 Trauma-informed Farm Program reduces food insecurity and improves nutritional access for adult victims of domestic violence and their dependent children in Lexington-Fayette County.

One in three women and as many as one in six men will be the victim of domestic violence. When these rates are applied to Lexington-Fayette census data, nearly 80,000 current residents will be victimized in their lifetimes. Kentucky Court Records report 1,673 domestic violence cases were filed in Fayette County Family Court last year. Domestic violence victims must navigate complex socio-economic obstacles to flee abuse. Fear of increased violence and homelessness are among the most prevalent barriers. Victims face loss of employment, reliable transportation, support networks, and other resources when able to safely escape violence. CDC research finds prolonged exposure to domestic violence increases likelihood of obesity, heart disease, gastrointestinal disorders, and depression.

Chronic and transitory food insecurity is common among domestic violence survivors and complicate physical, emotional, and economic healing after abuse. Our trauma-informed farm program responds to these challenges by offering survivors the opportunity to grow vegetables, greens, and berries for healthy field-to-table meals; heal body, mind, and spirit through nature-based activities; and participate in agricultural job training. Collectively, these efforts address the complex intersections of poverty, health, and food insecurity related to domestic violence.

Set amongst the 40-acre rural Fayette County property that surrounds the agency's emergency shelter, our farm is the only program in the region and one of only a handful in the nation providing nature-based services specifically responding to

### 5.1.2 Service Delivery Model

15 Points
What steps will you take or what activities will you provide to assist clients in achieving these goals? Describe each "unit of service" you will provide for clients and how often and how long this service will be provided (e.g. a one-time threehour training; a weekly one-hour support group for 12 weeks; one 30 -minute health exam twice a year; 1-3 hour advocacy services as needed; etc.) How will these services address the problem as identified in the Needs Statement above? Be specific.
1.) Daily Healthy Lunches and Dinners -- Engaging adults and children living in shelter through planning, preparing, and consuming healthy meals made with produce grown on the farm improves access to nutritious food, while addressing chronic and transient food insecurity.
2.) Daily Seasonal Nature-based Support Groups: Facilitated support groups connects adults and children to age-specific connections to the benefits of physical exercise, outdoor socializing, quiet reflection, and nature-based crafts while healing from physical and emotional abuse.
3.) Weekly Counseling Sessions: Conducted by program staff at least once weekly with program participants, a 30 -minute counseling discussions, typically facilitated in the fields from March - October or other farm space during cold months, address and assess emotional well-being and healing progress of participants.
4.) Weekly Healthy Kitchen Workshops: 1 -hour facilitated workshops impart education about nutrition, benefits of healthy food consumption while healing from abuse, and opportunities for skills development related to the identification, preparation, and appreciation for budget-friendly produce-centered meals.
5.) 6-week Farm-based Job Training: Completed through approximately 10 hours per week. Training improves job readiness (reporting on time, working with others, problem-solving,), encourages development of skills specific to the agricultural sector (seeding, tilling, harvesting); and provides cash stipend for emergency financial needs or deposit in matched savings account providing up to $\$ 4$ for every $\$ 1$ saved.
6.) Regular Healing Environment: The farm creates and provides therapeutic benefits by creating safety, privacy, and confidentiality on a private 40 -acre rural property for duration of average 52 night stay in emergency shelter.

### 5.1.3 Client Eligibility and Requirements

5 Points
What eligibility requirements must clients meet to qualify for services? What are the expectations of clients while receiving services? (e.g. client must pay $\$ 30$ fee for each class; client must remain sober; client is responsible for chores; nothing other than participation in services; etc.)

GreenHouse17 commits to low-barrier service access and voluntary service philosophy. Victims are never required to participate in farm program as condition of receiving other domestic violence services. No fees are assessed for program participation. Farm tools, clothing, and other supplies are provided by agency.

Program eligibility is determined by self-disclosure of domestic violence victimization and expressed interest in benefits of farming, nutrition, and/or nature-based healing. Program participants agree to do no harm, to themselves or others, respect the farmland, and maintain confidentiality of other victims participating in the program. If choosing to engage in job training on the farm, participants agree to standard workplace expectations for timeliness, responsibility, and teamwork. Weapons, alcohol, \& itegal drugs are prohibited on program property.

Policy requires staff to make every effort to counsel residents not abiding by these expectations prior to involuntary exit from the program. Should behavior inconsistent with expectations continue, policies require agency to provide ample notification of program exit and, if requested, assist with grievance process. Exit from the farm program does not exclude participant from receiving shelter, advocacy, or other traditional domestic violence assistance provided by the agency.

### 5.1.4 Evidence-Based/Best Practice

## 10 Points

Describe the evidence-based or promising practice model on which this service approach is based. Provide particular sources that indicate what you are doing is best-practice.
1.) Trauma-Informed Care, a best practice supported by Substance Abuse and Mental Health Service Administration, adopted by National Network to End Domestic Violence, and integrated with Kentucky Coalition Against Domestic Violence Member Program Service Standards. Examples include honoring need for victims to be respected, informed, connected, and hopeful; respecting connection of trauma to depression and anxiety; and committing to solutions that have been self-determined by the victim.
2.) Therapeutic Horticulture best practices defined by Centre for Child and Family Research in the United Kingdom. Examples include therapeutic intent and practice, space for groups to socialize and eat together; opportunities to contribute to production activities; and routine and regular schedule of expectations.
3.) Evidence-based research of therapeutic horticulture benefits for women combat veterans (Department of Labor, 2011); patients in health care settings (Kirk et al, 2010); and "social farming" for inclusion in rural areas (Di lacovo and O'Connor, 2009). Input from food access and nutrition experts from the University of Kentucky Department of Agriculture and Grow Appalachia informs program design.
4.) A $\$ 4.5$ million three-year federal research investment from the Department of Justice Office on Violence Against Women awarded to the University of Kentucky Center for Research on Violence Against Women to evaluate effectiveness of our farm program's therapeutic horticulture outcomes to serve as evidence-based practice.
5.) Integration of the farm program with traditional domestic violence services has been identified as a national promising practice by the Mary Byron Project Celebrating Solutions Award and Kentucky Nonprofit Network Innovative Programming Award.

### 5.2 Program Measures \& Evaluation

### 5.2.1 Service Efficacy \& Desired Outcomes

10 Points
What do you hope to help your clients achieve? What are some examples of goals you will set with clients? What is your service philosophy in terms of helping your clients achieve these goals? Describe how you define "successful" completion of services. (e.g. service is complete if: client remains for entire three-hour training; client continues services until judge orders otherwise; etc.) What percentage of clients meet that criteria for success?

Our Trauma-Informed Farm Program commits to individualized and survivor-centered goals that respond to each participant's unique experiences, barriers, and healing needs. An estimated 300 participants ( 175 adults $/ 125$ children) surviving domestic violence during the one-year grant term will develop unique nature-based healing plan with the support of program staff. The following anticipated outcomes are informed by past years' program data:
$-95 \%$ of adult victims and dependent children experience decreased food insecurity through consumption of healthy and nutritious meals prepared with field-to-table produce grown on the farm.
$-75 \%$ of adult victims and dependent children experience physical and emotional healing benefits from nature-based support groups and activities on the farm.
$-50 \%$ of adult victims and dependent children improve understanding, appreciation, and skills related to nutritious meals and snacks; fresh produce processing and preparation; and healthy budget-saving recipes during participation in age-appropriate kitchen workshops.
$-30 \%$ of adult victims improve workplace readiness and agricultural skills through participation in farm-based job training program.
$-25 \%$ of adult victims completing farm-based job training program are connected to employment opportunities, benefit from positive current work reference from farm manager, and secure living-wage employment before exiting shelter to transitional or permanent housing.
$-15 \%$ of adult victims completing the farm-based job training program establish Individual Development Account (IDA) providing matched savinge for purchase of reliable vehicle or education tuition to overcome barrier to economic stability.

### 5.2.2 Client Empowerment \& Community Impact

## 10 Points

Describe what meaningful difference these services make in the lives of people served. What value is added to the community? Provide examples. (e.g. client demonstrates change in attitude; client has behavior change; etc.)

Food insecurity will be reduced for an estimated 300 adult victims of domestic violence and their dependent children through access to nearly 4,000 pounds of local vegetables, greens and berries grown on the farm and more than 25,000 nutritious meals. Physical, emotional, and financial well-being of program participants will benefit from improved understanding, appreciation, and attitude related to benefits of nature-based experiences. This outcome is especially important when research relating contact with nature to stronger community ties and violence prevention.

A consideration of reflections written by farm program participants, shared with their permission, provides further evidence of empowerment and community impact:
1.) "I never knew how relaxing working outside could be. I guess when it's warm and the sun is shining makes a lot of difference working in the greenhouses." 2.) "Working outside today has taken my mind off a lot of other things that I have going on inside my head. No matter what l'm doing in the garden, I love it all. The weeding, planting, and harvesting are my favorite and most rewarding. It's been so great to see the vegetables growing especially, the tomatoes and apples and the flowers. I can take what l've learned and use it for the rest of my life." 3.) "Working out on the farm, can make you be independent and enable you to be on your own. It makes me feel powerful and create positive friends in my life."

### 5.2.3 Data Assessment \& Quality Improvement

## 10 Points

While it doesn't have to be complicated, evaluation is more than saying "we provided this many 'units of service." How will you know if your services have been effective? How does this relate to the desired outcomes for your clients? How will the information gathered be used to improve your services in the future? Be specific (for example, data collection may be through focus groups, pre-and post-tests, client satisfaction surveys, etc.), and also be specific regarding sampling size and frequency of evaluation.

Program staff and administrators prioritize continuous improvement and evidence-informed practice. Staff and administrators review the following information during weekly check-ins and monthly meetings for formative program evaluation:

- 100\% sample of participant data includes demographics, duration and severity of abuse, earned and non-cash income, language accessibility needs, etc.
- 100\% sample of service-level data tracks counts for all formal and informal counseling, support groups, skills workshops, plates of healthy meals served, etc.
$-100 \%$ sample of job training experience includes number of training hours scheduled and completed; timely or untimely reporting to training; demonstration of new skill development; observed improvements in job placement readiness; resume/application submission assistance; positive work referrals provided to employers; number of participants securing job.

Farm management data points measured daily, weekly, and seasonally provide critical information for effective programming. Examples include soil-quality measurements, pounds of produce harvested, weight of produce used in shelter meal preparation, inventory of produce from the farm processed and preserved for later use; number of meals prepared featuring farm produce.

All program participants are asked to complete a satisfaction and feedback survey upon completion or exit from the program, with typical 75\% response. Data tracking is maintained in a Victim Service Provider database, which adheres to

### 5.3 Capacity \& Sustainability

### 5.3.1 Staff Qualifications \& Experience

5 Points
Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by title and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

Program staff complete 40 hours of training by Kentucky Coalition Against Domestic Violence to become Certified Domestic Violence Training within first year of hire. Responsibilities of four program staff include farm management, group facilitation, and victim advocacy:

- Christina Lane, Farm Co-manager, began career as a domestic violence crisis counselor. She was one of the first employees of the agency and planted the first garden on the farm. Lane contributes $100 \%$ of full-time focus to program. - Savannah McGuire, Farm Co-manager, is a recent graduate of the UK Sustainable Agriculture program. She brings research experience, land and water management, and network of agricultural partnerships. McGuire brings research experience and contributes $100 \%$ of full-time focus to program.
- Bekah Fulcher, Farm Advocate, is a long-time employee of the agency. She began her tenure with the agency more than 15 years ago and contributed substantially to the vision and development of the farm's handmade enterprise. Fulcher contributes $100 \%$ of full-time focus to program.
- Tim Perkins, Food and Nutrition Specialist, brings Chef de Cuisine experience, training, and education to meal planning, preparation, and services. He also facilitates activity-based kitchen workshops for program participants. Perkins contributes approximately $60 \%$ of his full-time focus to program.

Diane Fleet, Associate Director; Diane Willoughby, Finance Director; and Corissa Phillips, External Relations Director, provide program oversight. Darlene Thomas, Executive Director, is a long-time and nationally recognized advocate for

### 5.3.2 Partnership \& Resource Leverage

## 5 Points

How do your programs and services support our community's comprehensive response to the identified priority area of Community Wellness \& Safety? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

Social services for domestic violence victims are identified as high priority in Consolidated Plan to end homelessness, while violence intervention and prevention is a Community Wellness \& Safety priority.

Working relationships with Grow Appalachia, an effort funded by John Paul Dejoria, an international entrepreneur, and the University of Kentucky Department of Agriculture provide technical expertise. Internship partnerships with area universities provide assistance with day-to-day farm operations. Local gardening clubs regularly provide donations of seedsand gently used tools. Donations of produce from Glean Kentucky and Reed Valley Orchard augment our annual harvest. Partnerships with Seedleaf and local landscaping companies provide food and yard waste for onsite composting. The program also benefits from marketing associated with Kentucky Proud certified producer.

The farm provides tangible and meaningful opportunities for individuals, organizations, and companies to understand the mission and participate in solutions to end intimate partner abuse by volunteering on the farm and purchasing value-added products from the farm, such as fresh-cut flowers and handmade self-care products.

A diverse funding model provides additional program support, including a portion of our agency's annual member program subcontract with the Kentucky Coalition Against Domestic Violence, received per KRS and KAR statutes as the primary provider of domestic violence services in Fayette County and surrounding region; Victims of Crime Act federal pass-thru funding from the Kentucky Justice and Public Safety Cabinet; donations and special event fundraising; and revenue

### 5.3.3 Outreach \& Inclusion Strategy

## 15 Points

Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

GreenHouse17 commits to inclusivity and accessibility. We have adopted a comprehensive non-discrimination and inclusion policy that exceeds federal requirements. As a matter of policy and commitment, no person will be denied program participation, nor will they be subject to discrimination, on the basis of actual or perceived protected status.

Partnerships with Global Lex, Kentucky Refugee Ministries, and Pride Community Organization Services (PCOS) exemplify community outreach to assure diverse awareness of services. Recent expansion of the service publications, available in print and online, include translations (Spanish, French, Arabic) and topics specific to LGBTQIA+ and rural victimizations. Two Spanish bilingual advocates employed by the agency often provide farm-based interpretation, and the agency maintains interpreter and translator contracts to assure access for more than a hundred languages.

Parking, walkways, entrances, and corridors are handicapped accessible and meet ADA Accessibility Guidelines for Buildings and Facilities. Farm programming and services often are adapted to meet physical, mental, and other disabilities experienced by participants.

Every program participant earned less than $30 \%$ AMI for the region, with majority claiming zero income. Farm program services inherently respond to needs of persons living in poverty and economic distress through food access, job training with stipend, and matched savings accounts.

### 6.0 Program Budget Summary Form Instructions

Proposal Submittal shall be considered incomplete and shall be rejected without completed Budget Summary Form. (Including total amount of ESR grant request.)

For organizations requesting funding for more than one program in this RFP, combine into a single Program Budget narrative for the proposal.

Please note that the Program Budget will be part of the grantee agreement with LFUCG and regular tracking and expenditure reporting will be required.

To ensure readability and uniformity, please use the Program Budget form included. Provide brief line-item detail as specified in each section below and verify all calculations.

This section provides a summary of the total proposed Program Budget for FY 2020. It requests the allocation of all projected funding amounts (City and non-City sources) for anticipated FY 2020 program expenditures.

## Total Program Budget

Column A should reflect projected expenditures for the entire program (not just the proposed LFUCG ESR grant funding request portion). When the chart is completed this column should equal ESR Grant Funding Request plus other/non-ESR program funding. ( $\mathrm{A}=\mathrm{B}+\mathrm{C}$ )

## ESR Grant Funding Request

Column B is the grant amount being requested from this RFP to support this program's services to eligible Fayette County Participants.

## Non-LFUCG Program Funding

Column $C$ is the non-LFUCG ESR funding that is allocated to the Total Program Budget ( $\mathrm{A}-\mathrm{B}=\mathrm{C}$ ).
This form is for the budget for the PROGRAM applying for ESR funds, not the total agency budget.
For each category identify the amount requested and the amount to be leveraged through other programs or organizations (if applicable).

Staff Salaries - Identify the number of Full-time position salaries allocated to the program, and part-time positions allocated to the program, and the amounts of each allocated to Columns $A, B, \& C$.

Consultant Services - In the "List Details" box, briefly describe any expenses associated with providing expanded supportive services or other services for which the organization intends to contract with another entity. Any of these expenses to be provided by the proposing organization should be included in other line items.

Space/Facilities - In the "List Details" box, briefly list the basis of the allocation of rental costs, utilities, janitorial costs, and any other facility costs for the Program. Identify any office or program space in an LFUCG owned building, and any other costs (rent, monthly utilities, etc.) reimbursed to LFUCG.

Scholarships/Stipends - In the "List Details" box, briefly list the type of scholarships or stipends, and include the number of people or organizations to receive funds.

Operating Expenses - In the "List Details" box, briefly list the costs associated with expenses, supplies, utilities, and any other expense associated directly with the operation of the project.

Other - In the "List Details" box, briefly list any other costs for the Program not covered above.

# Agency Name GreenHouse17 Inc <br> <br> Program Name Trauma-informed Farm Program 

 <br> <br> Program Name Trauma-informed Farm Program}

FY 2020 (July 1, 2019-June 30, 2020) Total Program Budget

| 1. Staff Salaries for Program |  | Column A <br> Total Program <br> Budget $[=B+C]$ | Column B ESR Grant Funding Request | Column C Non-ESR Program Funding [A-B] |
| :---: | :---: | :---: | :---: | :---: |
|  | \# of <br> Employees: |  |  |  |
| Full-Time (FTE) | 3 | 114,035 | 20,000 | 94,035 |
| Part-Time | 1 | 42,500 | 10,000 | 32,500 |
|  | Total Salaries | 156,535 | 30,000 | 126,535 |

3. Consultant Services
list details
4. Space/Facilities
\$ 8,150

| 0 | 8,150 |
| :--- | :--- |

Electric, garbage, gas, water, sewage, pest control, minor renovation
list details


Consumables (seeds, fertilizer, cuttings, etc.); equipment (hand, small farm); fuel, farm truck repair/maintenance;
list details subscriptions/memberships, value-added product packaging and labels, publication printing, copies, postage, business fees, portion of auidt, accounting, CPA fees, basic office supplies, postage,


## 8. TOTAL PROGRAM BUDGET



Cost per Program Participant:
\$ 893
I understand that this document in its entirety is incorporated into my grant Agreement with the Lexington-Fayette Urban County Government.

Authorized Representative (typed name): Darlene Thomas
Title: Executive Director

## PROPOSAL SUBMITTAL FORM

## Agency Information

Agency Name: $\qquad$ GreenHouse 17

Mailing Address: PO Box 55190; Lexington, KY 40555-5190
Street Address: $\qquad$ 4400 Briar Hill Road; Lexington, KY 40516

Phone: (800) 544 - 2022

Is your Agency registered with the IRS as a 501 (c) 3 organization?
Note: Agencies must be registered with the IRS as a $501(c) 3$ organization to be eligible for ESR Program funding.


Does your agency have a current profile with Blue Grass Community Foundation's GoodGiving.net?
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Website Address: GreenHouse17.org
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Darlene Thomas, Executive Director, 859-519-1903, dthomas@greenhouse17.org
Person Completing Application (Name, Title, Phone, Email):
Corissa Phillips, External Relations Director, 502-435-8021, cphillips@greenhouse17.org

## Program Information

Name of program for which funds are being requested:
Emergency Shelter for Domestic Violence Victims Total Funding Amount Requested: \$ $\qquad$

## RFP \#14-2019 PROPOSAL SUBMITTAL FORM

- Save this PDF formatted Proposal Submittal Form to your hard drive before beginning to enter responses in it to ensure your responses are saved to the form.
- LIMIT RESPONSES IN TEXT BOXES TO 250 WORDS
- REMINDER: All proposals must be written in a clear and concise manner, as there will be no followup or clarifications to proposer's submittal form once the evaluation process begins.


### 5.1 Program Design \& Performance

### 5.1.1 General Shelter Information

## 15 Points

The following information is required in order to evaluate capacity and scope of programming and ensure a balance of shelter options for various sub-populations of people experiencing homelessness. While the overall narrative score is a major factor in funding recommendations, LFUCG will also consider factors such as ensuring availability of critical services and an adequate number of emergency shelter beds for vulnerable populations.

- Provide a description of the shelter including;
- shelter operating hours,
- population served included special populations served,
- shelter rules and procedures (submit documentation)
- how basic needs are met such as meals and personal care,
- operating hours outside of nighttime shelter, i.e. are staff operating during the day
- general staffing description for the emergency shelter
- Does your emergency shelter consistently implement practices to meet people where they are, and provide personcentered care that focuses on personal strengths? (submit documentation as an attachment)
- What policies or value statements convey clear expectations that guests will be treated with dignity and respect, and how does the shelter monitor adherence to these expectations? (submit documentation as an attachment)
- Are expectations of guests clearly communicated and easily accessible for review by guests? (submit documentation of communication process
- What specific practices help ensure that the shelter exhibits cultural competency and provides appropriate protections for shelter seekers across demographic differences?
- Does the shelter involve guests in governance and operations? (submit documentation as an attachment)

GreenHouse17 is Fayette County's state-designated provider of domestic violence services per KRS \& KAR statutes. The agency's 24 -hour emergency shelter is surrounded by a 40 -acre rural property. Shelter access and services are provided every day of the year by 21 FT and 4 PT direct service staff. Five FT administrative staff providing supervision and administration for shelter programming.

Victims self-initiate shelter intake, typically connecting through our 24-hour hotline or court advocacy. Eligibility is determined per Category 4 of Federal rule pertaining to fleeing, or attempting to flee, domestic or dating violence. Shelter staff provide immediate access to basic needs (clothes, self-care, hygiene, bedding, meals). Early services focus on crisis stabilization (safety planning, protective orders \& legal advocacy). As risk for harm wanes, physical \& emotional healing begin. Victims have access to supportive housing, job skills training \& economic justice services throughout shelter stay.

Shelter services are trauma-informed. This best practice prioritizes respect and dignity for victims of trauma, while focusing on strength-based and person-centered response that honors each person's unique safety and healing needs.

Residents are provided copies of community living guidelines and rights to accessible services upon entry to shelter. Weekly "house" meetings and exit surveys engage residents in operation of the shelter. Several shelter staff and governing board members identify as survivors of abuse. Training, certification, and meaningful partnerships assure cultural competency and protections across demographic differences. See attachments from Policy and Procedure Manual, KCADV Member Program Service Standards, and Shelter Intake Packet for required documentation.

### 5.1.2 Rapid Resolution, Housing Oriented

25 points
Up to 10 points will be awarded to applicants demonstrating a shelter project that is rapid resolution and housing oriented. This means a plan is presented for how the organization works with guests to develop and implement a housing plan including diversion techniques and how quickly people move to permanent housing.
Narrative for this section should address all of the following prompts:

- Does your emergency shelter's process for accessing shelter assess options for diverting from shelter?
- Does your emergency shelter's diversion approach include, when needed, financial assistance, mediation, housing location, legal assistance, or other supports?
- What role do mainstream programs play in supporting shelter seekers and diversion efforts?
- How does your emergency shelter provide immediate assistance and link guests with housing options within the first 14 days of a shelter stay?
- How does your emergency shelter use data routinely to detect trends, identify frequent users, and monitor housing success and other performance measures?
- How your emergency shelter coordinate with the broader homelessness service and housing systems in system-level planning?
- Does your emergency shelter assess and address the safety risks for people fleeing domestic violence?
- Describe how shelter guests are assigned case management and detail how case management is provided in your emergency shelter. How often do case managers discuss housing options with guests? How and when do the conversations about obtaining housing begin? Do case managers utilize best practices when working with clients such as trauma informed care?
- How will shelter staff members or volunteers help shelter guests access documents needed for housing (birth certificates, Social Security cards, etc.) when needed?

Risk for vioience and iethai harm increase when a domestic violence victim flees abuse. Physical safety must be the primary concern during crisis intervention and shelter intake. Early discussions - often facilitated during calls to our 24-hour hotline - inform options for shelter diversion, including personal networks, rehousing solutions, and homelessness prevention. Sheltered and diverted victims receive same access to mainstream legal, healing, and economic hardship support.

Adults and children living at shelter are assigned a primary advocate upon intake and self-determine their advocacy team, including advocate with specific focus on housing services, during first two weeks of stay. Staff provide immediate and continued access to safety planning and basic needs, while also assisting with paperwork, transportation, and fees required to obtain benefits, identification, and housing documents. Morning, afternoon, and evening support groups encourage emotional healing and understanding of abuse dynamics. As well-being improves, residents begin weekly meetings with a housing advocate to create housing plan and address barriers. All shelter staff gather weekly for case management review meetings to address barriers and opportunities for resident housing based on statistical, observational, and anecdotal data.

Full commitment to Single Point of Entry and COC is evidenced by the agency's specially trained housing team and recent new hires, including a data specialist and a housing advocate with focus on ViSpadat assessment and community coordination. Lexington Housing Authority reserves 24 permanent vouchers for domestic violence survivors who transition to KCADV Homes, scattered-site housing launched three years ago with federal, state, and local support.

### 5.1.3 Low-Barrier

Up to 5 points will be awarded to applicants based on an evaluation of the shelter's commitment to a housing first, lowbarrier model. Low-barrier shelter is a critical piece in the homeless assistance approach that prioritizes providing people experiencing homelessness with shelter as quickly as possible - and then providing voluntary supportive services as needed. A low-barrier shelter is one which has only the least restrictive entry criteria necessary to ensure health and safety in the facility.
Narrative for this section should address all of the following prompts:

- Does the shelter set only minimal and reasonable requirements for guests, and does the shelter enforce these requirements in a fair and transparent way? (submit documentation as an attachment)
- Does your emergency shelter have minimal expectations or requirements of people seeking shelter? (submit documentation as an attachment)
- Does your shelter welcome self-defined family and kinship groups to seek shelter together?
- Can your emergency shelter identify financial resources that can support the adoption of low-barrier policies and practices and support extended or flexible hours and adapted service-delivery models?
- Does your shelter accommodate pets and belongings?
- Does the shelter make accommodations to store belongings and if so, how?
- Do your shelter intake process and housing navigation services coordinate closely with community-based outreach services and coordinated entry?
- Does your shelter create flexible and predictable access for people seeking shelter?
- Are guests required or requested to contribute funds or labor to remain in the shelter? (submit documentation of any program fees or volunteer time required as an attachment)
- Are guests required to participate in classes or programs as a condition of remaining in the shelter? If yes, describe the process followed to determine whether someone is admitted or removed from the shelter and appeals available to those denied access. Applicants should include with their proposal a copy of written operation procedures for denial of services. This includes drug testing.
- How many participants were turned away or banned in the past 12 months for reasons described above?

GreenHouse17 applies a low-barrier, voluntary services philosophy. This approach adheres to Kentucky Coalition Against Domestic Violence (KCADV) Member Service Standards to eliminate barriers to shelter access:

- Self-defined family housed together.
- 24-hour crisis intervention, shelter intake, and flexible shelter access every day.
- Residents' belongings are stored at sheiter, other space on property, or temporary storage facility.
- Kennels for family pets are located on shelter property and volunteer pet foster families available, if victim prefers.
- Coordinated \& community-based housing services integrated throughout shelter stay from intake to exit.
- Shelter \& services free-of-charge.
- Residents are not required to participate in programming or contribute labor as condition of shelter.
- Drug testing is not required.

Residents agree to do no harm, to themselves or others, maintain confidentiality of other residents, \& abide by community living expectations. Weapons, alcohol, \& illegal drugs are prohibited on shelter property. Prescriptions \& medications must be stored at the crisis office. Policy requires staff to make every effort to counsel residents not abiding by these expectations prior to involuntary exit from shelter. Should behavior inconsistent with expectations continue, policies require agency to provide ample notification of departure \& assist with safe relocation. Residents are informed of grievance process upon intake and exit. 10 residents were non-voluntarily exited from shelter during previous 12 months, with majority related to illegal drugs. In all non-voluntary exits, service referrals and continued access to non-shelter services provided.

Agency is committed to adequate funding for low-barrier access to shelter. See required attachments for documentation of policies.
5.1.4 Actual Results

Applicants will be evaluated based on actual results from the previous year. LFUCG will utilize access to KYHMIS for organizations with prior year participation. ONLY non-participating first-time applicants should provide a narrative describing outcome targets and actual results for relevant existing shelter. If the organization has not operated an overnight emergency shelter in the past year, the organization may submit performance reports for any transitional housing, rapid rehousing, or permanent supportive housing program. .
The OHPI reserves the right to negotiate final targets. Results will be evaluated based on reports from the KYHMIS database, not agency records, so KYHMIS data quality and timeliness is critical.

## - Submit reports from January 1, 2018 to December 31, 2018 as attachments

- CoCAPR
- CoC CAPER


## The following notes clarify data related to Section 5.1.4 and numbers reported in Section 5.1.5:

"Actual Results" - Section 5.1.4
As a Victim Service Provider, GreenHouse17 is prohibited from entering information in KYHMIS, per federally mandated confidentiality requirements established by the Violence Against Women Act. The agency instead uses an HMIS-equivalent database capable of generating required data and reporting. This database does not provide separate files for the APR and CAPER; instead, these reports are combined in one document. For this reason, our combined APR and CAPER report from January 12018 to December 312018 has been uploaded twice to assure application compliance.
"Number of Beds Available" - Section 5.1.5
Our emergency shelter is under current renovation. This renovation will expand our previous 32 -bed shelter capacity to 42 beds, while also improving safety, confidentiality, and service delivery at the shelter. The bed count reflected in the following chart includes the 10 additional beds to become available foilowing completion of the renovation, anticipated prior to the start of the 2019-20 funding term on July 1.
"Average Nightly Census" - Section 5.1.5
Number of average shelter residents reported in the following chart reflect the 32 -bed shelter capacity during the 12 -month term PRIOR to shelter renovation that will expand bed capacity to 42. Average nightly census for individuals and families has been calculated using quarterly point-in-time counts, per recommendation in bid system Q\&A.

Every community, including Lexington, faces the challenge of ensuring that shelter capacity is scaled to meet local need and that it is financed accordingly. This does assume that we should expand emergency shelter for those in the community that are currently experiencing unsheltered homelessness.

In making decisions regarding necessary capacity, LFUCG will consider how a broad range of changes and improvements within their crisis response systems will impact need and demand for emergency shelter, including: increased emphasis on diversion strategies and services; reductions in the length of time it takes for guests to move from shelter to permanent housing, including through expanded rapid resolution interventions; removal of barriers to entry; and increased emphasis on long-term or frequent users of emergency shelter.

Complete this table by indicating the total in the column to the right, then respond to the
Total
narrative prompts below:

| $* * *$ Number of individual beds available: | 42 |
| :--- | ---: |
| ***Number of units available for families, if applicable: | - |
| Funds requested from LFUCG: | 150,000 |
| Average nightly census for individuals based on KYHMIS data: | 34.5 |
| Average nightly census for families based on KYHMIS data: | 23.25 |
| Total annual budget for shelter (all funding sources): | $1,389,825$ |
| \% LFUCG investment (LFUCG Request/Total Budget * 100): | $11 \%$ |

* ***Total beds above not reflect any overflow capacity such as mats on the floor, sleeping in lobbies, dining room chairs or overflow into other buildings owned by partners such as churches or other non-profits. Also exclude beds reserved for/supported by Department of Corrections, Veterans Administration, Department of Community Based Services, or other funding sources.
- Please describe all funding sources other than LFUCG that are included in your total emergency shelter budget.


## Program Budget Summary Form Instructions

Proposal Submittal shall be considered incomplete and shall be rejected without completed Budget Summary Form. (Including total amount of ESR grant request.)

For organizations requesting funding for more than one program in this RFP, combine into a single Program Budget narrative for the proposal.

Please note that the Program Budget will be part of the grantee agreement with LFUCG and regular tracking and expenditure reporting will be required.

To ensure readability and uniformity, please use the Program Budget form included. Provide brief line-item detail as specified in each section below and verify all calculations.

This section provides a summary of the total proposed Program Budget for FY 2020. It requests the allocation of all projected funding amounts (City and non-City sources) for anticipated FY 2020 program expenditures.

## Total Program Budget

Column A should reflect projected expenditures for the entire program (not just the proposed LFUCG ESR grant funding request portion). When the chart is completed this column should equal ESR Grant Funding Request plus other/non-ESR program funding. ( $\mathrm{A}=\mathrm{B}+\mathrm{C}$ )

## ESR Grant Funding Request

Column B is the grant amount being requested from this RFP to support this program's services to eligible Fayette County Participants.

## Non-LFUCG Program Funding

Column $C$ is the non-LFUCG ESR funding that is allocated to the Total Program Budget ( $\mathrm{A}-\mathrm{B}=\mathrm{C}$ ).

## This form is for the budget for the PROGRAM applying for ESR funds, not the total agency budget.

For each category identify the amount requested and the amount to be leveraged through other programs or organizations (if applicable).

Staff Salaries - Identify the number of Full-time position salaries allocated to the program, and part-time positions allocated to the program, and the amounts of each allocated to Columns A, B, \& C.

Consultant Services - in the "List Details" box, briefly describe any expenses associated with providing expanded supportive services or other services for which the organization intends to contract with another entity. Any of these expenses to be provided by the proposing organization should be included in other line items.

Space/Facilities - In the "List Details" box, briefly list the basis of the allocation of rental costs, utilities, janitorial costs, and any other facility costs for the Program. Identify any office or program space in an LFUCG owned building, and any other costs (rent, monthly utilities, etc.) reimbursed to LFUCG.

Scholarships/Stipends - In the "List Details" box, briefly list the type of scholarships or stipends, and include the number of people or organizations to receive funds.

Operating Expenses - In the "List Details" box, briefly list the costs associated with expenses, supplies, utilities, and any other expense associated directly with the operation of the project.

Other - In the "List Details" box, briefly list any other costs for the Program not covered above.

## PROGRAM BUDGET SUMMARY

## Agency Name <br> GreenHouse17 <br> Program Name Emergency Shelter for Domestic Violence Victims

FY 2020 (July 1, 2019-June 30, 2020) Total Program Budget

4. Space/Facilities

| $\$ 103,275$ | 0 | 103,275 |
| ---: | ---: | ---: |


|  |  |
| :--- | :--- |
| list details | Shelter mortgage, Utilities (electric, gas, water, and sewage), garbage collection/shredding, pest control |

$\qquad$
5. Operating Expenses

list details
Client travel, staff travel, 24-hour hotline, Food and basic living needs for clients; small appliances and furniture,
programming supplies, office supplies, business fees, court filing fees for clients, postage

8. TOTAL PROGRAM BUDGET

Cost per Program Participant:

$\$$ 4,633
I understand that this document in its entirety is incorporated into my grant Agreement with the Lexington-Fayette Urban County Government.

Authorized Representative (typed name): Darlene B. Thomas, M.S.S.W.
Title: Executive Director

### 5.2 Capacity \& Sustainability

### 5.2.1 Staff Qualifications \& Experience

5 Points
Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by title and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

The proposed budget includes $75 \%$ of personnel costs for the following five emergency shelter staff:

1. Bekah Fulcher, FT Family Advocate -16 years of direct victim service experience - Bachelor of Social Work from the University of Kentucky
2. Laura Arnsdorf, FT Family Advocate - began as crisis counselor with agency in 2015 - Master of Science in Social Work from the University of Louisville
3. Kristen Felter, FT Shelter Living Specialist - began role with agency after student internship in 2016-Bachelor of Social Work from Eastern Kentucky University
4. Nathaniel Smith, FT Family Advocate with Children's Focus - Previous related experience at St. Joseph Orphanage and Community Alternatives of Kentucky - Bachelor Degree from Maryville College in Tennessee
5. Stacy Sheakley, PT Family Advocate with Children's Focus - Court Appointed Special Advocate for Children and previous crisis counselor with agency - Attended Marysville Community College

Shelter staff complete 40 hours of Certified Domestic Violence Advocate training conducted by the Kentucky Coalition Against Domestic Violence within first year of hire and maintain certification with 12 hours of continuing education each year. Certification is based in trauma-informed care model, which honors each victim's personal strengths and optimizes individual opportunities to move from crisis to self-sufficiency. Diane Fleet, Associate Director, and Darlene Thomas, MSSW, Executive Director, bring more than 40 collective hours of victim service leadership to supervision of shelter staff.

### 5.2.2 Partnership \& Resource Leverage

## 5 Points

How do your programs and services support our community's comprehensive response to the identified priority area of Community Wellness \& Safety? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

GreenHouse17 services directly respond to violence prevention priorities of Community Wellness \& Safety and Consolidated Plan high priorities related to shelter, housing, and public services for domestic violence victims.

Shelter staff forge informal and formal community partnerships to reduce barriers for victims, address systemic intersections, and avoid duplication of services. Examples of community consortia participation include Lexington-Fayette COC, LFUCG Domestic and Sexual Violence Prevention Coalition, Lexington Human Trafficking Task Force, and Lexington-Fayette Strangulation Task Force. The shelter also maintains numerous reciprocal service referral agreements with medical, social, legal, governmental, sobriety/substance abuse, \& mental health organizations. An abbreviated list includes Legal Aid of the Bluegrass, Ampersand, Hope Center Recovery Program for Women, The Nest Center for Women \& Children, Lexington Housing Authority, Lexington Police Department, and Lexington Humane Society. Additionally, agency staff facilitate training events for more than 2,500 professionals and community members each year to foster understanding and support for victim needs.

The agency's governing board, comprised of 17 members from various professional sectors, provides fiscal and administrative oversight. Individual and group volunteers representing local colleges, faith institutions, companies, and civic organizations provide more than 2,000 hours in-kind support for projects at shelter and in the community. A diverse $\$ 1.5$ million funding model that includes federal and state grants, individual and foundation gifts, special event fundraising, and nature-based social enterprise provide revenue support. See attachment 5.1.5 for funder descriptions.

### 5.2.3 Outreach \& Inclusion Strategy

15 Points
Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

GreenHouse 17 commits to inclusivity and accessibility. We have adopted a comprehensive non-discrimination and inclusion policy that exceeds federal requirements.

Partnerships with Global Lex, Kentucky Refugee Ministries, and Pride Community Organization Services (PCOS) exemplify community outreach to assure diverse awareness of services. Recent expansion of the agency's service publications, available in print and online, include translations (Spanish, French, Arabic) and topics specific to LGBTQIA+ abuse and rural victimizations. Shelter staff are diverse in age, race, marital status, gender and sexual identity, size, and educational background. We also employ two Spanish bilingual advocates and maintain interpreter and translator contracts to assure access for more than a hundred languages.

Our crisis hotline is equipped to support communication with individuals who are deaf and hearing-impaired. The agency's website is compatible with assistive reading software for individuals with visual impairment. Parking, walkways, entrances, and corridors are handicapped accessible and meet ADA Accessibility Guidelines for Buildings and Facilities. Current renovation of the emergency shelter will create a private, fully accessible bed and bath suite for victims and families with specific health or other needs.

Every shelter resident last year earned less than $30 \%$ AMI for the region, with majority claiming zero income upon intake. Shelter services respond to needs of persons living in poverty and economic distress. Examples include budgeting, credit repair, free tax services, matched savings accounts, job training, emergency financiai assistance, rentai assistance, etc.

## Required attachments with Proposal Submittal Form (8 total):

### 5.1.1 General Shelter Information

- Does your emergency shelter consistently implement practices to meet people where they are, and provide personcentered care that focuses on personal strengths? (submit documentation as an attachment)
- What policies or value statements convey clear expectations that guests will be treated with dignity and respect, and how does the shelter monitor adherence to these expectations? (submit documentation as an attachment)
- Does the shelter involve guests in governance and operations? (submit documentation as an attachment)
- Submit reports from January 1, 2018 to December 31, 2018 as attachments:
- CoC APR
- CoC CAPER


### 5.1.3 Low Barrier

- Does the shelter set only minimal and reasonable requirements for guests, and does the shelter enforce these requirements in a fair and transparent way? (submit documentation as an attachment)
- Does your emergency shelter have minimal expectations or requirements of people seeking shelter? (submit documentation as an attachment)
- Are guests required or requested to contribute funds or labor to remain in the shelter? (submit documentation of any program fees or volunteer time required as an attachment)


## Attachments 5.1 .5 - Person-centered and strengths-based.services, Excerpt from GreenHouse17 Policy and Procedures Manual, pg 9 .

### 1.4 Requests for Shelter/Admissions

Persons eligible for GreenHouse17 shelter services must be:

- a current victim of intimate partner violence
- either, a legal adult, emancipated minor, or a minor seeking services for themselves who have been granted permission for services by a parent, guardian or judge's order. The legal dependents of accepted shelter residents are also eligible for admission despite age of dependents.
- willing to abide by program guidelines.
- able to take primary care of themselves and their dependents within a communal living facility. If a person needs assistance in taking primary care of themselves, staff shall explore others safe options.

Everyone has a right to a violence free life. We are dedicated to inclusion and non-discrimination. We honor the link between intimate partner abuse and other forms of oppression. We will provide individualized, survivor-centered advocacy that responds to each person's unique safety and healing needs. No person will be denied opportunity for services, nor will they be subject to discrimination in any project, program or activity on the basis of actual or perceived age, race, color, religion, national origin, ethnicity, citizenship, immigration status, marital status, language spoken, sex, sexual orientation, gender identity, familial status, pregnancy, handicap or disability, disabled veteran, Vietnam era veteran, or other protected status. No dependents with their parent or guardian are denied access to services.

## Service Standards require for any intern / volunteer no to deny shelter entry or appropriate placement of prospective resident.

Support services at the GreenHouse17 are specifically aimed at lessening the duration and damage of homelessness experienced as a result of intimate partner violence. There is no limit to the length of stay at GreenHouse17's emergency shelter. Residents will work with GreenHouse17's Housing Specialists to identify suitable housing placements and transition from the shelter environment back into the community, and may continue to work with GreenHouse17 outreach advocates once this transition has occurred.

## V. Service Components

## A. Premise:

Domestic violence programs provide appropriate, trauma-informed services to victims of domestic violence and their children in an empowering, non-blaming way.

## B. Criteria:

1. Services and documentation are trauma-informed, non-judgmental, culturally-sensitive and strive to empower persons served.
2. The program recognizes and respects the autonomy, dignity and rights of victims.
3. The program seeks to serve persons who need its services and works to eliminate barriers to the provision of quality services to those who seek services.
4. The program shall assess for services in a manner that is appropriate given the circumstances and conditions surrounding the client/dependent at the time of assessment.
5. At a minimum, the program shall assess initial contacts for:

- Immediate safety;
- Perpetrator's potential for lethality;
- Eligibility for support and intervention services;
- Immediate medical and physical needs;
- Perpetrator dynamics to assure that the person requesting services is the primary victim;
- Special needs based on a disability;
- Special needs based on the requirements of a person's self-identified religious, cultural, geographic or other affiliation(s); and
- Special needs based on limited English proficiency.

6. The program shall develop and implement procedures for adequate staff communication to provide continuity of service for clients, including a regular review of any problem areas to resolve.
7. Each program shall develop a protocol for safe travel of clients. Protocols contain a provision for client travel to the shelter for intake. Further, the protocol reflects clients'

The success of one of us is the success of us all
Each individual is special, unique and important for the success of us all. The residents and staff of GreenHouse17 welcome you. As you settle in over the next few days, we have listed what we believe are important expectations; what you can expect from staff and other residents and what is expected from you in return.
We understand it can be very hard to live with others from many walks of life. We encourage questions and new ideas so please always feel welcome to express your thoughts to us.

## Residents may expect from staff:

- To be treated with dignity, respect, and courtesy
- To hold you accountable to the program communal living guidelines
- To be assigned to a team of advocates to meet counseling and case management needs
- To complete safety plans for you and your family
- To assist you with transportation, court, legal services, health services, etc.
- Confidentiality
- To give grace for feelings and for not being perfect.


## Staff should expect from residents:

- To be treated with dignity, respect, and courtesy
- To adhere to communal living guidelines
- To understand that transportation is provided to area stops and that you may need to go early or wait for transportation to meet the needs of the program restraints
- To make staff aware of any visitors and understand that staff may not let individuals onto property that we are not aware of in advance or pose safety concerns
- To give grace for feelings and not being perfect.

Residents should expect from residents:

- To be treated with dignity, respect, and courtesy
- To pick up after oneself and children
- To recognize that we are all unique and not stand in judgment of another
- To prioritize the safety of one another
- To express anger without threats or violence
- To give grace because, although we are different, we have all been hurt by people who claim to have loved us


# GreenHouse17 <br> Client Grievance Procedure 

## Who is responsible for handling my complaint?

1. First, GreenHouse17 will listen to your complaint and try to resolve it for you. If GreenHouse17 cannot resolve your complaint, or fails to provide you a response, you can make an;
2. Appeal to Kentucky Coalition Against Domestic Violence (KCADV)
3. If KCADV cannot resolve your complaint or fails to provide you with a response, you can appeal to the Commissioner of the Department for Community Based Services at the Cabinet for Health and Family Services.

## Is there a deadline for notifying someone of my complaint?

State regulations require that you report your complaint in writing within thirty (30) calendar days of when the incident occurred to GreenHouse17 in order to be eligible for final appeals process through the Commissioner of the Department for Community Based Services (in case you are not satisfied with the KCADV final decision/resolution. If you report your complaint after thirty (30) calendar days, you will still be able to go through the grievance process to seek resolution; however, your appeals process will stop after KCADV issues a final decision.

## What if I need help in writing my complaint?

Staff of GreenHouse17 will provide you with the writing materials and the method of delivery that you need to file your complaint. You will also be provided with the services of a translator if you are a current client and need assistance to complete your complaint in English.

## Why is there a Grievance Process?

The grievance process is available for you to ensure that GreenHouse17 is providing services to you and your family according to statewide standards for all clients. If you have a complaint about the services being provided, or feel services have been denied, reduced or stopped, you may use the grievance process to let us know what the problem is and provide us with an opportunity to correct the problem.

What steps do I take if I have a complaint?
The steps to file a complaint and start the grievance process are outlined below. It is important that you follow the time frame allowed in each step so that you don't risk your right to an appeal with the Commissioner of DCBS if necessary. However, you will not lose your right to be heard and your right to receive quality services from GreenHouse 17 or KCADV.

STEP 1: You are encouraged to have your concern resolved first by speaking with a member of your team or direct service staff. This is considered an informal process of listening and information gathering. Your advocate or team will attempt to respond to your needs so that hopefully the issue or concern can be resolved quickly and by the people who know you and your situation best. If you do not receive a response quickly (within 3 days) or you are not satisfied with the response then you will need to go to STEP 2.

STEP 2: You may request a meeting with a staff supervisor or the Assistant Director. You are always encouraged
to write a written complaint but it is not necessary at this stage of the grievance procedure. Again, if you do not receive a response quickly (within 3 days) or you are not satisfied with the response given by the staff supervisor or the Assistant Director you may go to STEP 3.

STEP 3: You may request a meeting in person or you may forward a written copy of your complaint to the Executive Director. Make a copy of your complaint for yourself to keep. Here is what must be included in your written complaint.

- Your printed name
- Phone number where you can be reached (if not the shelter)
- Address where you can be reached (if not the shelter)
- The date the incident occurred
- A brief description of your complaint
- Sign and date your complaint on the day you submit it
- If you received a response from the Assistant Director and/or Staff Coordinator, include this response with your original written complaint as well as a brief explanation of why you don't accept the response.


## You may contact the Executive Director in the following ways:

- Hand delivery if the Executive Director is available to you
- By faxing it to the Executive Director - 859.519.1938
- By marking the envelope CONFIDENTIAL and mailing it to the Executive Director by at:


## Greeni-iouseit

ATTN: Executive Director
PO Box 55190, Lexington, KY 40555. Mark the envelope CONFIDENTIAL on the outside.
The Executive Director or GreenHouse17 designee (which may include the Board of Directors) will respond to your complaint within (5) calendar days of the day you delivered, faxed or mailed your complaint to them. In most cases, this response will be provided in person (if you are currently a resident at GreenHouse17 or by phone, however, you will also receive a written response within this time period).
If you are not satisfied with the response, outcome or decision of the Executive Director of GreenHouse17 or GreenHouse17's designee, or the Board of Directors; or if you do not receive a response within ten (5) calendar days, then you may contact KCADV.

You are encouraged to utilize Options 1-3, but if you wish to bring your complaint directly to KCADV, you may do so; in this case, the decision of KCADV will be final. You may also decide to file an anonymous complaint to KCADV, though you may not be able to appeal any response.

STEP 4: Send a copy of your written complaint (appeal) to the Kentucky Coalition Against Domestic Violence (KCADV) at:

KCADV
Confidential - for Legal Counsel
111 Darby Shire Circle
Frankfort, KY 40602
Or, you may fax it to (502) 226.5382 marked CONFIDENTIAL for Legal Counsel. Please include a copy of all the responses that have received as well as any additional information that you feel relates to your complaint.

KCADV will take steps to review your complaint that may include calling you to discuss your complaint further, unless you direct us not to call you.

You will receive one of the following written responses from KCADV within fifteen (15) calendar days of the day you faxed or mailed your complaint to KCADV:
a) Your complaint has been resolved and no further action will be taken; or
b) Your complaint does not show evidence of a violation of KCADV's Victim Service Standards and no further action will be taken; or
c) There is evidence to suspect a violation of Victim Service Standards and the KCADV Standard's Review Committee will review the complaint. If this is the case, you will be notified in writing of the date you may expect to receive a final written decision of the Standard's Review Committee.

If you do not receive one of the above responses within fifteen (15) calendar days, or if you are not satisfied with the response, you may appeal KCADV's final written decision by going to STEP 5.

STEP 5: Send a copy of your written complaint within ten (10) calendar days from receipt of KDVA's final decision to:

Office of the Commissioner
CHFS/DCBS
275 E. Main St.
Mail Stop 3W-A
Frankfort, KY 40621
Please include a copy of all the responses that you have received (including the final decision of KCADV) as well as any additional information that you feel relates to your complaint. Upon completion of the review, the Commissioner will provide a written order regarding your complaint within thirty (30) days unless extenuating circumstances prolong the review, in which case you will be notified of the need for an extension.

If, for any reason, you do not want to report your complaint to GreenHouse17 or KCADV, you may send your written complaint to:

Office of the Ombudsman<br>Cabinet for Health and Family Services<br>275 E. Main St.<br>Mail Stop1 E-B<br>Frankfort, KY 40621

In order to file a grievance with the Office of the Ombudsman, the complaint cannot have ever been reported to GreenHouse17 / KCADV or the Office of the Ombudsman. In other words, if you decide to use the Regular Grievance Process or if you have already contacted the Ombudsman's Office on this specific complaint in the past, you cannot file a grievance with the Office of the Ombudsman on this specific complaint.

There is no deadline for filing a report with the Ombudsman's Office; therefore, if any incident occurred more than (30) days in the past, you may still file a complaint with the Ombudsman as long as it meets the criteria in the paragraph above. However for your own benefit, you are encouraged to file your complaint as soon as possible.

The Ombudsman's Office will send a written response to you within thirty (30) calendar days of the receipt of your complaint.

If you are not satisfied with the decision, you may request that the Commissioner of the Department for Community Based Services review your complaint and the written response that was provided by the Ombudsman's Office. You must send your written request within ten (10) days of receipt of the response from the Ombudsman's Office

## Attachments 5,1.5-Involvement in Operations \& Governance - Kentucky Coalition Against Domestic Violence, Member Program Service Standards, pg 40.

8. Programs document the attempt to provide an exit interview with each client prior to their departure. The exit interview provides for a revision of the client's safety plan (inclusive of children's safety issues) and linkage to outreach and/or follow up services provided by the domestic violence program and other community resources.
9. In addition to conducting an exit interview, programs shall attempt to document the client's perspective on the services provided by the program through a client evaluation. This evaluation may be given to the client during the client's stay or at the time of exit, as appropriate. The client evaluation shall be in the form of a clientfriendly, anonymous survey. The client shall be asked to return the survey utilizing some method of return that provides for anonymity. Surveys should include, but are not limited to, an assessment of the program, services, and treatment by staff (respectful, helpful, available). The survey shall also inquire into whether or not staff provided information and assistance around the dynamics of domestic violence, children's services, safety planning, and goal planning.
10. Programs shall provide both residential and non-residential clients with an opportunity to respond to outcome questions on safety and resources as outlined in FVPSA regulations. These questions can either be a part of the evaluation as described above, or as a separate anonymous survey.
11. The program has a system for case management. It regularly plans, monitors and assesses the progress of each person served.
12. Each domestic violence shelter shall develop and implement a plan for the provision of outreach services in counties of the area development district in which it is located.

## Crisis Line Services

## A. Premise:

Victims need access to confidential support and intervention services provided free-ofcharge, on a 24 -hour basis by staff and volunteers trained in crisis intervention and domestic violence.

## B. Criteria:

## GREENHOUSE17

## Anonymous Survey

Please evaluate the service you received during your stay with GreenHouse17:
Do you feel that GreenHouse17 met the needs of your child/children and yourself? Yes__ No_
If yes, what was most beneficial? If no, what could have been improved?

Did you feel safe at the shelter? Yes $\qquad$ No $\qquad$
If no, what could have been improved?
$\qquad$
$\qquad$
$\qquad$

Did you feel that the facilities were comfortable? Yes__ No__
If no, what could have been improved?
$\qquad$
$\qquad$
$\qquad$

Was the staff supportive of you and did they meet your needs? Yes $\qquad$ No If yes, what was most beneficial? If no, what could have been improved?
$\qquad$
$\qquad$
$\qquad$

Were other women at the shelter supportive of you? Yes $\qquad$ No
$\qquad$
$\qquad$
$\qquad$

Do you feel the house rules were fair? Yes $\qquad$ No
If no, what could have been improved and how?
$\qquad$
$\qquad$
$\qquad$

Were you satisfied with our referrals to other agencies? Yes $\qquad$ No

If yes, what was most beneficial? If no, why not?
$\qquad$
$\qquad$
$\qquad$

Are there changes the staff could make in order to better serve you and future residents?
Yes $\qquad$ No
If yes, what was most beneficial?
$\qquad$
$\qquad$
$\qquad$
$\qquad$

Additional Comments:

I know more about community resources?
Yes No
I know more ways to plan for my safety?
Yes No

HUD ESG - CAPER

| Start Date | January 1, 2018 |
| :--- | :--- |
| End Date | December 31, 2018 |
| Reportable Days | 365 |
| Print Date | April 3, 2019 |

Q4a: Project Identifiers in HMIS

| Organization name | GreenHouse17 |
| :--- | :--- |
| Organization ID | EJ4912 |
| Project name | Default Emergency shelter Location |
| Project ID | EJ4912P01 |
| HMIS Project Type | 1 |
| Method of tracking ES | 0 |
| If HMIS Project ID $=6$, is the Services Only affilated with a <br> residental project? | 0 |
| Identify the Project ID's of the housing projects this project is <br> affillated with | 0 |

Q5a Report Validations Table

| 1. Total number of persons served | 254 |
| :--- | :--- |
| 2. Number of adults (age 18 or over) | 175 |
| 3. Number of children (under age 18) | 79 |
| 4. Number of persons with unknown age | 0 |
| 5. Number of leavens | 213 |
| 6. Number of adult leavers | 150 |
| 7. Number of adult and head of household leavers | 150 |
| 3. Number of stayars | 41 |
| 9. Number of adult stayers | 25 |
| 10. Number of veterans | 1 |
| 11. Number of chronically homeless persons | 2 |
| 12. Number of youth under age 25 | 26 |
| 13. Number of parenting youth under age 25 with children | 5 |
| 14. Number of adult heads of houschold | 174 |
| 15. Number of child and unicnown-age Heads of household | 0 |
| 16. Heads of households and adult stayers in the profect 365 days or |  |
| more | 0 |

Q6a. Data Quality: Personally Identifiable Information

|  | Client Doesn't know / Refused | Information Missing | Data Issues | \% of Error Rate |
| :---: | :---: | :---: | :---: | :---: |
| Name | 0 | 0 | 0 | 0.00\% |
| Social Security Number | 0 | 0 | 0 | 0.00\% |
| Date of birth | 0 | 0 | 0 | 0.00\% |
| Race | 0 | 0 |  | 0.00\% |
| Ethnicity | 0 | 0 |  | 0.00\% |
| Gender | 0 | 0 |  | 0.00\% |
| Overall Score |  |  |  | 0.00\% |

Q6b. Data Quality: Universal Data Elements

|  | Error Count | $\%$ of Error Rate |
| :--- | :--- | :--- |
| Veteran Statius | 0 | $0.00 \%$ |
| Project Entry Date | 0 | $0.00 \%$ |
| Relatlonship to Head of Household | 0 | $0.00 \%$ |
| Client Location | 0 | $0.00 \%$ |
| Disabling Condition | 0 | $0.00 \%$ |

Q6c. Data Quality: Income and Housing Data Quality

|  | Error Count | $\%$ of Error Rate |
| :--- | :--- | :--- |
| Destination | 0 | $0.00 \%$ |
| Income and Sources at Entry | 0 | $0.00 \%$ |
| Income and Sources at Annual Assessment | 0 | $0.00 \%$ |
| Income and Sources at Exit | 0 | $0.00 \%$ |

Q6d. Data Quality Chronic Homelessness

|  | Count of total records | Missing time in institution | Missing time In housing | Approximate Date started DK/R/missing | Number of times DIG/R/missing | Number of months DK/R/missing | \% of records unable to calculate |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ES, SH, Street Outreach | 174 |  |  | 0 | 0 | 0 | 0.00\% |
| TH | 0 | 0 | 0 | 0 | 0 | 0 | 0.00\% |
| PH (all) | 0 | 0 | 0 | 0 | 0 | 0 | 0.00\% |
| TOTAL | 174 |  |  |  |  |  | 0.00\% |

Q6e. Data Quality: Timeliness

|  | Number of Project Entry Records | Number of Project Exit Records |
| :--- | :--- | :--- |
| 0 days | 254 | 228 |
| $1-3$ days | 0 | 0 |
| $4-6$ days | 0 | 0 |
| $7-10$ days | 0 | 0 |
| $11+$ days | 0 | 0 |

Q6f. Data Quality: Inactive Records: Street Outreach and Emergency Shelter

|  | \# of Records | \# of Inactive Records \% |  |
| :--- | :--- | :--- | :--- |
| Contact (Aduls and Heads of Houschold In <br> Street Outreach or ES - NBN) |  |  |  |
| Bed Nlght (All cllents in ES - NBN) |  |  |  |

Q7a: Number of Persons Served

|  | a. Total | b. Without children | c. With children and adults | d. With only children | e. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Adults | 175 | 131 | 44 | - | 0 |
| b. Children | 79 |  | 79 | 0 | 0 |
| c. Cllent Doesn't Know/ Client Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| e. Total | 254 | 131 | 123 | 0 | 0 |

Q8a. Number of Households Served

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Total Households | 174 | 130 | 44 | 0 | 0 |

Q8b: Point-in-Time Count of Households on the Last Wednesday

|  | Total | a. Without chlldren | b. With childran and <br> adults | c. With only chlldren | d. Unknown household <br> type |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| January | 21 | 12 | 9 | 0 |  |
| April | 22 | 14 | 8 | 0 |  |
| Suly | 27 | 23 | 4 | 0 | 0 |
| October | 23 | 15 | 8 | 0 | 0 |

Q9a: Number of Persons Contacted

|  | Total | a. First contact - NOT staying on <br> the Streets ES or SH | b. First contact - WAS staying <br> on Streets ES or SH | c. First contact - Worker unable <br> to determine |
| :--- | :--- | :--- | :--- | :--- | :--- |
| a1. Contacted once? | 0 | 0 | 0 |  |
| a2. Contacted 2-5 times? | 0 | 0 | 0 | 0 |
| a3. Contacted 6.9 times? | 0 | 0 | 0 | 0 |
| a4, Contacted 10 or more times? | 0 | 0 | 0 | 0 |
| az. Total persons contacted | 0 | 0 | 0 | 0 |

## Q9b: Number of Persons Engaged

|  | Total | a, First contact - NOT staying on the Streets ES or SH | b. First contact - WAS staying on Streats ES or SH | c. First contact - Worker unable to datermine |
| :---: | :---: | :---: | :---: | :---: |
| b1. Engaged after 1 contact? | 0 | 0 | 0 | 0 |
| b2. Engaged after 2-5 contacts? | 0 | 0 | 0 | 0 |
| 63. Engaged after 6.9 contacts? | 0 | 0 | 0 | 0 |
| b4. Engaged after 10 or more contacts? | 0 | 0 | 0 | 0 |
| bz. Total pensons engaged | 0 | 0 | 0 | 0 |
| c. Rate of engagement (\%) | 0.00\% | 0.00\% | 0.00\% | 0.00\% |

## Q10a: Gender of Adults

|  | Total | a. Without children | b. With children and adults |  |
| :--- | :--- | :--- | :--- | :--- |
| a. Male | 0 | 0 | c. Unknown household type |  |
| b. Female | 173 | 129 | 0 |  |
| c. Transgender Maic to Female | 2 | 2 | 4 |  |
| d. Transgender Female to Male | 0 | 0 | 0 | 0 |
| e. Doesn't Identify as male, female, or <br> transgender | 0 | 0 | 0 | 0 |
| f. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |
| 9. Data Not Collected | 0 | 0 | 0 | 0 |
| h. Total | 175 | 131 | 0 | 0 |

Q10b: Gender of Children

|  | Total | a. With children and adults | b. With only children | c. Unknown household type: |
| :---: | :---: | :---: | :---: | :---: |
| 3. Male | 44 | 44 | 0 | 0 |
| b. Female | 35 | 35 | 0 | 0 |
| c. Transgender Male to Female | 0 | 0 | 0 | 0 |
| d. Transgender Female to Male | 0 | 0 | 0 | 0 |
| e. Doesn't identify as male, female, or transgender | 0 | 0 | 0 | 0 |
| f. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |
| 9. Data Not Collected | 0 | 0 | 0 | 0 |
| h. Total | 79 | 79 | 0 | 0 |

Q10c: Gender of Persons Missing Age Information

|  | Total | a. Without chlldren | b. With chlldren and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Male | 0 | 0 | 0 | 0 | 0 |
| b. Female | 0 | 0 | 0 | 0 | 0 |
| c. Transgender Male to Female | 0 | 0 | 0 | 0 | 0 |
| d. Transgender Female to Male | 0 | 0 | 0 | 0 | 0 |
| e. Doesn't Identify as male, female, or transpender | 0 | 0 | 0 | 0 | 0 |
| f. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| g. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| h. Total | 0 | 0 | 0 | 0 | 0 |

Q10d: Gender by Age Ranges

|  | Total | a. Under age 18 | b. Age 18-24 | c. Age 25-61 | d. Age 62 and over | e. Client Doesn't Know/Client Refused | P. Data not collected |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a. Male | 44 | 44 | 0 | 0 | 0 | 0 | 0 |
| b. Female | 208 | 35 | 16 | 154 | 3 | 0 | 0 |
| c. Trans female (MTF or mate to female) | 2 | 0 | 2 | 0 | 0 | 0 | 0 |
| d. Trans male (FTM or female to malo) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| e. Gender non-conforming (l.e nat exclusively male or femalo) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| F. Client Doesn't Know/ Client Refused | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Daita Not Collected | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 9. Total | 254 | 79 | 18 | 154 | 3 | 0 | 0 |

## Q11: Age

|  | Total | a. Without chlldren | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| D. Under 5 | 37 |  | 37 | 0 | 0 |
| b. 5-12 | 32 |  | 32 | 0 | 0 |
| c. 13-17 | 10 |  | 10 | 0 | 0 |
| d. $18 \cdot 24$ | 18 | 13 | 5 | tor | 0 |
| e. 25 - 34 | 58 | 33 | 25 |  | 0 |
| f. $35-44$ | 59 | 46 | 13 | Schaces | 0 |
| 9. $45-54$ | 31 | 30 | 1 |  | 0 |
| h. $55-61$ | 6 | 6 | 0 |  | 0 |
| 1. $62+$ | 3 | 3 | 0 | WKios: | 0 |
| j. Client Doesn't Know/ Client Refused | 0 | 0 | 0 | 0 | 0 |
| k. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| 1. Total | 254 | 131 | 123 | 0 | 0 |

## Q12a: Race

|  | Total | a, Without children | b. With children and adults | c. With only chilidren | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 3. White | 177 | 102 | 75 | 0 | 0 |
| b. Black or African-American | 59 | 23 | 36 | 0 | 0 |
| c. Asian | 4 | 0 | 4 | 0 | 0 |
| d. American Indlan or Alacka Native | 4 | 3 | 1 | 0 | ó |
| e. Native Hawallan or Other Pacific Islander | 0 | 0 | 0 | 0 | 0 |
| 7. Multiple races | 10 | 3 | 7 | 0 | 0 |
| 9. Client Doesn't Know/ Client Refused | 0 | 0 | 0 | 0 | 0 |
| h. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| 1. Total | 254 | 131 | 123 | 0 | 0 |

## Q12b: Ethnicity

|  | Total | a. Without children | b. With children and adults | c With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Non-HIspanic/non-Latino | 240 | 124 | 116 | 0 | 0 |
| b. Hispanle/Latino | 14 | 7 | 7 | 0 | 0 |
| c. Cllert Doesn't Knowfcilent Rehused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| e. Total | 254 | 131 | 123 | 0 | 0 |

Q13a1: Physical and Mental Health Conditions at Entry

|  | rotal persons | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Mental iliness | 22 | 19 | 3 | 0 | 0 |
| b. Alcohol abuse | 5 | 4 | 1 | 0 | 0 |
| c. Drug abuse | 21 | 18 | 3 | 0 | 0 |
| di. Both alcohol and drug abuse | 3 | 3 | 0 | 0 | 0 |
| e. Chronic health condition | 9 | 9 | 0 | 0 | 0 |
| f. HRV/ALDS and related diseases | 1 | 1 | 0 | 0 | 0 |
| 9. Developmental disability | 3 | 3 | 0 | 0 | 0 |
| h. Physlcal disability | 20 | 19 | 1 | 0 | 0 |

Q13b1: Physical and Mental Health Conditions at Exit

|  | Total persons | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Mental iliness | 32 | 25 | 7 | 0 | 0 |
| b. Alcohol abuse | 1 | 0 | 1 | 0 | 0 |
| c. Drug abuse | 25 | 20 | 5 | 0 | 0 |
| d. Both alcohot and drug abuse | 16 | 15 | 1 | 0 | 0 |
| e. Chronic health condition | 15 | 13 | 2 | 0 | 0 |
| f. HIV/AIDS and related diseases | 1 | 1 | 0 | 0 | 0 |
| 9, Developmental disability | 3 | 3 | 0 | 0 | 0 |
| h, Physical disability | 16 | 12 | A | 0 | 0 |

## Q13c1: Physical and Mental Health Conditions for Stayers

|  | rotal persons | a. Whthout chlldren | b. With children and adutts | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Mental Illness | 6 | 5 | 1 | 0 | 0 |
| b, Alcohol abuse | 3 | 3 | 0 | 0 | 0 |
| c. Drug abuse | 2 | 1 | 1 | 0 | 0 |
| d. Both alcohol and drug abuse | 1 | 1 | 0 | 0 | 0 |
| e. Chronic health condition | 1 | 1 | 0 | 0 | 0 |
| f. HIV/AIDS and related diseases | 0 | 0 | 0 | 0 | 0 |
| 9. Developmental disability | 2 | 2 | 0 | 0 | 0 |
| h. Physical disability | 3 | 3 | 0 | 0 | 0 |

Q14a: Domestic Violence History

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Yes | 175 | 131 | 44 | 0 | 0 |
| b: No | 0 | 0 | 0 | 0 | 0 |
| c. Cilent Doem't Know/ Cilent Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
|  | 175 | 131 | 44 | 0 | 0 |

## Q14b: Persons Fleeing Domestic Violence

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Yes | 169 | 127 | 42 | 0 | 0 |
| b. No | 6 | 4 | 2 | 0 | 0 |
| c. Cilent Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| e. Total | 175 | 131 | 44 | 0 | 0 |

## Q15: Living Situation

|  | Total | a. Without children | b. With chlldren and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Homeless situations |  |  |  |  |  |
| a1. Emergency shelter | 23 | 17 | 6 | 0 | 0 |
| a2. Transitlonal housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| a3. Place not meant for human habitation | 129 | 94 | 35 | 0 | 0 |
| a4, Safe haven | 0 | 0 | 0 | 0 | 0 |
| a5. Interim housing | 0 | 0 | 0 | 0 | 0 |
| ax. Total | 152 | 111 | 41 | 0 | 0 |
| b. Institutional settings |  |  |  |  |  |
| b1, Psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| 62. Substance abuse or detox center | 0 | 0 | 0 | 0 | 0 |
| 133. Hosplita (mon-psycniatric) | 1 | 1 | 0 | 0 | 0 |
| b4. Jail, prison or fuverile detention | 0 | 0 | 0 | 0 | 0 |
| b5. Foster care home or foster care group home | 0 | 0 | 0 | 0 | 0 |
| b6. Long-term care faclity or nursing home | 0 | 0 | 0 | 0 | 0 |
| b7. Residentlal project or halfway house with no homeless citeria | 0 | 0 | 0 | 0 | 0 |
| bx. Total | 1 | 1 | 0 | 0 | 0 |
| c. Other locations |  |  |  |  |  |
| C01. PH for homeless persons | 1 | 0 | 1 | 0 | 0 |
| c02. Owned by client, no subsidy | 0 | 0 | 0 | 0 | 0 |
| co3. Owned by client, with subsidy | 0 | 0 | 0 | 0 | 0 |
| co4. Rental by client, no subsidy | 4 | 3 | 1 | 0 | 0 |
| C05. Rental by cllent, with Vass subsidy | 0 | 0 | 0 | 0 | 0 |
| c06. Rental by client with GPD TIP subsidy | 0 | 0 | 0 | 0 | 0 |
| c07. Rental by client, with other subsidy | 0 | 0 | 0 | 0 | 0 |
| c08. Hotel or motel pald by client | 0 | 0 | 0 | 0 | 0 |
| c09. Staying or living with friend(s) | 1 | 1 | 0 | 0 | 0 |
| cio. Staying or living with family | 3 | 2 | 1 | 0 | 0 |
| ci1. Client Doesn't Know/Cilent Refused | 0 | 0 | 0 | 0 | 0 |
| c12. Data Not Collected | 13 | 13 | 0 | 0 | 0 |
| cz. Total | 22 | 19 | 3 | 0 | 0 |
| d. rotal | 175 | 131 | 44 | 0 | 0 |

Q20a: Type of Non-Cash Benefit Sources

|  | At entry | At Latest Annual Assessment for Stayers | At Exit for Leavers |
| :--- | :--- | :--- | :--- |
| a. Supplemental Nutritional Assiatance <br> Program | 124 | 0 | 111 |
| b. WIC | 0 | 0 | 2 |
| c. TANF Child Care services | 0 | 0 | 0 |
| d. TANF transportation services | 0 | 0 | 0 |
| e. Other TANF-funded services | 0 | 0 | 0 |
| f. Other source | 0 | 0 | 0 |

## Q21: Health Insurance

|  | At entry | At Latest Annual Assessment for Stayers | At Exit for Leavers |
| :---: | :---: | :---: | :---: |
| a. MEDICAID health insurance | 183 | 0 | 154 |
| b. MEDICARE health insurance | 2 | 0 | 4 |
| c. State Children's Mealth Insurance | 5 | 0 | 8 |
| d. VA Medical Services | 2 | 0 | 1 |
| e. Employer-provided health insurance. | 4 | 0 | 6 |
| f. Health insurance through COBRA | 0 | 0 | 0 |
| 9. Private pay health insurance | 1 | 0 | 0 |
| h. State Health insurance for Adults | 8 | 0 | 6 |
| 1. Indian Health Services Program | 0 | 0 | 0 |
| 1. Other | 0 | 0 | 0 |
| IG. No health insurance | 49 | 0 | 37 |
| L. Client doesn't know/Client refused. | 1 | 0 | 0 |
| m. Data not collected | 1 | 0 | 0 |
| n. Number of adult stayers not yat required to have an annual assessment |  | 41 |  |
| 0. 1 source of health insurance | 203 | 0 | 173 |
| p. More than 1 source of health Insuranice | 1 | 0 | 3 |

## Q22a2: Length of Participation - ESG Projects

|  | Total | Leavers | Stayers |
| :---: | :---: | :---: | :---: |
| a. 0 to 7 days | 58 | 57 | 1 |
| b. 8 to 14 days | 25 | 25 | 0 |
| c. 15 to 21 day | 17 | 11 | 6 |
| d. 22 to 30 days | 15 | 11 | 4 |
| e. 31 to 60 day | 51 | 42 | 9 |
| f. 61 to 90 days | 24 | 17 | 7 |
| 0. 91 to 180 days | 48 | 37 | 11 |
| h. 181 to 365 days | 16 | 13 | 3 |
| 1. 366 to 730 days ( $1-2.2 \mathrm{rrs}$ ) | 0 | 0 | 0 |
| 1.731 to 1095 days ( $2-3 \mathrm{Yrs}$ ) | 0 | 0 | 0 |
| k. 2096 to 1460 days ( $3.4 \mathrm{Yras}^{\text {) }}$ | 0 | 0 | 0 |
| L. 1461 to 1825 days (4.5 Yra) | 0 | 0 | 0 |
| m. More than 1825 days ( $>5 \mathrm{5ris}$ ) | 0 | 0 | 0 |
| m. Data Not Collected | 0 | 0 | 0 |
| o, rotal | 254 | 213 | 41 |

Q22c: RRH/PSH Length of Time between Project Start Date and Housing Move-in Date

| 3xam | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. 7 days or less | 0 | 0 | 0 | 0 | 0 |
| b. 8 to 14 days | 0 | 0 | 0 | 0 | 0 |
| c. 15 to 21 days | 0 | 0 | 0 | 0 | 0 |
| d. 22 to 30 days | 0 | 0 | 0 | 0 | 0 |
| e. 31 to 60 days | 0 | 0 | 0 | 0 | 0 |
| f. 61 to 180 day 5 | 0 | 0 | 0 | 0 | 0 |
| g. 181 to 365 days | 0 | 0 | 0 | 0 | 0 |
| h. 366 to 730 days ( $1-2 \mathrm{Y}_{\text {rs }}$ ) | 0 | 0 | 0 | 0 | 0 |
| Total (persons moved into housing) | 0 | 0 | 0 | 0 | 0 |
| Average length of time to housing | 0 | 0 | 0 | 0 | 0 |
| Persons who were exfted without moveIn | 0 | 0 | 0 | 0 | 0 |
| 1. Total | 0 | 0 | 0 | 0 | 0 |

Q22d: Length of Participation by Household Type

|  | Total | Without Children | With Children and Adults | Witn Only Children | Unknown Household Type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 3. 0 to 7 days | 58 | 34 | 24 | 0 | 0 |
| b. 8 to 14 days | 25 | 12 | 13 | 0 | 0 |
| c. 15 to 21 days | 17 | 7 | 10 | 0 | 0 |
| di. 22 to 30 diays | 15 | 8 | 7 | 0 | 0 |
| e. 31 to 60 days | 51 | 30 | 21 | 0 | 0 |
| f. 61 to 90 daya | 24 | 13 | 11 | 0 | 0 |
| a. 91 to 180 days | 48 | 22 | 26 | 0 | 0 |
| h. 281 to 365 days | 16 | 5 | 11 | 0 | 0 |
| 1. 366 to 730 days ( $1-2 \mathrm{Yrs}$ ) | 0 | 0 | 0 | 0 | 0 |
| 5. 731 to 1095 days ( 2 -3 Yrs) | 0 | 0 | 0 | 0 | 0 |
| k. 1096 to 1460 days ( $3-4 \mathrm{Yrs}$ ) | 0 | 0 | 0 | 0 | 0 |
| 1. 1461 to 1825 days ( $4-5 \mathrm{Yrs}$ ) | 0 | 0 | 0 | 0 | 0 |
| m. More than 1825 days ( $>5$ Yrs) | 0 | 0 | 0 | 0 | 0 |
| n. Dato Not Collected | 0 | 0 | 0 | 0 | 0 |
| 0. Total | 254 | 131 | 123 | 0 | 0 |

Q23a: Exit Destination - More Than 90 Days

|  | Total | a. Without childran | b. With children and adults | c. With only chlldren | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Permanent destinations |  |  |  |  |  |
| a01. Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| 302. Owned by cllent, no ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| a03, Owned by client, with ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| 304. Rental by client, no ongoing subsidy | 6 | 4 | 2 | 0 | 0 |
| a05. Rental by clent, VASH subsidy | 0 | 0 | 0 | 0 | 0 |
| a06. Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| a07. Rental by client, other ongoing subsidy | 18 | 3 | 15 | 0 | 0 |
| a08, Permanent housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| a09, Staying or living with family, permanent tenure | 2 | 0 | 2 | 0 | 0 |
| a10. Staying or living with friends, permanent tenure | 0 | 0 | 0 | 0 | 0 |
| a11. Rental by client, with RRH or equivalont subsidy | 0 | 0 | 0 | 0 | 0 |
|  | 26 | 7 | 19 | 0 | 0 |
|  |  |  |  |  |  |
| b1. Emergency ahelter | 10 | 6 | 4 | 0 | 0 |
| b2. Moved frem one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| b3. Transitional housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| b4, Staying with family, temporary tenure | 4 | 2 | 2 | 0 | 0 |
| b5, Staying with friends, temporary tenure | 4 | 3 | 1 | 0 | 0 |
| b6. Plsce not meant for human habltation | 4 | 2 | 2 | 0 | 0 |
| b7. Safe Haven | 0 | 0 | 0 | 0 | 0 |
| ba, Hotel or motel paid by client | 0 | 0 | 0 | 0 | 0 |
| bz. Total | 22 | 13 | 9 | 0 | 0 |
| c. Institutional settings |  |  |  |  |  |
| c1. Foster care home or group foster care home | 0 | 0 | 0 | 0 | 0 |
| c2. Psychiatric hospital or other psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| c3. Substance abuse treatment facility or detox center | 1 | 1 | 0 | 0 | 0 |
| C4. Hospital or other residential non psychiatric medical facility | 0 | 0 | 0 | 0 | 0 |
| c5, Jail, prison or fuvenile detention facility | 1 | 1 | 0 | 0 | 0 |
| c6. Long term care facillty or nursing home | 0 | 0 | 0 | 0 | 0 |
| cz. Total | 2 | 2 | 0 | 0 | 0 |
| d. Otherdestinations |  |  |  |  |  |
| d1, Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| d2. Deceased | 0 | 0 | 0 | 0 | 0 |
| d3. Other | 0 | 0 | 0 | 0 | 0 |
| d4. Client doesn't know/Client refused | 0 | 0 | 0 | 0 | 0 |
| d5, Data not collected (no exit Interviow completed) | 0 | 0 | 0 | 0 | 0 |
| dz. rotal | 0 | 0 | 0 | 0 | 0 |


| C Total | 50 | 22 | 28 | 0 | 0 |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 11. Total persons exiting to positive <br> housing destinations | 26 | 7 | 19 | 0 | 0 |
| R. Total persons whose destinations <br> excluded them from the calculation | 0 | 0 | 0 | 0 | 0 |
| 13. Percentage | $52.00 \%$ | $31.82 \%$ | $67.86 \%$ | $0.00 \%$ | $0.00 \%$ |

Q23b: Exit Destination - 90 Days or less

|  | Total | a. Without chlldren | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Permanent destinations |  |  |  |  |  |
| a01. Moved from one HopWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| a02. Owned by client, no onjoing subsidy | 2 | 2 | 0 | 0 | 0 |
| a03. Owned by client, with ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| a04. Rental by cilent, no ongoing subsidy | 17 | 9 | 8 | 0 | 0 |
| -05. Rental by client, VASH subsidy | 0 | 0 | 0 | 0 | 0 |
| a06. Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| a07. Rental by client, other ongoing subsidy | 19 | 3 | 16 | 0 | 0 |
| a08. Permanent housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| a09. Staying or living with family; permanent tenure | 10 | 7 | 3 | 0 | 0 |
| a10. Staying or living with friends, permanent tenure | 1 | 1 | 0 | 0 | 0 |
| a11. Rental by client, with RRH or equlvalent subsidy | 0 | 0 | 0 | 0 | 0 |
| az. Total | 49 | 22 | 27 | 0 | 0 |
| b. Temporary destinations |  |  |  |  |  |
| b1. Emergency shelter | 14 | 13 | 1 | 0 | 0 |
| b2. Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| D3. Transitional housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| b4, Staying with family, temporary tenure | 49 | 23 | 26 | 0 | 0 |
| b5. Staying with frienids, temporary tenure | 6 | 6 | 0 | 0 | 0 |
| 66. Place not meant for human habitation | 30 | 19 | 11 | 0 | 0 |
| b7, Safe Haven | 0 | 0 | 0 | 0 | 0 |
| b8. Hotel or motel pald by client | 2 | 0 | 2 | 0 | 0 |
| bz. Total | 101 | 61 | 40 | 0 | 0 |
| C. Institutional settings |  |  |  |  |  |
| c1. Foster care home or group foster care home | 5 | 0 | 5 | 0 | 0 |
| c2. Psychiatric hospital or other psychiatric facility | 1 | 1 | 0 | 0 | 0 |
| c3. Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 |
| C4. Hospital or other residential nonpsychiatuic medical facility | 1 | 1 | 0 | 0 | 0 |
| c5. Jail, prison or juvenile detention facility | 1 | 1 | 0 | 0 | 0 |
| c6. Long term care faclity or nursing home | 0 | 0 | 0 | 0 | 0 |
| cz. Total | 8 | 3 | 5 | 0 | 0 |
| d. Other destinations |  |  |  |  |  |
| di. Residential projoct or halifway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| d2. Deceased | 0 | 0 | 0 | 0 | 0 |
| d3. Other | 5 | 5 | 0 | 0 | 0 |
| d4. Cilent doesi't know/Client refused ${ }^{\text {a }} 0$ | 0 | 0 | 0 | 0 | 0 |
| d5. Data not collected (no exitinterviow completed) | 0 | 0 | 0 | 0 | 0 |
| dz Total | 5 | 5 | 0 | 0 | 0 |


| e. Total | 163 | 91 | 72 | 0 | 0 |
| :--- | :--- | :--- | :--- | :--- | :--- |
| f. Total persons exiting to positive <br> housing destinatlons | 49 | 22 | 27 | 0 | 0 |
| 12. Total persons whose destinations <br> excluded them from the calculation | 6 | 1 | 5 | 0 | 0 |
| r3. Percentage | $31.21 \%$ | $24.44 \%$ | $40.30 \%$ | $0: 00 \%$ | $0.00 \%$ |

Q23c: Exit Destination - All Persons

|  | Total | a, Without children | b. With children and adults | c. With only children | d. Unknown household type. |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Permanent destinations |  |  |  |  |  |
| a1. Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| a02. Owned by client, no ongoing subsidy | 2 | 2 | 0 | 0 | 0 |
| a03, Owned by client, with ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| a04. Rental by client, no ongoing subsidy | 23 | 13 | 10 | 0 | 0 |
| a05. Rental by client, VASH subsidy | 0 | 0 | 0 | 0 | 0 |
| a06. Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| a07. Rental by client, other ongoing subsidy | 37 | 6 | 31 | 0 | 0 |
| a08. Permianent housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| 209. Staying or llving with family, permanent tenure | 12 | 7 | 5 | 0 | 0 |
| a10. Staying or living with frlends, permanent tenure | 1 | 1 | 0 | 0 | 0 |
| a11. Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |
| ax. Total | 75 | 29 | 46 | 0 | 0 |
| b. Temporary destinations |  |  |  |  |  |
| bi. Emergency shelter | 24 | 19 | 5 | 0 | 0 |
| 62. Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| b3. Transitional housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| b4, Staying with family, temporary tenure | 53 | 25 | 28 | 0 | 0 |
| b5. Slaying with friends, temporary tenure | 10 | 9 | 1 | 0 | 0 |
| b6. Place not meant for human hrabitation | 34 | 21 | 13 | 0 | 0 |
| 67, Safe Haven | 0 | 0 | 0 | 0 | 0 |
| b8. Hotel or motel paid by client | 2 | 0 | 2 | 0 | 0 |
| bx. Total | 123 | 74 | 49 | 0 | 0 |
| c. Institutional settings |  |  |  |  |  |
| c1. Foster care home or group loster care home | 5 | 0 | 5 | 0 | 0 |
| c2. Psychlatric hospital or other psychiatric facility | 1 | 1 | 0 | 0 | 0 |
| c3. Substance abuse treatment facilify or detox center | 1 | 1 | 0 | 0 | 0 |
| c4. Hospital or other residential nonpsychiatric medical facility | 1 | 1 | 0 | 0 | 0 |
| c5, Jail, prison or fuvenile detention facillty | 2 | 2 | 0 | 0 | 0 |
| C6, Long term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| ca. Total | 10 | 5 | 5 | 0 | 0 |
| d. Other destinations |  |  |  |  |  |
| d1. Residential project or haliway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| d2. Deceased | 0 | 0 | 0 | 0 | 0 |
| d3. Other | 5 | 5 | 0 | 0 | 0 |
| d4. Clierit doen't't know/ Client refused | 0 | 0 | 0 | 0 | 0 |
| d5. Data not collected (no exit interviow completed) | 0 | 0 | 0 | 0 | 0 |
| dx. Total | 5 | 5 | 0 | 0 | 0 |


| e. Total | 213 | 113 | 100 | 0 |
| :--- | :--- | :--- | :--- | :--- | :--- |
| f. Total persons exiting to positive <br> housing destinations | 75 | 29 | 46 | 0 |
| 12. Total persons whose destinations <br> excluded them from the calculation | 6 | 1 | 5 | 0 |
| 13. Percentage | $36.23 \%$ | $25.89 \%$ | $48,42 \%$ | 0 |

## Q24: Homelessness Prevention Housing Assessment at Exit

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Able to maintain the housing they had at project start-Without a subsidy | 147 | 84 | 63 | 0 | 0 |
| b. Able to maintain the housing they had at profect start-With the subsidy they had at profect start | 10 | 1 | 9 | 0 | 0 |
| c. Able to maintain the housing they had at project start-With an on-going subsidy acquired since project stait | 27 | 4 | 23 | 0 | 0 |
| d. Able to maintain the housing they had at project atart-Only with financial assistance other than a subsidy | 4 | 4 | 0 | 0 | 0 |
| e. Moved to new housing unit-With ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| f. Moved to new housing unit-Witiout an on-going subsidy | 3 | 2 | 1 | 0 | 0 |
| g. Moved In with family/friends on a temporary basis | 5 | 4 | 1 | 0 | 0 |
| h. Moved in with family/friends on a permanerit basis | 0 | 0 | 0 | 0 | 0 |
| 1. Moved to a transitional or temporary housing facility or program | 0 | 0 | 0 | 0 | 0 |
| 1. Client became homeless moving to a sheiter or other place unnt for human hahitation | 6 | 6 | 0 | 0 | 0 |
| k. Client went to jail/prison | 0 | 0 | 0 | 0 | 0 |
| 1. Client died | 0 | 0 | 0 | 0 | 0 |
| m. Client doesn't know/Client refused | 0 | 0 | 0 | 0 | 0 |
| n. Data not collected (no exit Interview completed) | 10 | 8 | 2 | 0 | 0 |
| 0. Total | 213 | 113 | 100 | 0 | 0 |

## Q25a: Number of Veterans

|  | Total | a. Without children | b. With children and adults | c. Unknown household type |
| :--- | :--- | :--- | :--- | :--- |
| a. Chronically homeless veteran | 0 | 0 | 0 |  |
| b, Non-chronically homeless veteran | 1 | 1 | 0 |  |
| c. Not a veteran | 253 | 130 | 0 | 0 |
| d. Client Doesn't Know/Client Refused | 0 | 0 | 123 | 0 |
| c. Data Not Collected | 0 | 0 | 0 | 0 |
| f. Total | 254 | 131 | 0 | 0 |

Q26b: Number of Chronically Homeless Persons by Household

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Chronically homeless: | 2 | 2 | 0 | 0 | 0 |
| b. Not chronically homeless | 238 | 116 | 122 | 0 | 0 |
| c. Cllent Dousn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 14 | 13 | 1 | 0 | 0 |
| e. Total | 254 | 131 | 123 | 0 | 0 |

HUD ESG - CAPER

| Start Date | January 1, 2018 |
| :--- | :--- |
| End Date | December 31, 2018 |
| Reportable Days | 365 |
| Print Date | April 3,2019 |

Q4a: Project Identifiers in HMIS

| Organization name | GreenHouse17 |
| :--- | :--- |
| Organization ID | EJ4912 |
| Profect name | Default Emergency shelter Location |
| Project ID | EJ4912P01 |
| HMIS Project Type | 1 |
| Method of tracking ES | 0 |
| If HMis Project ID $=6$, is the Services Only afriilated with a <br> residential project? | 0 |
| Identify the Project ID's of the housing projects this project is | 0 |
| afriliated with |  |

Q5a Report Validations Table

| 1. Total number of persons served | 254 |
| :--- | :--- |
| 2. Number of adults (age 18 or over) | 175 |
| 3. Number of children (under age 18) | 79 |
| 4. Number of persons with unknown age | 0 |
| 5. Number of leavers | 213 |
| 6. Number of adult leavers | 150 |
| 7. Number of adult and head of household leavers | 150 |
| 8. Number of stayars | 41 |
| 9. Number of adult stayers | 25 |
| 10. Number of veterans | 1 |
| 11. Number of clironically homeless persons | 2 |
| 12. Number of youth under age 25 | 26 |
| 13. Number of parenting youth under age 25 with children | 5 |
| 14. Number of adult heads of household | 174 |
| 15. Number of child and unknown-age Heads of household | 0 |
| 16. Heads of households and adult stayers in the profect 365 days of |  |
| more | 0 |

Q6a. Data Quality: Personally Identifiable Information

|  | Client Doesn't Know / Refused | Information Missing | Data Issues | \% of Error Rate |
| :---: | :---: | :---: | :---: | :---: |
| Name | 0 | 0 | 0 | 0.00\% |
| Social Security Number | 0 | 0 | 0 | 0.00\% |
| Date of blith | 0 | 0 | 0 | 0.00\% |
| Race | 0 | 0 |  | 0.00\% |
| Ethricity | 0 | 0 |  | 0.00\% |
| Gender | 0 | 0 |  | 0.00\% |
| Overall Score |  |  |  | 0.00\% |

Q6b. Data Quality: Universal Data Elements

|  | Error Count | $\%$ of Error Rate |
| :--- | :--- | :--- |
| Veteran Status | 0 | $0.00 \%$ |
| Project Entry Date | 0 | $0.00 \%$ |
| Relationshlp to Head of Household | 0 | $0.00 \%$ |
| Client Location | 0 | $0.00 \%$ |
| Disabling Condition | 0 | $0.00 \%$ |

Q6c. Data Quality: Income and Housing Data Quality

|  | Error.Count | \% of Error Rate |
| :--- | :--- | :--- |
| Destination | 0 | $0.00 \%$ |
| Income and Sources at Entry | 0 | $0.00 \%$ |
| Income and Sources at Annual Assessment | 0 | $0.00 \%$ |
| Income and Sources at Exit | 0 | $0.00 \%$ |

Q6d. Data Quality Chronic Homelessness

|  | Count of total records | Missing time in institution | Missing time in housing | Approximate Date started <br> DK/R/missing | Number of times DK/R/missing | Number of months DK/R/missing | \% of records unable to calculate |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ES, SH, Street Outreach | 174 |  |  | 0 | 0 | 0 | 0.00\% |
| TH | 0 | 0 | 0 | 0 | 0 | 0 | 0.00\% |
| PH (all) | 0 | 0 | 0 | 0 | 0 | 0 | 0.00\% |
| TOTAL: | 174 |  | 5utez |  |  |  | 0.00\% |

Q6e. Data Quality: Timeliness

|  | Number of Profect Entry Records | Number of Project Exit Records |
| :--- | :--- | :--- |
| 0 days | 254 | 228 |
| $1-3$ days | 0 | 0 |
| $4-6$ days | 0 | 0 |
| $7-10$ days | 0 | 0 |
| $11+$ days | 0 | 0 |

Q6f. Data Quality: Inactive Records: Street Outreach and Emergency Shelter

|  | \# of Records | \# of Xnactlve Records |  |
| :--- | :--- | :--- | :--- |
| Contact (Adults and Heads of Household in |  |  |  |
| Street Oitreach or ES - NBN) |  |  |  |
| Bed Night (All cilents in ES - NBN) |  |  |  |

Q7a: Number of Persons Served

|  | a. Total | b. Without children | C. With children and adults | d. With only children | e. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Adults | 175 | 131 | 44 |  | 0 |
| b. Children | 79 |  | 79 | 0 | 0 |
| c. Client Doesn't Know/ Client Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| e Total | 254 | 131 | 123 | 0 | 0 |

Q8a. Number of Households Served

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Total Households | 174 | 130 | 44 | 0 | 0 |

Q8b: Point-in-Time Count of Households on the Last Wednesday

|  | Total | a. Without chlldren | b. With children and aduits | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| January | 21 | 12 | 9 | 0 | 0 |
| April | 22 | 14 | 8 | 0 | 0 |
| July | 27 | 23 | 4 | 0 | 0 |
| October | 23 | 15 | 8 | 0 | 0 |

Q9a: Number of Persons Contacted

|  | Total | a. First contact - NOT staying on the Streets ES or SH | b. Hist contact - WAS staying on Streets ES or SH | c. First contact - Worker unable to determine |
| :---: | :---: | :---: | :---: | :---: |
| a1. Contacted once? | 0 | 0 | 0 | 0 |
| a2. Contacted $2-5$ times? | 0 | 0 | 0 | 0 |
| a3. Contacted $6-9$ times? | 0 | 0 | 0 | 0 |
| a4. Contacted 10 or more times? | 0 | 0 | 0 | 0 |
| az. Total persons contacted | 0 | 0 | 0 | 0 |

Q9b: Number of Persons Engaged

|  | Total | a. First contact - NOT staiying on the Strects ES or SH | b. Flret contact - WAS staying on Streets $\# 5$ or SH | c. First contact - Worker unable to determine |
| :---: | :---: | :---: | :---: | :---: |
| b1. Engiged after 1 contact? | 0 | 0 | 0 | 0 |
| b2. Engaged after $2 \cdot 5$ contacts? | 0 | 0 | 0 | 0 |
| 63. Engaged after $6-9$ contacts? | 0 | 0 | 0 | 0 |
| D4. Engaged after 10 or more contacts? | 0 | 0 | 0 | 0 |
| bz. Total persons engaged | 0 | 0 | 0 | 0 |
| c. Rate of engagement (\%) | 0.00\% | 0.00\% | 0,00\% | 0.00\% |

## Q10a: Gender of Adults

|  | Total | a. Whehout children | b. Whth children and adults | c. Unknown household type |
| :---: | :---: | :---: | :---: | :---: |
| a. Male | 0 | 0 | 0 | 0 |
| b. Female | 173 | 129 | 44 | 0 |
| c. Transpender Male to Female | 2 | 2 | 0 | 0 |
| d. Transgender Female to Male | 0 | 0 | 0 | 0 |
| e. Doemn' Identify as male, fomale/ or transgender | 0 | 0 | 0 | 0 |
| f. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 |
| 9. Data Not Collected | 0 | 0 | 0 | 0 |
| h. Total | 175 | 131 | 44 | 0 |

Q10b: Gender of Children

|  | Total | a. With children and adalts | b. With only chlidren | c. Unknown household type |
| :--- | :--- | :--- | :--- | :--- | :--- |
| a. Male | 44 | 44 | 0 |  |
| b. Female | 35 | 35 | 0 |  |
| c. Transgender Male to Female | 0 | 0 | 0 |  |
| d. Transgender Female to Mate | 0 | 0 | 0 | 0 |
| e. Does't identify as male, female, or | 0 | 0 | 0 | 0 |
| transgender | 0 | 0 | 0 | 0 |
| f. Client Doesn's Know/Client Refused | 0 | 0 | 0 | 0 |
| 9. Data Not Collected | 0 | 79 | 0 | 0 |
| h. Total | 79 |  | 0 | 0 |

Q10c: Gender of Persons Missing Age Information

|  | Total | a. Without cilldran | b. With chlldren and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 3. Male | 0 | 0 | 0 | 0 | 0 |
| b. Female | 0 | 0 | 0 | 0 | 0 |
| c. Transgender Male to Female | 0 | 0 | 0 | 0 | 0 |
| d. Transgender Female to Male | 0 | 0 | 0 | 0 | 0 |
| e. Doesn't Identify as male, female, or transgender | 0 | 0 | 0 | 0 | 0 |
| f. Cllent Doesn't Know/ Client Refused | 0 | 0 | 0 | 0 | 0 |
| 9. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| Li. Tữà | 0 | 0 | 0 | 0 | 10 |

Q10d: Gender by Age Ranges

|  | Total | a. Under age 18 | b. Age 18-24 | C. Age 25-61 | d. Age 62 and over | e. Client-Doesn't Know/Client Refused | f. Data not collected |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a. Male | 44 | 44 | 0 | 0 | 0 | 0 | 0 |
| b. Female. | 208 | 35 | 16 | 154 | 3 | 0 | 0 |
| C. Trans female (MTF or male to female) | 2 | 0 | 2 | 0 | 0 | 0 | 0 |
| d. Trans male (FIM or female to male) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| e. Gender non-conforming (t.e. nat exclusively male or female) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| f. Client Doesr't Know/Client Refused | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| g. Data Not Collected | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| g. Total | 254 | 79 | 18 | 154 | 3 | 0 | 0 |

Q11: Age

|  | Total | a. Withour chlldren | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Under 5 | 37 |  | 37 | 0 | 0 |
| b. 5-12 | 32 |  | 32 | 0 | 0 |
| c. $13-17$ | 10 |  | 10 | 0 | 0 |
| d. 18-24 | 18 | 13 | 5 |  | 0 |
| e. 25 - 34 | 58 | 33 | 25 | $8{ }^{8514}$ | 0 |
| f, 35-44 | 59 | 46 | 13 |  | 0 |
| 9. $45-54$ | 31 | 30 | 1 | -8 | 0 |
| h. 55.61 | 6 | 6 | 0 | $\underline{3}$ | 0 |
| $1.62+$ | 3 | 3 | 0 | - | 0 |
| 5. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| K. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| L. Total | 254 | 131 | 123 | 0 | 0 |

## Q12a: Race

|  | Total | a. Without cilldren | b. With children and aduls | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. White | 177 | 102 | 75 | 0 | 0 |
| b. Black or African-American | 59 | 23 | 36 | 0 | 0 |
| c. Asian | 4 | 0 | 4 | 0 | 0 |
| d. American Indian or Alaska Native | 4 | 3 | 1. | 0 | 0 |
| e. Native Hawallan or Other Pacific islander | 0 | 0 | 0 | 0 | 0 |
| f. Muftiple races | 10 | 3 | 7 | 0 | 0 |
| 9. Client Doesn't Know/Clent Refused | 0 | 0 | 0 | 0 | 0 |
| b. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| L. Total | 254 | 131 | 123 | 0 | 0 |

## Q12b: Ethnicity

|  | Total | a. Without children | b. With chlldren and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Non-Hiapanic/non-Latino | 240 | 124 | 116 | 0 | 0 |
| b. Hispanic/Latino | 14 | 7 | 7 | 0 | 0 |
| c. Client Doesn't Know/Cilent Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| e. Total | 254 | 131 | 123 | 0 | 0 |

Q13a1: Physical and Mental Health Conditions at Entry

|  | Total persons | a. Without children | b. With chlidren and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Mental litness | 22 | 19 | 3 | 0 | 0 |
| b. Alcohol abuse | 5 | 4 | 1 | 0 | 0 |
| c. Drug abuse | 21 | 18 | 3 | 0 | 0 |
| d. Both alcohol and diug abuse | 3 | 3 | 0 | 0 | 0 |
| e. Chronic health condition | 9 | 9 | 0 | 0 | 0 |
| f. HIV/AIDS and related diseases: | 1 | 1 | 0 | 0 | 0 |
| 9. Developmental disability | 3 | 3 | 0 | 0 | 0 |
| h. Physical disability | 20 | 19 | 1 | 0 | 0 |

Q13b1: Physical and Mental Health Conditions at Exit

|  | Total persons | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Mental lilnes: | 32 | 25 | 7 | 0 | 0 |
| b. Alcohol abuse | 1 | 0 | 1 | 0 | 0 |
| c. Drug abuse | 25 | 20 | 5 | 0 | 0 |
| d. Both alcohol and drug abuse | 16 | 15 | 1 | 0 | 0 |
| e Chronic health condition | 15 | 13 | 2 | 0 | 0 |
| f. HIV/AIOS and related discaser: | 1 | 1 | 0 | 0 | 0 |
| 9: Developmental disability. | 3 | 3 | 0 | 0 | 0 |
| h, Physlcal disabillty | 16 | 12 | 4 | 0 | 0 |

Q13c1: Physical and Mental Health Conditions for Stayers

|  | Total persons | a. Without chlidren | b. With chlldren and adultes | CWith only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Mental Illness | 6 | 5 | 1 | 0 | 0 |
| b. Alcohol abuse | 3 | 3 | 0 | 0 | 0 |
| c. Drugabuse | 2 | 1 | 1 | 0 | 0 |
| d. Both alcohol and drug abuse | 1 | 1 | 0 | 0 | 0 |
| e:Chronlc health condition | 1 | 1 | 0 | 0 | 0 |
| f. HIV/AIOS and related discases | 0 | 0 | 0 | 0 | 0 |
| 9. Developmerital disability | 2 | 2 | 0 | 0 | 0 |
| h. Prysical dsabillty | 3 | 3 | 0 | 0 | 0 |

Q14a: Domestic Violence History

|  | Total | a. Without children | b. With children and adults | C. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Yes | 175 | 131 | 44 | 0 | 0 |
| b. No | 0 | 0 | 0 | 0 | 0 |
| c. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| e. Total | 175 | 131 | 44 | 0 | 0 |

## Q14b: Persons Fleeing Domestic Violence

|  | Total | a, Without cilldren | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Yes | 169 | 127 | 42 | 0 | 0 |
| b. No | 6 | 4 | 2 | 0 | 0 |
| c. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| d. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| e. Total | 175 | 131 | 44 | 0 | 0 |

## Q15: Living Situation

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknowin household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Homeless situations |  |  |  |  |  |
| ai, Emergency shelter | 23 | 17 | 6 | 0 | 0 |
| a2. Transitional housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| a3. Place not meant for human habitation | 129 | 94 | 35 | 0 | 0 |
| as, Safe haven | 0 | 0 | 0 | 0 | 0 |
| a5. Interim housing | 0 | 0 | 0 | 0 | 0 |
| ax. Total | 152 | 111 | 41 | 0 | 0 |
| b. Institutional settings |  |  |  |  |  |
| b1. Psychiatric facility | 0 | 0 | 0 | 0 | 0 |
| B2. Substance abuse or detox center | 0 | 0 | 0 | 0 | 0 |
|  | 1 | 1 | 0 | 10 | 0 |
| b4. Jall, prison or fuvenile detention | 0 | 0 | 0 | 0 | 0 |
| b5. Foster care home or fostar care group home | 0 | 0 | 0 | 0 | 0 |
| b6. Long'term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| b7. Residental project or halfway house with no homeless citteria | 0 | 0 | 0 | 0 | 0 |
| bz. Total | 1 | 1 | 0 | 0 | 0 |
| c. Other locations |  |  |  |  |  |
| C01. PH for hamelees persons | 1 | 0 | 1 | 0 | 0 |
| c02. Owned by client/ no enibsidy | 0 | 0 | 0 | 0 | 0 |
| c03. Owned by clent, with subsidy | 0 | 0 | 0 | 0 | 0 |
| c04. Rental by client no subsidy | 4 | 3 | 1 | 0 | 0 |
| c05. Rental by client, with VASH subsidy | 0 | 0 | 0 | 0 | 0 |
| c06. Rental by client with GPD TIP subsldy | 0 | 0 | 0 | 0 | 0 |
| c07. Rental by client, with other subsldy | 0 | 0 | 0 | 0 | 0 |
| c08. Hotel or motel pald by ellent | 0 | 0 | 0 | 0 | 0 |
| c09. Staying or llving with friend(9) | 1 | 1 | 0 | 0 | 0 |
| c10. Staying or living with family | 3 | 2 | 1 | 0 | 0 |
| citl. Client Doesn't Know/Client Refused | 0 | 0 | 0 | 0 | 0 |
| c12. Data Not Collected | 13 | 13 | 0 | 0 | 0 |
| ce. Total | 22 | 19 | 3 | 0 | 0 |
| d. Total | 175 | 131 | 44 | 0 | 0 |

Q20a: Type of Non-Cash Benefit Sources

|  | At enty | At Latest Annual Assessment for Stayers | At Exd for Leavers |
| :--- | :--- | :--- | :--- |
| a, Supplemental Nutritional Assistance <br> Program | 124 | 0 | 111 |
| b. WIC | 0 | 0 | 2 |
| c. TANF Child Care services | 0 | 0 | 0 |
| d. TANF transportation senvices | 0 | 0 | 0 |
| e. Other TANF-funded services | 0 | 0 | 0 |
| f. Other source | 0 | 0 | 0 |

## Q21: Health Insurance

|  | At entry | At Latest Annual Assessment for Stayers | At Exit for Leavers |
| :---: | :---: | :---: | :---: |
| a. MEDICAID health insurance | 183 | 0 | 154 |
| b. MEDICARE health insurance | 2 | 0 | 4 |
| C. State Children's Health Insurance | 5 | 0 | 8 |
| d. VA Medical Services | 2 | 0 | 1 |
| e. Employer-provided health Insurance | 4 | 0 | 6 |
| f. Health insurance through COBRA | 0 | 0 | 0 |
| 9. Private pay heaith Insurance | 1 | 0 | 0 |
| h. State Health Insurance for Adults | 8 | 0 | 6 |
| 1. Indian Heath Services Program | 0 | 0 | 0 |
| 1, Other | 0 | 0 | 0 |
| KG No nealth insurance: | 49 | 0 | 37 |
| 1. Cllent doem't know/Client refused | 1 | 0 | 0 |
| m. Data not collected | 1 | 0 | 0 |
| n. Number of adult stayers not yet required to have an annual assessment |  | 41 |  |
| 0. 1 source of health Insurance | 203 | 0 | 173 |
| p. More than 1 source of health insurance | 1 | 0 | 3 |

Q22a2: Length of Participation - ESG Projects

|  | Total | Lesvers | Stayers |
| :---: | :---: | :---: | :---: |
| a. 0 to 7 day | 58 | 57 | 1 |
| b. 8 to 14 days | 25 | 25 | 0 |
| c. 15 to 21 days | 17 | 11 | 6 |
| d. 22 to 30 days | 15 | 11 | 4 |
| e. 31 to 60 day | 51 | 42 | 9 |
| 8, 61 to 90 daya | 24 | 17 | 7 |
| 9.91 to 180 diays | 48 | 37 | 11 |
| h. 181 to 365 daya | 16 | 13 | 3 |
| 1.366 to 730 days ( $1-2 \mathrm{Yrs}$ ) | 0 | 0 | 0 |
| 1. 731 to 1095 days ( $2-3 \mathrm{Y}$ Y ${ }^{\text {a }}$ ) | 0 | 0 | 0 |
| k. 1096 to 1460 days ( $3-4 \mathrm{Yrs}$ ) | 0 | 0 | 0 |
| L. 1461 to 1825 days ( 4.5 Yrs ) | 0 | 0 | 0 |
| m. More than 1825 days ( $>5$ 5ris) | 0 | 0 | 0 |
| ar. Data Not Collected | 0 | 0 | 0 |
| a. Total | 254 | 213 | 41 |

Q22c: RRH/PSH Length of Time between Project Start Date and Housing Move-in Date

|  | Total | a. Without chlldren | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 6. 7 days or lees | 0 | 0 | 0 | 0 | 0 |
| b, 8 to 14 days | 0 | 0 | 0 | 0 | 0 |
| c. 15 to 21 days | 0 | 0 | 0 | 0 | 0 |
| d. 22 to 30 days | 0 | 0 | 0 | 0 | 0 |
| e. 31 to 60 days | 0 | 0 | 0 | 0 | 0 |
| f. 61 to 180 days | 0 | 0 | 0 | 0 | 0 |
| 9. 181 to 365 days | 0 | 0 | 0 | 0 | 0 |
| h. 366 to 730 days ( $1-2 \mathrm{Y}$ (s) | 0 | 0 | 0 | 0 | 0 |
| Total (persons moved into housing) | 0 | 0 | 0 | 0 | 0 |
| Average length of time to housing | 0 | 0 | 0 | 0 | 0 |
| Persons who were exited without moveIn | 0 | 0 | 0 | 0 | 0 |
| I. Total | 0 | 0 | 0 | 0 | 0 |

Q22d: Length of Participation by Household Type

|  | Total | Without Children. | With children and Adult | With Only Children | Unknown Household Type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 3.0 to 7 days | 58 | 34 | 24 | 0 | 0 |
| b, 8 to 14 days | 25 | 12 | 13 | 0 | 0 |
| c. 15 to 21 days | 17 | 7 | 10 | 0 | 0 |
|  | 15 | 8 | 7 | 0 | 0 |
| c. 31 to 60 days | 51 | 30 | 21 | 0 | 0 |
| f. 61 to 90 days | 24 | 13 | 11 | 0 | 0 |
| 9. 91 to 180 days | 48 | 22 | 26 | 0 | 0 |
| h. 181 to 365 days | 16 | 5 | 11 | 0 | 0 |
| 1, 366 to 730 days ( $1-2 \mathrm{Y}_{\mathrm{rs}}$ ) | 0 | 0 | 0 | 0 | 0 |
| J. 731 to 1095 days ( $2-3 \mathrm{Yrs}$ ) | 0 | 0 | 0 | 0 | 0 |
| k. 1096 to 1460 days ( $3-4$ Yrs) | 0 | 0 | 0 | 0 | 0 |
| 1. 1461 to 1825 days (4-5 Yrs) | 0 | 0 | 0 | 0 | 0 |
| mi. More than 2825 days ( $>5 \mathrm{Yrs}$ ) | 0 | 0 | 0 | 0 | 0 |
| n. Data Not Collected | 0 | 0 | 0 | 0 | 0 |
| 0. Total | 254 | 131 | 123 | 0 | 0 |

Q23a: Exit Destination - More Than 90 Days

|  | Total | a. Without childran | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Permanent destinations |  |  |  |  |  |
| a01. Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| a02. Owned by client, no ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| a03. Owned by client, with ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| a04, Rental by client, no ongoing subsidy | 6 | 4 | 2 | 0 | 0 |
| a05. Rental by client, VASH subsidy | 0 | 0 | 0 | 0 | 0 |
| a06. Rental by client, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| a07. Rental by cilent, other ongoing subsidy | 18 | 3 | 15 | 0 | 0 |
| a08. Permanant housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| a09. Staying or living with family, permanent tenure | 2 | 0 | 2 | 0 | 0 |
| a20. Staying or living with friends, permanent tenure | 0 | 0 | 0 | 0 | 0 |
| 311, Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |
| az. Total | 26 | 7 | 19 | 0 | 0 |
| b. Temporary destinations |  |  |  |  |  |
| b1. Emergency shelter | 10 | 6 | 4 | 0 | 0 |
| b2. Moved from one HOPWA funded project to HORWA TH | 0 | 0 | 0 | 0 | 0 |
| 63. Transitional housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| b4, Staying with family, temporary tenure | 4 | 2 | 2 | 0 | 0 |
| b5. Staying with frienids, temporary tenure | 4 | 3 | 1 | 0 | 0 |
| b6. Place not meant for human habitation | 4 | 2 | 2 | 0 | 0 |
| 67. Safe Haven | 0 | 0 | 0 | 0 | 0 |
| 68. Hotel or motel paid by cllent | 0 | 0 | 0 | 0 | 0 |
| bx. Total | 22 | 13 | 9 | 0 | 0 |
| c. Institutional settings |  |  |  |  |  |
| c1. Foster care home or group foster care home | 0 | 0 | 0 | 0 | 0 |
| c2. Psychlatric hospital or other psychlatric facility | 0 | 0 | 0 | 0 | 0 |
| c3. Substance abuse treatment facility or detox center | 1 | 1 | 0 | 0 | 0 |
| C4. Hospital or other residential nonpsychiatric medical facility | 0 | 0 | 0 | 0 | 0 |
| c5. Jail, prison or fuvenile detention facility | 1 | 1 | 0 | 0 | 0 |
| c6. Long term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| cz. Total | 2 | 2 | 0 | 0 | 0 |
| d. Other destinations |  |  |  |  |  |
| d1. Residential project or halfway house with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| d2. Deceased | 0 | 0 | 0 | 0 | 0 |
| d3, Other | 0 | 0 | 0 | 0 | 0 |
| d4. Client doesn't know/Clent refused | 0 | 0 | 0 | 0 | 0 |
| d5. Data not collected (no edit interview completed) | 0 | 0 | 0 | 0 | 0 |
| dx. Total | 0 | 0 | 0 | 0 | 10 |


| e Total | 50 | 22 | 28 | 0 | 0 |
| :--- | :--- | :--- | :--- | :--- | :--- |
| A1. Total persons eviting to positive <br> housing destinations | 26 | 7 | 19 | 0 | 0 |
| R. Total persons whose destunations <br> eccluded them from the calculation | 0 | 0 | 0 | 0 | 0 |
| F3. Percentage | $52.00 \%$ | $31.82 \%$ | $67.86 \%$ | $0.00 \%$ | $0.00 \%$ |

Q23b: Exit Destination - 90 Days or less

|  | Toul | 3. Without children | b. Whth children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Permanent destinations |  |  |  |  |  |
| a01. Moved from one HOPWA funded project to HOPWA PH | 0 | 0 | 0 | 0 | 0 |
| a02. Owned by client, no angoing subsidy | 2 | 2 | 0 | 0 | 0 |
| a03. Owned by client with ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| 304. Rental by cifent, no ongoing subsidy | 17 | 9 | 8 | 0 | 0 |
| a05. Rental by cllent, VASH subsidy | 0 | 0 | 0 | 0 | 0 |
| a06. Rental by client, with GPD IIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| 307. Rental by client; other ongoing subsidy | 19 | 3 | 16 | 0 | 0 |
| a08, Permanent housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| a.09. Staying or living with family, permanent tenure | 10 | 7 | 3 | 0 | 0 |
| a10, Staying or Ilving with friends, permanent tenure | 1 | 1 | 0 | 0 | 0 |
| a11. Rental by cllent, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |
| az. Total | 49 | 22 | 27 | 0 | 0 |
| b, Temporary destinations |  |  |  |  |  |
| b1. Emergency shelter: | 14 | 13 | 1 | 0 | 0 |
| b2. Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| b3. Transitional housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| b4. Staying with family, temporary tenure | 49 | 23 | 26 | 0 | 0 |
| b5. Staying with friends, temporary tenure | 6 | 6 | 0 | 0 | 0 |
| 66. Place not meint for human habitation | 30 | 19 | 11 | 0 | 0 |
| b7. Safe Haven | 0 | 0 | 0 | 0 | 0 |
| 68. Hotel or motel paid by cllent | 2 | 0 | 2 | 0 | 0 |
| bz. Total | 101 | 61 | 40 | 0 | 0 |
| c. Institutional settings |  |  |  |  |  |
| c1. Foster care home or group foster care home | 5 | 0 | 5 | 0 | 0 |
| c2. Pyychintric hospltal or other psychiatric facilly | 1 | 1 | 0 | 0 | 0 |
| C3. Substance abuse treatment facility or detox center | 0 | 0 | 0 | 0 | 0 |
| c4. Hospital or other residential nonpsychiatric medical facility | 1 | 1 | 0 | 0 | 0 |
| c5. Jail, prison or juvenile detention facilly | 1 | 1 | 0 | 0 | 0 |
| c6. Long term care facility or nursing home | 0 | 0 | 0 | 0 | 0 |
| cz. Total | 8 | 3 | 5 | 0 | 0 |
| d. Other destinations |  |  |  |  |  |
| d1. Residential project or halfway house with no homeless citteria | 0 | 0 | 0 | 0 | 0 |
| d2. Deceased | 0 | 0 | 0 | 0 | 0 |
| d3. Other | 5 | 5 | 0 | 0 | 0 |
| d4. Client doesn't know/Client rafused | 0 | 0 | 0 | 0 | 0 |
| d5. Data not collected (no exit intervlew completed) | 0 | 0 | 0 | 0 | 0 |
| dz. Total | 5 | 5 | 0 | 0 | 0 |


| A. Total | 163 | 91 | 72 | 0 | 0 |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 12. Total persons exiting to positive <br> housting destinatlons | 49 | 22 | 27 | 0 | 0 |
| 12. Total persons whose destrnations <br> excluded them from the calculation | 6 | 1 | 5 | 0 | 0 |
| 13. Percentage | $31.21 \%$ | $24.44 \%$ | $40.30 \%$ | $0.00 \%$ |  |

## Q23c: Exit Destination - All Persons

|  | Total | a. Without children | b. With children and adults | c. With only children | d. Unknown household type |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a. Permanent destinations |  |  |  |  |  |
| a01. Moved from one HOPWA funded project to KOPWA PH | 0 | 0 | 0 | 0 | 0 |
| 302. Owned by client, no ongolng subsidy | 2 | 2 | 0 | 0 | 0 |
| a03. Owned by client, with ongoing subsidy | 0 | 0 | 0 | 0 | 0 |
| a04. Rental by cllent, no ongoling subsidy | 23 | 13 | 10 | 0 | 0 |
| a05, Rental by client, VASH subsidy | 0 | 0 | 0 | 0 | 0 |
| 306. Rental by cllent, with GPD TIP housing subsidy | 0 | 0 | 0 | 0 | 0 |
| a07. Rental by client, other ongoing subsidy | 37 | 6 | 31 | 0 | 0 |
| 308, Permanent housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| a09. Strying or living with family, permanent tenure | 12 | 7 | 5 | 0 | 0 |
| a10. Staying or living with friends, permanent tenure | 1 | 1 | 0 | 0 | 0 |
| a11, Rental by client, with RRH or equivalent subsidy | 0 | 0 | 0 | 0 | 0 |
| az. Total | 75 | 29 | 46 | 0 | 0 |
| b. Temporary destinations |  |  |  |  |  |
| b1. Emergency shelter | 24 | 19 | 5 | 0 | 0 |
| b2. Moved from one HOPWA funded project to HOPWA TH | 0 | 0 | 0 | 0 | 0 |
| D3. Iransitionat housing for homeless persons | 0 | 0 | 0 | 0 | 0 |
| B4. Staying with family, temporary tenure | 53 | 25 | 28 | 0 | 0 |
| b5, Stayling with friends, temporary tenure | 10 | 9 | 1 | 0 | 0 |
| b6. Place not meant for human frabitation | 34 | 21 | 13 | 0 | 0 |
| b7. Safe Haven | 0 | 0 | 0 | 0 | 0 |
| 68. Hotel or motel pald by client | 2 | 0 | 2 | 0 | 0 |
| bz. Total | 123 | 74 | 49 | 0 | 0 |
| c. Institutional settings |  |  |  |  |  |
| c1. Foster care home or group foster care home | 5 | 0 | 5 | 0 | 0 |
| C2. Psychiatric hospital or other psychiatric facility | 1 | 1 | 0 | 0 | 0 |
| c3. Substance abuse frentment facility or detox center | 1 | 1 | 0 | 0 | 0 |
| C4. Hospital or other residential nonpsychiatric medical facllity | 1 | 1 | 0 | 0 | 0 |
| c5. Jail, prison or juvenile detention facility | 2 | 2 | 0 | 0 | 0 |
| c6. Long term care facillty or nursing home | 0 | 0 | 0 | 0 | 0 |
| cz. Total | 10 | 5 | 5 | 0 | 0 |
| d. Other destinations |  |  |  |  |  |
| d1. Residential project or halfway house. with no homeless criteria | 0 | 0 | 0 | 0 | 0 |
| d2. Decessed | 0 | 0 | 0 | 0 | 0 |
|  | 5 | 5 | 0 | 0 | 0 |
| d4. Client doeen't know/ Client refused | 0 | 0 | 0 | 0 | 0 |
| 45. Data not collected (no exit Intarviow comploted) |  | 0 | 0 | 0 | 0 |
| dz. Total |  | 5 | 0 | 0 | 0 |


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## Basic Communal Living Guidelines

For the emotional, mental, and physical safety of all residents, both young and adult, we must prohibit all alcohol and illegal drugs from the shelter. Also, we require all medications and weapons-such as guns, knives, etc.-to be turned into the front office. If you have weapons, we are happy to store them or help you determine a safe place outside of shelter for storage.

Should you struggle with substance abuse, we hope you will feel safe to inform us of your needs so we can support your sobriety goals or address your needs to use safely. We are not here to judge or make your life decisions; however, substance use can affect the community. We hope you will honor keeping all illegal substances out of the shelter.

For safety reasons, please keep all windows closed and locked. Please exit the building through the front lobby doors or the dining hall doors. Use the sign in and out $\log$ so we know whether you and your children are in the building in cases of emergency.

We know that keeping up with your "littles" can be really difficult in a large facility with long hallways and big outdoor spaces. Please know that you are responsible for supervising your children. Typically many adults are around to assist you, but you may get called to come and find your little occasionally should they escape you. Although lots of eyes are around, the only reliable eyes are yours.

Because many children have been exposed to physical violence we ask you to refrain from using physical violence or harsh verbal language in order to protect the trauma of your, as well as other, children that reside in shelter.

One of most controversial issues in shelter has historically been around chores. All people have their own threshold for cleanliness. As a courtesy please pick up after yourself, wash your own dishes, and take an extra minute to pick up toys or anything you see out of place. This is your home; however, your home is full of guests so taking extra steps goes a long way. A chore schedule is posted on the front office door weekly. Most chores take 30 minutes or less (much less time than cleaning your own home). You are responsible for your chore, bedroom, and for helping to keep the shelter clean.

We ask that you try to return to shelter on the last shuttle or by 9 pm every evening. On the rare occasion you may be running late, work late, or have an emergency occur, we ask that you call us and let us know you are safe but your plans have changed. If you do not call us by 9 pm we will be reaching out to your emergency contacts to make sure you are safe and well. If we are unable to reach you by 9 pm the following day we will depart you from the program. We will bag up and hold your belongings for two weeks, after which they will be donated to Goodwill.

If you are departed please know you can call us anytime, be reassessed for shelter or receive all of our non-residential support and services.

Although most folks that live here are very honest, occasionally we have had personal items turn up missing. We are not responsible for your personal items; however, we provide lockers and locks for money and other valuables you would like to protect. Please see an advocate for padlocks and locker assignment and return the padlock when you depart from shelter so that we may have for future residents.

To you beautiful smokers, the back porch smoking area is the primary place to smoke. We know that we are on 40 acres but we ask that you refrain from smoking on the front porch, use cigarette disposal towers, and that you please, please do not use mother earth as an ash tray. Smoking is allowed on the back porch 24/7 but please note that if an advocate feels there is a safety concern, residents will be directed to be in the building until the safety issue is resolved.

Another controversial issue often stems around how mothers parent their children. Try to remember that everyone has a story, background, and life experiences that impact how we parent. Try not to assume the worst, instead help a struggling mom keep up. It is not easy to keep up when one is exhausted themselves from trauma. Help one another. Children can use a village!! If concerns rise to the belief that maybe a child is being hurt, please report to staff for appropriate steps. The villagers must help, support, not judge, make allowances for trauma, and protect all at the same time. We are always available to help with concerns.

## *Quiet Time for all Residents and Children is 9 pm *

## IV. Program Policy Issues

## Eligibility

## A. Premise:

This policy assures equal provision of services to domestic violence clients and their dependents. Each domestic violence shelter shall assure that services are available to clients in the area development district in which the agency is located and shall accept referrals on a statewide basis if adequate capacity is available. Each domestic violence shelter shall cooperate with other domestic violence agencies on a statewide basis and may provide services to a client of another area development district in an emergency situation such as a temporary closure due to extreme weather or loss of power to utilities for example.

## B. Criteria:

1. Persons eligible for the services of domestic violence programs include domestic violence victims and their legal dependents. Programs provide services to adults, emancipated minors, or minors seeking services for themselves who have a parent's, de facto custodian's or a guardian's permission to receive services. In addition, persons seeking services must:

- Willingly agree to abide by program guidelines; and
- Have the ability to take primary care of themselves and their dependents within a communal living facility.

2. Programs provide services (within the above guidelines) regardless of race, religion, color, national origin, gender, age, mental or physical disability, sexual orientation, citizenship, immigration status, marital status, or language spoken.
3. Programs provide services to eligible male victims. This may be done through collaboration with other organizations. Each program shall maintain a written policy committing to providing services to eligible male victims and develop protocols outlining the location(s) and methods by which shelter, advocacy/counseling, and other services are delivered to male victims needing services.

- No minor dependent males or females with their parent or guardian are denied access to services.


## C. Special Needs and Circumstances:

1. Alcohol or drug abuse and addictions: Domestic violence programs shall not withhold services to persons who use alcohol or drugs offsite, solely based on the use of alcohol or substances. Programs shall provide a written policy demonstrating how repetitive substance/alcohol use, or the demonstration of behaviors incongruent with community living, may affect continued stay in shelter or limit services available to the resident. Programs are prohibited from drug testing residents requesting shelter or living in shelter.
2. In cases where clients require assisted living, eligibility is not withheld, but residential services may be made available through coordinated efforts between domestic violence program staff and other identified service providers.

## D. Length of Stay:

1. Programs offer temporary shelter in a safe, secure facility. Clients are informed of any criteria that may impact or shorten this stay.
2. Once safety issues are resolved, length of stay is determined by the client's progress toward meeting self-identified goals.
3. Length of stay shall not be pre-determined (e.g. a " 30 day stay"); however, a program utilizing phases or stages within its emergency shelter, may provide information to a client on the average time spent within each phase/stage with the understanding that the information is designed to help the client know what to expect as she moves forward in meeting her self-identified goals.
4. Reasons for limiting length of stay are documented in the case file and shared with the client in sufficient time for her to make other safe arrangements.

## E. Repetitive Admissions:

1. Programs do not discriminate against a client by limiting the number of times of reentry or by requiring a time limit between re-entry. Programs do not maintain a "no readmit" list.

## Emergency Shelter

Temporary lodging in a safe, secure facility for victims and their children. Situations may arise that require the placement of clients in alternative lodging.

## A. Premise:

The volatile nature of intimate partner violence makes it imperative that victims have immediate access to a secure environment free from physical, emotional, and verbal abuse. Domestic violence programs provide an opportunity for victims and their children to gain information about the dynamics of domestic violence, explore their options in a violence-free atmosphere, and break the isolation and silence that accompanies an abusive relationship.

## B. Criteria:

1. Domestic violence programs provide access, admittance and residence in temporary shelters for victims of domestic violence and their children free of charge, 24 hours a day, every day of the year.
2. On-site staff coverage is provided 24 hours a day, 7 days a week.
3. The first priority of the staff is to be responsive and accessible to a resident or crisis line caller.
4. Each domestic violence program shall establish a protocol ensuring that adequate staff is available during emergencies. A supervisor or designee shall be available in some manner of contact that allows for immediate response.
5. Each client has access to:

- An emergency shelter that is structurally safe and accommodates the particular security concerns of domestic violence victims.
- Emergency food, clothing, and hygiene items free of charge to clients and their dependent children. When medical services are needed the program helps clients access services.

6. Domestic violence shelters ensure that staff members:

# Green House17 

Nurturing lives
harmed by intimate partner abuse.

## ATTACHMENT 5.1.5

## Other Shelter Funding Sources

A. KENTUCKY COALITION AGAINST DOMESTIC VIOLENCE (KCADV) - Subcontract received as state-designated primary domestic violence service provider in the Bluegrass Area Development District. Includes state support from the Kentucky General Fund and Kentucky Trust \& Agency, as well as U.S. Department of Health and Human Services funding received via the Family Violence Prevention \& Services Act (FVPSA) and Temporary Assistance for Needy Families (TANF).
B. VICTIMS OF CRIME ACT (VOCA) - Federal pass-thru funding received via annual competitive application to the Kentucky Justice and Public Safety Cabinet to support shelter personnel, travel, and operation.
C. VIOLENCE AGAINST WOMEN ACT (VAWA) STOP Formula Grant - Federal passthru funding received via annual competitive application to the Kentucky Justice and Public Safety Cabinet to support legal services for victims living in emergency shelter.
D. OFFICE OF VIOLENCE AGAINST WOMEN (OVW) TRANSTIONAL HOUSING FOR VICTIMS OF DOMESTIC VIOLENCE GRANT - Federal funding to support delivery of supportive housing service for victims of domestic violence.
E. EMERGENCY SOLUTIONS GRANT (ESG) - Shelter Component - Federal pass-thru funding received via annual competitive application to LFUCG Special Grants and Programs Office to support shelter operations.
F. UNITED WAY OF THE BLUEGRASS - Funding supports shelter operations and integration of innovative nature-based healing programming with traditional services for victims of domestic violence.
G. HEART OF KENTUCKY UNITED WAY - Funding supports shelter operations.
H. BEREA COLLEGE APPLACHIAN FUND - Funding supports shelter operations.
I. FARM SOCIAL ENTERPRISE - Funding generated from sales of value-added products from the farm on the property that surrounds the emergency shelter supports nature-based healing and stability services, as well as a portion of shelter operations.
J. DONATIONS AND FUNDRAISING - Funding received from individuals, corporations, faith groups, foundations, and special events supports shelter personnel and operations.
K. IN-KIND DONATIONS - Estimated market value of non-perishable food and hygiene supplies collected during annual statewide donation drive for domestic violence shelters.


[^0]:    ${ }^{1}$ Exception is made for shelters serving survivors of intimate partner abuse which must instead utilize a separate but equivalent system as directed by HUD.
    ${ }^{2}$ Typically $2-3$ weeks to see if homelessness can self-resolve but some discretion is allowed. Guests may refuse the assessment and/or refuse to have their information entered into HMIS.

