

2016 Iowa Balance of State Continuum of Care (CoC)
New Project Narrative
For New Projects and Voluntary Reallocation New Projects

Points possible: 100

Please be concise. Narrative responses should generally be limited to 1,000 characters or less. If selected to submit in E-snaps, the following questions mirror many of the questions in E-snaps. The E-snaps system has character limits for all fields, some of which may be different from 1,000 characters, but this provides a rough estimate.

NOTE ANY APPEALS of SCORING Are due to the Appeals committee or Amber Lewis by 4pm on August 30th

Name of Agency: Catherine McAuley Center

Name of Project: Catherine McAuley Center Permanent Supportive Housing
(must match with Letter of Intent submitted by July 22, 2016)

AGENCY SUMMARY (1 point)

- 1) **Provide a brief introduction to the agency.** *Include how this particular project fits within the overall agency.*

The Catherine McAuley Center (CMC), founded in 1989, offers hope and opportunity through basic education for adults and supportive housing for women. CMC currently operates an adult basic education program for more than 400 adults learning English as a Second Language and basic academic skills, and a transitional housing program for unaccompanied women experiencing homelessness. The introduction of Permanent Supportive Housing at CMC is a natural extension of the quality supportive housing services that CMC has provided since its founding. In recent years, CMC has seen a notable increase in the level of needs and barriers among its Transitional Housing Program client population, many of whom have been eligible and would benefit from Permanent Supportive Housing in order to maintain long-term housing and mental health stability. CMC is well-positioned and qualified to respond to this need, as well as the community's need for greater availability of permanent supportive housing, through the introduction of 7 units of Permanent Supportive Housing at CMC.

PROJECT SUMMARY (2 points)

- 2) **Provide a brief summary of the proposed project.** *The summary will serve as a guide to orient reviewers to the project. If seeking a voluntary reallocation of an existing renewal project, explain this.*

The goal of this project is to offer safe, permanent supportive housing for unaccompanied, chronically homeless women over the age of 18. The Catherine McAuley Center will convert seven of its existing Transitional Housing units into

Permanent Supportive Housing for unaccompanied women. Eligibility for the program will coincide with the Balance of State Continuum of Care prioritization list, prioritizing based on scores on the VI-SPDAT assessment, women who are veterans, and those that meet HUD's Category 1 definition of homelessness.

The program will offer safe housing, individualized case management, staff and peer support, and assistance connecting women to community support services. The program will use a female-responsive and trauma-informed model to offer women the best possible opportunity to successfully maintain stable housing.

PROJECT TYPE (2 points)

PERMANENT SUPPORTIVE HOUSING **check here**

RAPID REHOUSING **check here**

3) Units/beds: (1 point)

a. Total units: Includes all of the units in the project, regardless of size:

This project will offer seven individual units of permanent supportive housing for unaccompanied women in a Shared Housing arrangement.

b. Total Beds. Includes all of the beds in the project, regardless of unit configuration:

The project will offer seven beds.

4) Housing type: (1 point)

The project will offer seven private individual bedrooms in a Shared Housing arrangement, located in one 3-story home. Common space will include a shared kitchen, bathrooms, and common areas for socializing.

- a. **Barracks:** Individuals and/or families sleep in a large room with multiple beds. Also includes large shelters which are traditionally used in the Emergency Solutions Grants Program.
- b. **Dormitory, shared or private rooms:** Individuals and/or families share sleeping rooms or have private rooms; persons share a common kitchen, common bathrooms, or both.
- c. **Shared housing:** Shared housing is defined as an arrangement in which two or more unrelated people share a house or an apartment. Each unit must contain private space for each assisted household, plus common space for shared use by the residents of the unit. Common space must be appropriate for shared use by the residents and private space must contain at least one bedroom for each two persons in the family. A zero or one bedroom unit may not be used for shared housing.
- d. **Clustered apartments:** Each individual or family has a self-contained housing unit located within a building or complex that houses both (1) persons with special

needs—e.g., homeless or formerly homeless persons, persons with substance abuse problems persons with mental illness, or persons with AIDS/HIV—and (2) persons without any special needs.

- e. **Scattered-site apartments (including efficiencies):** Each individual or family has a self-contained apartment. Apartments are scattered throughout the community.
- f. **Single family homes/townhouses/duplexes:** Each individual or family has a self-contained, single family home/townhouse/duplex that is dispersed throughout the community.

AGENCY EXPERIENCE (20 points)

- 5) **Describe the experience of the agency in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.** *Describe why the applicant, subrecipients, and partner organizations (e.g., developers, key contractors, subcontractors, service providers) are the appropriate entities to receive funding. (For housing projects) Provide concrete examples that illustrate their experience and expertise in the following: 1) working with and addressing the target population's identified housing and supportive service needs; 2) developing and implementing relevant program systems, services, and/or residential property construction and rehabilitation; 3) identifying and securing matching funds from a variety of sources; and 4) managing basic organization operations including financial accounting systems. (10 points)*

- 1) CMC has provided supportive Transitional Housing (TH) services to unaccompanied women for over 25 years. CMC participates in the Linn County/Balance of State Continuums of Care and follows their guidelines for assessment and prioritization of residents. Women entering the TH Program have multiple barriers to housing, and many of CMC's past and present clients have been/would be eligible for permanent supportive housing. CMC's TH Program provides safe housing, individualized case management, and a wide variety of educational and supportive services to women to enable them to regain stability and transition into permanent housing. Throughout its history, the program has worked in close coordination with community service providers to connect women to the services needed to support their individual needs. The program's manager, Jennifer Tibbetts, has over 17 years of experience working with homeless women, and two of the program's three full-time staff members hold Masters of Social Work degrees.
- 2) CMC has substantial experience in developing and implementing supportive housing programming for unaccompanied homeless women. Throughout its history, CMC's Transitional Housing Program has evolved to meet changing community and client needs, including the implementation of best practices in female-responsive programming, the adoption of the Rural Arizona Self-Sufficiency Matrix assessment tool, the introduction of a Support Services Coordinator, and the formalization of a resident volunteer program. CMC owns and operates three residential facilities, which have been continuously maintained and renovated. With funds from CDBG and the Housing Fund for Linn County, CMC has completed major renovation projects,

- including renovation of residential kitchens and bathrooms, replacement of flooring and installation of central air conditioning. CMC also effectively leverages community and volunteer support to complete painting, landscaping and general house maintenance projects, in order to provide safe, hospitable housing for women.
- 3) CMC relies on a diversity of funding sources to support and strengthen its programs and operations, without relying too heavily on any one source of income. In the most recently completed fiscal year, CMC received approximately 23% of its revenue from the United Way, 22% from individual contributions, 8% from special events and sponsorships, 42% from grants, 4% from endowment revenue, and 2% from program fees. CMC employs a full-time Development & Communications Manager and a part-time Grants Manager to ensure that CMC continues to identify, develop, and secure funds from a variety of sources, including matching funds for this project. CMC has received federal funding through the Emergency Solutions Program nearly every year since 1995, and has demonstrated sound fiscal and program management in accordance with grant requirements.
 - 4) CMC employs an effective and strategic staff model to ensure quality operations within the organization. Procedures and systems are well-documented, and training provided to applicable staff. The organization utilizes a QuickBooks financial accounting system, managed by the organization's Finance Manager, and follows documented procedures and controls to ensure financial integrity and transparency. CMC's Finance Committee reviews all financial reports to ensure accuracy, and provides financial reports to the Board of Directors. An independent financial audit is conducted annually, and CMC has consistently received positive findings.
- 6) **Describe the experience of the agency in leveraging other federal, state, local, and private sector funds. Include experience with leveraging all Federal, State, local and private sector funds. (5 points)**
- As previously mentioned, the Catherine McAuley Center has been a recipient of the Emergency Solutions Grant nearly every year since 1995. In addition, CMC has successfully leveraged other state, local and private sector funds, including funding through the Victim Services Support Program (2016), Community Development Block Grant Program (multiple years), City of Cedar Rapids Civil Rights Commission (2015), and a wide variety of private sector funding sources. In the most recently completed fiscal year, CMC was awarded grant funding from more than two dozen unique funders, as well as 20 corporate sponsors and over 650 individual donors.
- 7) **Describe the basic organization and management structure of the agency. Include evidence of internal and external coordination and an adequate financial accounting system. Include the organization and management structure of the applicant and all subrecipients; be sure to include a description of internal and external coordination and the financial accounting system that will be used to administer the grant. (5 points)**

CMC's 21-member Board of Directors meets bi-monthly and oversees programs and operations. Committees provide expertise and guidance in various areas of operations,

including finances, human resources, facilities, fundraising, and program development.

Led by Executive Director, Paula Land, CMC's staff members represent specific functions within Administration, Housing, and Education departments. Monthly staff meetings offer training and facilitate internal coordination. Housing Program staff meet weekly to assess individual client progress and needs, discuss coordination, and develop programming. Internal coordination is also facilitated by a unified data management system, email communication, and established organization systems and procedures.

CMC's Finance Manager uses QuickBooks accounting software to manage the organization's finances, which are reviewed by the Finance Committee and Board. A documented system of internal controls and procedures ensures that CMC follows best practices in financial management.

In addition to participation in the Linn County Continuum of Care and other community groups, CMC coordinates services with various partners and service providers, including mainstream service providers in healthcare, mental health care, employment services, basic needs assistance, and other areas of need.

PROJECT DETAIL (26 points)

8) Describe the scope of the project. (10 Points)

a. Describe the target population(s) to be served (*Be specific*) (2 Points)

This project will serve unaccompanied, chronically homeless women over the age of 18. Eligibility for the program will coincide with the Balance of State Continuum of Care prioritization list, prioritizing based on VI-SPDAT assessment scores, women who are veterans, and those who meet both HUD's Category 1 definition of homelessness and HUD's definition of Chronically Homeless.

b. Describe the project community/service area including a clear and concise description existing housing needs including a list of other currently funded ESG/COC projects in the project's service area (2 Points)

This project will serve the greater Cedar Rapids area, which lacks sufficient permanent supportive housing. While the community has multiple services for those with few barriers to housing, the biggest gap in services is for individuals with multiple barriers to stability and permanent housing. There are no other permanent supportive housing programs in the area specifically for unaccompanied women. Services offered by other ESG/COC-funded providers include Emergency Shelter, offered by Waypoint Services and the Willis Dady Emergency Shelter, and Rapid Rehousing, offered by Waypoint Services.

CMC is acutely aware of the need for permanent supportive housing in the community through its active participation in the local Continuum of Care and other collaborations, the Point in Time count, and through its extensive experience

working with homeless women. CMC has encountered significant challenges in finding safe, appropriate housing for women completing the CMC Transitional Housing Program, especially housing that can offer the level of consistent support many women need to maintain ongoing stability.

- c. Describe how the project will work in coordination with other funding sources and other mainstream and homelessness provider's partners **(2 Points)**

CMC actively participates in the Linn County Continuum of Care, and participates in the Coordinated Entry system. The Coordinated Entry system uses the VI-SPDAT assessment tool to identify individuals who will be best served through CMC's programs, which will include the proposed project. Women meeting basic eligibility will then be referred to CMC through the HMIS electronic referral system. Staff will further assess client needs to determine whether they are best served through CMC's Transitional Housing Program or Permanent Supportive Housing Program.

In its initial year, the project will primarily be funded through this Continuum of Care grant, with a 25% match from individual and organizational contributions.

- d. Please provide the project plan for addressing the identified housing and supportive service needs. **(2 Points)**

The project will address the identified housing and supportive service needs by providing seven beds of safe, permanent housing for unaccompanied, chronically homeless women over the age of 18. The program will offer a shared living environment with individual bedrooms, and will provide staff support through case management and connection with community services for women's various needs, such as medical care, mental health services, medication management, etc. In addition to consistent, ongoing staff support, a trained peer leader will live in the 3rd-story apartment in the house and provide ongoing leadership and support for women in the program. This peer leader will offer support in building community within the house, guiding the development of shared decision-making, and helping create a living environment that will contribute to residents' ongoing stability and wellbeing. Participation in services will be voluntary for all residents.

- e. Please describe how these projected project outcome(s) will enhance the COC system wide performance outcomes (These performance measures track the average length of homeless episodes, rates of return **(2 Points)**)

By providing permanent supportive housing for up to seven women at a time, this project will contribute to a reduction in the rate that individuals return to homelessness, and a reduction in the community's overall average length of

homeless episodes. CMC estimates that 70% of the residents participating in the program will remain housed within the first year (determined on final day of the grant period). The program will also contribute to a reduction in the usage of Transitional Housing for women who would be most successful in a permanent supportive housing environment with consistent ongoing support. This will allow the Transitional Housing Program to better serve clients well-suited for Transitional Housing and guide them to the appropriate permanent housing option for them. This will promote effective use of services and further reduce the length of time that women remain in emergency or transitional housing.

9) **Describe the estimated schedule for the proposed activities, the management plan, and the method for assuring effective and timely completion of all work.**

Demonstrate how full capacity will be achieved over the term requested in this application. Keep in mind, in order to expend funds within statutorily required deadlines, NOTE: all RRH project must begin rental assistance within the first 10 months of award for full points (5 points)

The Catherine McAuley Center is already a participant in the Coordinated Entry System and ServicePoint HMIS systems, and operates a well-established housing program. CMC is also already well-connected to other service providers in the community. The house and units to be converted into permanent housing are already designed and furnished for residents. All of these factors will facilitate a much smoother and quicker establishment of CMC's new Permanent Supportive Housing program. The following outlines the projected timeline:

Q1: CMC will develop and finalize the program's management plan, and will recruit, hire, and train a Case Manager to assist with the program.

Q2: Initial residents will be accepted into the program, with full program operations and services.

Q3: CMC will assess program successes and challenges and make necessary modifications.

Q4: CMC will evaluate the program's effectiveness in the first year and plan ahead for the following program year.

10) **Housing First.** *The Housing First model is an approach to: 1) quickly and successfully connect individuals and families experiencing homelessness to permanent supportive housing 2) without barriers to entry, such as sobriety, treatment or service participation requirements or 3) related preconditions that might lead to the program participant's termination from the program. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry. Review Sections II.A.6. and VII.A.1.h. of the FY 2015 CoC Program Competition NOFA and the Housing First in PSH brief at www.hudexchange.info/resource/3892/housing-first-in-permanent-supportive-housing-brief/ for more information. (11 points)*

(a) Has the project removed the following barriers to accessing housing and services? Check the box next to each item to confirm that the project has removed (or never had) barriers to program access related to each of the following (select all that apply):

- ✓ Having too little or no income (all projects should check this; the Iowa Council on Homelessness voted in 2015 to prohibit CoC-funded projects from screening applicants out due to too little or no income); (1 point)
- ✓ Active or history of substance abuse; (1 point)
- ✓ Having a criminal record with exceptions for state-mandated restrictions; (1 point)
- ✓ Fleeing domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement). (1 point)

(b) Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply. Please also attach a copy of the project's termination/appeals policy; no points may be awarded in this section if the policy is not included, or if the policy includes contradictory information.

- ✓ Failure to participate in supportive services; (1 point)
- ✓ Failure to make progress on a service plan; (1 point)
- ✓ Loss of income or failure to improve income; (1 point)
- ✓ Being a victim of domestic violence; (1 point) or
- ✓ Any other activity not covered in a lease agreement typically found in the project's geographic area. (1 point)

(c) Verify that the project's termination policy clearly matches with the responses above. (1 point for Yes; no point for No) Yes

(d) Verify that the project's admissions and terminations don't discriminate on the basis of residency requirements. (1 point) Yes

SUPPORTIVE SERVICES FOR PARTICIPANTS (20 points)

11) For all supportive services available to participants, indicate who will provide them, how they will be accessed, and how often they will be provided: **(10 points)**

Assessment of Service Needs	Applicant	Monthly
Assistance with Moving Costs (N/A)	Non-Partner	-- select --
Case Management	Applicant	Bi-weekly
Child Care (N/A)	Non-Partner	-- select --
Education Services	Partner	Bi-weekly
Employment Assistance and Job Training	Partner	Bi-weekly
Food	Applicant	Weekly
Housing Search and Counseling Services	Applicant	Bi-weekly

Legal Services	Partner ▼	Bi-weekly ▼
Life Skills Training	Applicant ▼	Weekly ▼
Mental Health Services	Partner ▼	Bi-weekly ▼
Outpatient Health Services	Partner ▼	Bi-weekly ▼
Outreach Services	Partner ▼	Bi-weekly ▼
Substance Abuse Treatment Services	Partner ▼	Bi-weekly ▼
Transportation	Applicant ▼	Weekly ▼
Utility Deposits (N/A)	Non-Partner ▼	-- select -- ▼

12) Describe how participants will be assisted to obtain and remain in permanent

housing: *Describe plans to move program participants from the streets, other places not meant for human habitation, emergency shelters, and safe havens into PH, as well as plans to ensure that program participants stabilize in PH. A good response will acknowledge the needs of the target population and include plans to address those needs through current and proposed case management activities and the availability and accessibility of supportive services through primary health services, mental health services, educational services, employment services, life skills, and/or child care services. Good strategies should be highly population specific and will look markedly different for youth, older adults, and families. For example, youth may require a more time intensive service array including specifically tailored life skills, housing, and education programming with more points of contact with a case manager meeting them at their apartment or in youth relevant locations. Similarly, a young parents program might include parenting classes and other child care services. If program participants will be housed in units not owned by the project applicant, the narrative must also indicate how appropriate units will be identified and how the project applicant or subrecipient will ensure that rents are reasonable. Established arrangements and coordination with landlords and other homeless services providers should be detailed in the narrative. (5 points)*

As with its current Transitional Housing Program, CMC will participate in the Coordinated Entry system and follow priority guidelines established by the Balance of State Continuum of Care. Referrals will be received through the ServicePoint HMIS system and processed according to priority level and Housing First guidelines.

CMC will follow Housing First guidelines to eliminate barriers, and will offer optional participation in a wide variety of individualized, female-responsive and trauma-informed services. Based on best practices in female-responsive services, women will have the opportunity to live in a shared housing environment, reducing social isolation and encouraging the development of a supportive peer community. At the same time, women will each have their own private bedrooms, providing access to safety and privacy, which is critical for survivors of trauma. Women will be offered the opportunity to participate in individualized case management and case coordination, CMC support groups, educational workshops, presentations and events, CMC's volunteer program, and

community-based opportunities. In addition, each woman will be assisted with connecting to the individual community services and resources she needs to remain stably housed, including primary care providers for medical and mental health needs and educational services.

13) Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently:

Address the needs of the target population, the required supportive services, the availability and accessibility of those supportive services, and any coordination with other homeless services providers and mainstream systems. Describe how service delivery directly leads to program participant employment; how service delivery leads directly to program participants accessing SSI, SSDI, or other mainstream services; and how the requested funds contribute to program participants becoming more independent.

***Note:** Education plays an important role in the personal development of program participants, especially youth participants, and should be considered a strategy to maximize their ability to live independently. Youth are also unlikely to have job experience or familiarity with the workforce and government-provided supplementary income sources and so may require unique programming to meet their needs. (5 points)*

Through individualized case management services and a wide variety of educational and skill-building opportunities, residents will have access to the support services they need to live independently. CMC will offer the opportunity to residents to work with CMC staff to identify their goals and needs and develop an individualized case plan. CMC staff will assist residents with accessing SSI, SSDI or other benefits, or connecting with appropriate employment support services, such as vocational rehabilitation or job training programs. Through the Transitional Housing Program, CMC is already well-connected with community employment and education services, and is very familiar with the process of accessing benefits.

CMC will also support women's ability to increase their employment and/or income through the availability of onsite and community-based educational opportunities in employment skills, resume-writing, job search and application, interview skills, and in developing soft skills/competencies. Women will also be invited to participate in CMC's Resident Volunteer Program, which offers a structured opportunity for women to develop employment skills, build confidence, and connect with the community.

OUTREACH FOR PARTICIPANTS (4 points)

14) Enter the percentage of homeless person(s) who will be served by the proposed project for each of the following locations: Indicate the percentage of homeless persons who are (or have been) admitted from each of the listed locations. **(2 points)**

- a. Directly from the street or other locations not meant for human habitation. _____
%
- b. Directly from emergency shelters. 95%
- c. Directly from safe havens. _____%

- d. Persons fleeing domestic violence (or attempting to flee). _____%
- e. **Total of above percentages (must be 95% for full points):**
95 %

15) **Outreach** *Explain how program participants will be identified and connected with the offered housing and services below. (2 points)*

CMC participates in the Coordinated Entry System, which uses the VI-SPDAT to assess and appropriately refer those seeking housing services in Linn County. When CMC receives referrals through the HMIS Service Point system, a staff member will contact and interview each woman to further assess her needs and readiness for CMC’s Transitional or Permanent Supportive Housing programs.

The Coordinated Entry system ensures that those in highest need are appropriately directed to housing and resources, based on veteran status, category of homelessness and other factors. CMC’s proposed Permanent Supportive Housing project will help meet a critical need to provide housing and services to women with multiple barriers to housing.

By participating in the Coordinated Entry system, CMC collaborates with other agencies to ensure that eligible clients who are most in need of CMC’s services are those that receive priority assistance. Individuals that need minimal, short-term assistance to maintain housing are directed to appropriate services, while women needing ongoing supportive services are directed to CMC, where they are provided safe housing and ongoing support to maintain housing and stability.

- a. *Is there a current coordinated entry system in all or part of the project service area yes/no*

Yes

- b. *Does the project participate in Coordinated Entry? yes/no or a Domestic Violence Organization*

Yes

CONTINUUM OF CARE PARTICIPATION (10 points)

16) **Local Collaboration:** Does the agency participate in any local regional planning group? If so, what is it called and how does the agency participate? **(3 points)**

CMC’s Housing Program Manager is co-chair and an active participant in the Linn County Continuum of Care (CoC). Through Linn County’s well-developed and active CoC, 40 homeless service providers communicate, collaborate, and work cooperatively to meet the needs of the homeless population in Linn County, including emergency shelter, rapid rehousing, and essential services. Service providers in the CoC intentionally collaborate to assess needs, fill gaps in services, and avoid duplication.

The group is one of the most active in the state, and is successfully piloting the use of a Coordinated Entry system that can be used as a model for other counties in the state. The

group has successfully formed an active Point in Time Committee, which organizes two Point in Time counts each year, exceeding HUD's requirements.

- 17) Has any representative of the program been an active participant in 2016 meetings of the Iowa Council on Homelessness? *(Note that anyone can participate in council meetings even if not a voting member.)* Briefly describe. **(2 points)**

Yes, CMC's Transitional Housing Program Manager attends bi-monthly meetings of the Iowa Council on Homelessness and is eager to become a council member should a vacancy open. CMC residents are encouraged to apply for positions on the Council, including those designated for the "homeless or formerly homeless." Two former CMC residents have served as the homeless representative on this board, one of whom later applied and filled a vacancy on the Linn County Homeless Coordinating Board.

- 18) Has any representative of the program been an active participant in Iowa Council on Homelessness committees and working groups? Briefly explain. **(5 points)**

No representative of the program is currently a member of the Iowa Council on Homelessness. Therefore, a CMC representative is not currently able to participate in committees or working groups. Because of this, CMC's focus has been to participate as actively as possible at the local level until there is an opportunity to become a member of the Iowa Council on Homelessness.

BUDGET AND CAPACITY (15 points)

- 19) **Budget request:** Provide a summary budget for the proposed project. Include the amounts that will be requested in each relevant category, according to HUD's rules for the particular proposed project. Include the total budget request. Also include the amount that will be requested for Administration. **(10 points)**

PROJECT BUDGET

Supportive Services Costs

Salaries & Benefits - \$52,648 (\$39,486 requested)

Food & Transportation Assistance - \$800 (\$600 requested)

Operating Costs

Maintenance & Utilities - \$20,000 (\$15,000 requested)

Equipment & Supplies - \$1500 (\$1125 requested)

Communications - \$1000 (\$750 requested)

Furnishings - \$500 (\$375 requested)

Insurance - \$1200 (\$900 requested)

HMIS Costs

Salaries & Benefits - \$2700 (\$2025 requested)

Project Administration

10% of total (\$80,348) - \$8034 (\$6025 requested)

TOTAL: \$88,382 (\$66,286 requested)

20) **Match** Provide a summary of how the proposed project will meet the HUD matching requirement (25% for all categories except leasing) **(5 Points)**

A match of 25% for all categories (\$22,096) will be matched with unrestricted individual and organizational contributions.

BONUS:

21. Does the proposed project service area (Answer 8b.) include no other ESG/COC currently funded projects or proposes a service area in which all existing ESG/COC projects have been defunded yes/no? **(5 Points for new service area projects)**

No.

TERMINATION OF SERVICES/APPEAL POLICY

Participation in Catherine McAuley Center's Permanent Supportive Housing Program is voluntary and can be terminated by either party at any time. Termination of housing services is to be in writing and given to the recipient with a minimum of thirty (30) day notice of intent to vacate.

Reasons for Catherine McAuley Center to provide a termination of housing services notice are:

- Violent behavior directed at another CMC resident or staff
- Substance use that impedes the safety and well-being of other residents within CMC's Housing Program, based on documented concerns/incidents
- Illegal activity on CMC-owned property

If a resident does not agree with the termination of housing services notification, they are entitled to submit a letter of appeal in writing to the Housing Program Manager within three (3) business days of receipt of the termination notification. This letter of appeal will be reviewed by the Housing Program Manager and/or Executive Director within three (3) business days of receipt of the letter of appeal. The resident will receive a letter of decision based upon the review. This decision will be final and enforced.