

# 2019 Housing Opportunities for Persons With AIDS (HOPWA) Program

# Consolidated Annual Performance and Evaluation Report (CAPER) Measuring Performance Outcomes

OMB Number 2506-0133 (Expiration Date: 01/31/2021)

The CAPER report for HOPWA formula grantees provides annual information on program accomplishments that supports program evaluation and the ability to measure program beneficiary outcomes as related to: maintain housing stability; prevent homelessness; and improve access to care and support. This information is also covered under the Consolidated Plan Management Process (CPMP) report and includes Narrative Responses and Performance Charts required under the Consolidated Planning regulations. Reporting is required for all HOPWA formula grantees. The public reporting burden for the collection of information is estimated to average 41 hours per manual response, or less if an automated data collection and retrieval system is in use, along with 60 hours for record keeping, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Grantees are required to report on the activities undertaken only, thus there may be components of these reporting requirements that may not be applicable. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a valid OMB control number.

**Overview.** The Consolidated Annual Performance and Evaluation Report (CAPER) provides annual performance reporting on client outputs and outcomes that enables an assessment of grantee performance in achieving the housing stability outcome measure. The CAPER fulfills statutory and regulatory program reporting requirements and provides the grantee and HUD with the necessary information to assess the overall program performance and accomplishments against planned goals and objectives.

HOPWA formula grantees are required to submit a CAPER demonstrating coordination with other Consolidated Plan resources. HUD uses the CAPER data to obtain essential information on grant activities, project sponsors,, housing sites, units and households, and beneficiaries (which includes racial and ethnic data on program participants). The Consolidated Plan Management Process tool (CPMP) provides an optional tool to integrate the reporting of HOPWA specific activities with other planning and reporting on Consolidated Plan activities.

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Continued Use Periods. Grantees that used HOPWA funding for new construction, acquisition, or substantial rehabilitation of a building or structure are required to operate the building or structure for HOPWA-eligible beneficiaries for a ten (10) years period. If no further HOPWA funds are used to support the facility, in place of completing Section 7B of the CAPER, the grantee must submit an Annual Report of Continued Project Operation throughout the required use periods. This report is included in Part 6 in CAPER. The required use period is three (3) years if the rehabilitation is non-substantial.

Record Keeping. Names and other individual information must be kept confidential, as required by 24 CFR 574.440. However, HUD reserves the right to review the information used to complete this report for grants management oversight purposes, except for recording any names and other identifying information. In the case that HUD must review client-level data, no client names or identifying information will be retained or recorded. Information is reported in aggregate to HUD without personal identification. Do not submit client or personal information in data systems to HUD.

In connection with the development of the Department's standards for Homeless Management Information Systems (HMIS), universal data elements are being collected for clients of <a href="HOPWA-funded homeless">HOPWA-funded homeless</a> assistance projects. These project sponsor records would include: Name, Social Security Number, Date of Birth, Ethnicity and Race, Gender, Veteran Status, Disabling Conditions, Residence Prior to Program Entry, Zip Code of Last Permanent Address, Housing Status, Program Entry Date, Program Exit Date, Personal Identification Number, and Household

Identification Number. These are intended to match the elements under HMIS. The HOPWA program-level data elements include: Income and Sources, Non-Cash Benefits, HIV/AIDS Status, Services Provided, Housing Status or Destination at the end of the operating year, Physical Disability, Developmental Disability, Chronic Health Condition, Mental Health, Substance Abuse, Domestic Violence, Medical Assistance, and T-cell Count. Other HOPWA projects sponsors may also benefit from collecting these data elements. HMIS local data systems must maintain client confidentiality by using a closed system in which medical information and HIV status are only shared with providers that have a direct involvement in the client's case management, treatment and care, in line with the signed release of information from the client.

**Operating Year.** HOPWA formula grants are annually awarded for a three-year period of performance with three operating years. The information contained in this CAPER must represent a one-year period of HOPWA program operation that coincides with the grantee's program year; this is the operating year. More than one HOPWA formula grant awarded to the same grantee may be used during an operating year and the CAPER must capture all formula grant funding used during the operating year. Project sponsor accomplishment information must also coincide with the operating year this CAPER covers. Any change to the period of performance requires the approval of HUD by amendment, such as an extension for an additional operating year.

**Final Assembly of Report.** After the entire report is assembled, number each page sequentially.

Filing Requirements. Within 90 days of the completion of each program year, grantees must submit their completed CAPER to the CPD Director in the grantee's State or Local HUD Field Office, and to the HOPWA Program Office: at <a href="HOPWA@hud.gov">HOPWA@hud.gov</a>. Electronic submission to HOPWA Program office is preferred; however, if electronic submission is not possible, hard copies can be mailed to: Office of HIV/AIDS Housing, Room 7248, U.S. Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, D.C., 20410.

#### Definitions

Adjustment for Duplication: Enables the calculation of unduplicated output totals by accounting for the total number of households or units that received more than one type of HOPWA assistance in a given service category such as HOPWA Subsidy Assistance or Supportive Services. For example, if a client household received both TBRA and STRMU during the operating year, report that household in the category of HOPWA Housing Subsidy Assistance in Part 3, Chart 1, Column [1b] in the following manner:

Н	IOPWA Housing Subsidy Assistance	[1] Outputs: Number of Households
1.	Tenant-Based Rental Assistance	1
2a.	Permanent Housing Facilities: Received Operating Subsidies/Leased units	
2b.	Transitional/Short-term Facilities: Received Operating Subsidies	
3a.	Permanent Housing Facilities: Capital Development Projects placed in service during the operating year	
3b.	Transitional/Short-term Facilities: Capital Development Projects placed in service during the operating year	
4.	Short-term Rent, Mortgage, and Utility Assistance	1
5.	Adjustment for duplication (subtract)	1
6.	TOTAL Housing Subsidy Assistance (Sum of Rows 1-4 minus Row 5)	1

Administrative Costs: Costs for general management, oversight, coordination, evaluation, and reporting. By statute, grantee administrative costs are limited to 3% of total grant award, to be expended over the life of the grant. Project sponsor administrative costs are limited to 7% of the portion of the grant amount they receive.

**Beneficiary(ies):** All members of a household who received HOPWA assistance during the operating year including the one individual who qualified the household for HOPWA assistance as well as any other members of the household (with or without HIV) who benefitted from the assistance.

**Chronically Homeless Person:** An individual or family who: (i) is homeless and lives or resides individual or family who: (i) Is homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter; (ii) has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least 4 separate occasions in the last 3 years; and (iii) has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions. Additionally, the statutory definition includes as chronically homeless a person who currently lives or resides in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility, and has resided there for fewer than 90 days if such person met the other criteria for homeless prior to entering that facility. (See 42 U.S.C. 11360(2)) This does not include doubled-up or overcrowding situations.

**Disabling Condition:** Evidencing a diagnosable substance use disorder, serious mental illness, developmental disability, chronic physical illness, or disability, including the co-occurrence of two or more of these conditions. In addition, a disabling condition may limit an individual's ability to work or perform one or more activities of daily living. An HIV/AIDS diagnosis is considered a disabling condition.

Facility-Based Housing Assistance: All eligible HOPWA Housing expenditures for or associated with supporting facilities including community residences, SRO dwellings, short-term facilities, project-based rental units, master leased units, and other housing facilities approved by HUD.

**Faith-Based Organization:** Religious organizations of three types: (1) congregations; (2) national networks, which include national denominations, their social service arms (for example, Catholic Charities, Lutheran Social Services), and networks of related organizations (such as YMCA and YWCA); and (3) freestanding religious organizations, which are incorporated separately from congregations and national networks.

**Grassroots Organization:** An organization headquartered in the local community where it provides services; has a social services budget of \$300,000 or less annually, and six or fewer full-time equivalent employees. Local affiliates of national organizations are not considered "grassroots."

**HOPWA Eligible Individual:** The one (1) low-income person with HIV/AIDS who qualifies a household for HOPWA assistance. This person may be considered "Head of Household." When the CAPER asks for information on eligible individuals, report on this individual person only. Where there is more than one person with HIV/AIDS in the household, the additional PWH/A(s), would be considered a beneficiary(s).

**HOPWA Housing Information Services:** Services dedicated to helping persons living with HIV/AIDS and their families to identify, locate, and acquire housing. This may also include fair housing counseling for eligible persons who may encounter discrimination based on race, color, religion, sex, age, national origin, familial status, or handicap/disability.

**HOPWA Housing Subsidy Assistance Total:** The unduplicated number of households receiving housing subsidies (TBRA, STRMU, Permanent

Housing Placement services and Master Leasing) and/or residing in units of facilities dedicated to persons living with HIV/AIDS and their families and supported with HOPWA funds during the operating year.

Household: A single individual or a family composed of two or more persons for which household incomes are used to determine eligibility and for calculation of the resident rent payment. The term is used for collecting data on changes in income, changes in access to services, receipt of housing information services, and outcomes on achieving housing stability. Live-In Aides (see definition for Live-In Aide) and non-beneficiaries (e.g. a shared housing arrangement with a roommate) who resided in the unit are not reported on in the CAPER.

**Housing Stability:** The degree to which the HOPWA project assisted beneficiaries to remain in stable housing during the operating year. See *Part 5: Determining Housing Stability Outcomes* for definitions of stable and unstable housing situations.

In-kind Leveraged Resources: These are additional types of support provided to assist HOPWA beneficiaries such as volunteer services, materials, use of equipment and building space. The actual value of the support can be the contribution of professional services, based on customary rates for this specialized support, or actual costs contributed from other leveraged resources. In determining a rate for the contribution of volunteer time and services, use the criteria described in 2 CFR 200. The value of any donated material, equipment, building, or lease should be based on the fair market value at time of donation. Related documentation can be from recent bills of sales, advertised prices, appraisals, or other information for comparable property similarly situated.

**Leveraged Funds:** The amount of funds expended during the operating year from non-HOPWA federal, state, local, and private sources by grantees or sponsors in dedicating assistance to this client population. Leveraged funds or other assistance are used directly in or in support of HOPWA program delivery.

**Live-In Aide:** A person who resides with the HOPWA Eligible Individual and who meets the following criteria: (1) is essential to the care and wellbeing of the person; (2) is not obligated for the support of the person; and (3) would not be living in the unit except to provide the necessary supportive services. See t24 CFR 5.403 and the HOPWA Grantee Oversight Resource Guide for additional reference.

Master Leasing: Applies to a nonprofit or public agency that leases units of housing (scattered-sites or entire buildings) from a landlord, and subleases the units to homeless or low-income tenants. By assuming the tenancy burden, the agency facilitates housing of clients who may not be able to maintain a lease on their own due to poor credit, evictions, or lack of sufficient income.

**Operating Costs:** Applies to facility-based housing only, for facilities that are currently open. Operating costs can include day-to-day housing function and operation costs like utilities, maintenance, equipment, insurance, security, furnishings, supplies and salary for staff costs directly related to the housing project but not staff costs for delivering services.

**Outcome:** The degree to which the HOPWA assisted household has been enabled to establish or maintain a stable living environment in housing that is safe, decent, and sanitary, (per the regulations at 24 CFR 574.310(b)) and to reduce the risks of homelessness, and improve access to HIV treatment and other health care and support.

**Output:** The number of units of housing or households that receive HOPWA assistance during the operating year.

**Permanent Housing Placement:** A supportive housing service that helps establish the household in the housing unit, including but not limited to reasonable costs for security deposits not to exceed two months of rent costs.

**Program Income:** Gross income directly generated from the use of HOPWA funds, including repayments. See grant administration

requirements on program income at 2 CFR 200.307.

**Project-Based Rental Assistance (PBRA):** A rental subsidy program that is tied to specific facilities or units owned or controlled by a project sponsor. Assistance is tied directly to the properties and is not portable or transferable.

**Project Sponsor Organizations: Per HOPWA regulations at 24 CFR 574.3,** any nonprofit organization or governmental housing agency that receives funds under a contract with the grantee to provide eligible housing and other support services or administrative services as defined in 24 CFR 574.300. Project Sponsor organizations are required to provide performance data on households served and funds expended.

**SAM:** All organizations applying for a Federal award must have a valid registration active at sam.gov. SAM (System for Award Management) registration includes maintaining current information and providing a valid DUNS number.

Short-Term Rent, Mortgage, and Utility (STRMU) Assistance: A time-limited, housing subsidy assistance designed to prevent homelessness and increase housing stability. Grantees may provide assistance for up to 21 weeks in any 52-week period. The amount of assistance varies per client depending on funds available, tenant need and program guidelines.

**Stewardship Units**: Units developed with HOPWA, where HOPWA funds were used for acquisition, new construction and rehabilitation that no longer receive operating subsidies from HOPWA. Report information for the units is subject to the three-year use agreement if rehabilitation is non-substantial and to the ten-year use agreement if rehabilitation is substantial.

**Tenant-Based Rental Assistance (TBRA):** TBRA is a rental subsidy program similar to the Housing Choice Voucher program that grantees can provide to help low-income households access affordable housing. The TBRA voucher is not tied to a specific unit, so tenants may move to a different unit without losing their assistance, subject to individual program rules. The subsidy amount is determined in part based on household income and rental costs associated with the tenant's lease.

**Transgender:** Transgender is defined as a person who identifies with, or presents as, a gender that is different from his/her gender at birth.

**Veteran:** A veteran is someone who has served on active duty in the Armed Forces of the United States. This does not include inactive military reserves or the National Guard unless the person was called up to active duty.

# Housing Opportunities for Person With AIDS (HOPWA) Consolidated Annual Performance and Evaluation Report (CAPER) Measuring Performance Outputs and Outcomes

OMB Number 2506-0133 (Expiration Date: 01/31/2021)

# Part 1: Grantee Executive Summary

As applicable, complete the charts below to provide more detailed information about the agencies and organizations responsible for the administration and implementation of the HOPWA program. Chart 1 requests general Grantee Information and Chart 2 is to be completed for each organization selected or designated as a project sponsor, as defined by 24 CFR 574.3.

Note: If any information does not apply to your organization, please enter N/A. Do not leave any section blank.

#### 1. Grantee Information

1. Granice information						
HUD Grant Number	Operating Year for this report					
VAH18-F0001	Fro	m (mm/dd	<i>l/yy</i> ) 07/01/19 <i>To</i>	(mm/dd/yy)	06/31/20	
Grantee Name		I				
City of Richmond						
City of Kichinolia						
Business Address	1500 E. Main Street, S	Suite 400				
City, County, State, Zip	Richmond	N/A	A		VA	23219
Employer Identification Number (EIN) or Tax Identification Number (TIN)	54-6001556					
` /	002122040			C4	<b>1</b>	(CAM)
DUN & Bradstreet Number (DUNs):			System for Award Management (SAM):: Is the grantee's SAM status currently active?			
Congressional District of Grantee's Business Address	VA 3rd					
*Congressional District of Primary Service Area(s)	VA 1st, VA 3rd, VA 4t	h, VA 7 <sup>th</sup>				
*City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Colonial Heigh Petersburg, Richmond			Counties: Amelia Chesterfield, Din Hanover, Henrico Kent, Powhatan,	widdie, Goo o, King Will	ochland, iam, New
Organization's Website Address www.richmondgov.com		Services in the	Grantee in the nai	for HOPWA Housing Service Area?	es 🗵 No	

<sup>\*</sup> Service delivery area information only needed for program activities being directly carried out by the grantee.

# 2. Project Sponsor Information

Please complete Chart 2 for each organization designated or selected to serve as a project sponsor, as defined by 24 CFR 574.3. Use this section to report on organizations involved in the direct delivery of services for client households.

*Note:* If any information does not apply to your organization, please enter N/A.

Project Sponsor Agency Name		Parent Company Name, if applicable			
Commonwealth Catholic Charities		N/A			
Name and Title of Contact at Project Sponsor Agency	Jennifer Levine, Direct	or of Grants			
Email Address	Jennifer.Levine@cccofva.org				
Business Address	1601 Rolling Hills Driv	ve			
City, County, State, Zip,	Richmond, VA 23229				
Phone Number (with area code)	(804) 545-5975				
Employer Identification Number (EIN) or Tax Identification Number (TIN)	54-0505877		Fax Nun	nber (with are	ea code)
,			(804)	285-1938	
DUN & Bradstreet Number (DUNs):	057876781				
Congressional District of Project Sponsor's Business Address	VA 7 <sup>th</sup>				
Congressional District(s) of Primary Service Area(s)	VA 1st, VA 3rd, VA 4th,	, VA 7 <sup>th</sup>			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Colonial Heights, Hopewell, Petersburg, City of Richmond  Counties: Amelia, Caroline, Charles City, Chesterfield, Dinwiddie, Goochland, Hanover, Henrico, King William, New Kent, Powhatan, Prince George & Sussex				
Total HOPWA contract amount for this Organization for the operating year	\$772,757.00				
Organization's Website Address	www.cccofva.org				
Is the sponsor a nonprofit organization?	Does your organizat	ion mainta	in a waiting li	ist? □ Yes □ No	
Please check if yes and a faith-based organization.   □  Please check if yes and a grassroots organization. □		If yes, explain in the	narrative	section how tl	nis list is administered.

Project Sponsor Agency Name		Parent Company Name, if applicable			
Serenity Inc.		N/A			
Name and Title of Contact at Project Sponsor Agency	Rosa Johnson-Tuma, E	xecutive Director			
Email Address	Serenity9977@yahoo.c	om			
Business Address	114 N. Union Street				
City, County, State, Zip,	Petersburg, VA 23803				
Phone Number (with area code)	(804) 861-9977				
Employer Identification Number (EIN) or Tax Identification Number (TIN)	54-2057162			ber (with are	ea code)
DUN & Bradstreet Number (DUNs):	192651375		N/A		
Congressional District of Project Sponsor's Business Address	VA 4 <sup>th</sup>				
Congressional District(s) of Primary Service Area(s)	VA 1 <sup>st</sup> , VA 3 <sup>rd</sup> , VA 4 <sup>th</sup> ,	VA 7 <sup>th</sup>			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Colonial Heights, Hopewell, Petersburg, City of Richmond  Counties: Amelia, Caroline, Charles City, Chesterfield, Dinwiddie, Goochland, Hanover, Henrico, King William, New Kent, Powhatan, Prince George & Sussex				
Total HOPWA contract amount for this Organization for the operating year	\$207,310.00				
Organization's Website Address	www.serenity-crater.org/				
Is the sponsor a nonprofit organization? ⊠ Yes □ No		Does your organizati	ion maintai	in a waiting li	st? □ Yes ⊠ No
Please check if yes and a faith-based organization.   □ Please check if yes and a grassroots organization. □		If yes, explain in the	narrative s	section how th	nis list is administered.

Project Sponsor Agency Name		Parent Company Name, if applicable			
Virginia Supportive Housing		N/A			
Name and Title of Contact at Project Sponsor Agency	Allison Bogdanovic, Ex	ecutive Director			
Email Address	aboghanovic@virginias	supportivehousing.org			
Business Address	8002 Discovery Drive, PO Box 8585	Suite 201			
City, County, State, Zip,	Richmond, VA 23229				
Phone Number (with area code)	(804) 788-6825				
Employer Identification Number (EIN) or Tax Identification Number (TIN)	54-1444565		Fax Nu	mber (with are	ea code)
1 ax Identification Number (1114)			(804) 7	88-6827	
DUN & Bradstreet Number (DUNs):	790886121				
Congressional District of Project Sponsor's Business Address	VA 7 <sup>th</sup>				
Congressional District(s) of Primary Service Area(s)	VA 1 <sup>st</sup> , VA 3 <sup>rd</sup> , VA 4 <sup>th</sup> ,	VA 7 <sup>th</sup>			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Colonial Heights, Hopewell, Petersburg, City of Richmond  Counties: Amelia, Caroline, Charles City, Chesterfield, Dinwiddie, Goochland, Hanover, Henrico, King William, New Kent, Powhatan, Prince George & Sussex				
Total HOPWA contract amount for this Organization for the operating year	\$270,000.00				
Organization's Website Address	http://www.virginiasupportivehousing.org/				
Is the sponsor a nonprofit organization? ⊠ Yes □ No		Does your organization	on maint	ain a waiting li	ist? ☐ Yes ⊠ No
Please check if yes and a faith-based organization.  ☐ Please check if yes and a grassroots organization.  ☐		If yes, explain in the narrative section how this list is administered.			

Project Sponsor Agency Name		Parent Company Name, if applicable			
Homeward		N/A			
Name and Title of Contact at Project Sponsor Agency	Kelly King-Horne, Executive Director				
Email Address	kkhorne@homewardva	l.org			
Business Address	9211 Forest Hill Avenu	ie, Suite 200			
City, County, State, Zip,	Richmond, VA 23235				
Phone Number (with area code)	(804) 343-2045				
Employer Identification Number (EIN) or Tax Identification Number (TIN)	05-0606153	,	Fax Nun	nber (with are	ea code)
Tax Identification (Valley)			(804) 34	43-2049	
DUN & Bradstreet Number (DUNs):	145646183				
Congressional District of Project Sponsor's Business Address	VA 4 <sup>th</sup>				
Congressional District(s) of Primary Service Area(s)	VA 1st, VA 3rd, VA 4th,	, VA 7 <sup>th</sup>			
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities: Colonial Heights, Hopewell, Petersburg, City of Richmond  Counties: Amelia, Caroline, Charles City, Chesterfield, Dinwiddie, Goochland, Hanover, Henrico, King William, New Kent, Powhatan, Prince George & Sussex				iddie, Goochland, King William, New Kent,
Total HOPWA contract amount for this Organization for the operating year	\$24,400				
Organization's Website Address	www.howewardva.org/	/			
Is the sponsor a nonprofit organization?	Yes 🛛 No	Does your organizat	tion mainta	in a waiting li	ist? □ Yes ⊠ No
Please check if yes and a faith-based organization. □ Please check if yes and a grassroots organization. □		If yes, explain in the	narrative	section how th	nis list is administered.

#### 5. Grantee Narrative and Performance Assessment

#### a. Grantee and Community Overview

Provide a one to three page narrative summarizing major achievements and highlights that were proposed and completed during the program year. Include a brief description of the grant organization, area of service, the name(s) of the program contact(s), and an overview of the range/type of housing activities provided. This overview may be used for public information, including posting on HUD's website. *Note: Text fields are expandable.* 

#### b. Annual Performance under the Action Plan

Provide a narrative addressing each of the following four items:

1. Outputs Reported. Describe significant accomplishments or challenges in achieving the number of housing units supported and the number households assisted with HOPWA funds during this operating year compared to plans for this assistance, as approved in the Consolidated Plan/Action Plan. Describe how HOPWA funds were distributed during your operating year among different categories of housing and geographic areas to address needs throughout the grant service area, consistent with approved plans.

Housing Assistance*	Clients
Long-term Rental Housing (TBRA)	44
Case Management/Support Services	287
Short-term Financial Assistance (STRMU)	84
Facility Based with Supportive Services	11
Permanent Housing Placement	60

<sup>\*</sup> HOPWA Funds only

Service Providers	Number of Clients
Commonwealth Catholic Charities	177
Virginia Supportive Housing	29
Serenity Inc.	81
Total	287

2. Outcomes Assessed. Assess your program's success in enabling HOPWA beneficiaries to establish and/or better maintain a stable living environment in housing that is safe, decent, and sanitary, and improve access to care. Compare current year results to baseline results for clients. Describe how program activities/projects contributed to meeting stated goals. If program did not achieve expected targets, please describe how your program plans to address challenges in program implementation and the steps currently being taken to achieve goals in next operating year. If your program exceeded program targets, please describe strategies the program utilized and how those contributed to program successes.

The City of Richmond's 2019-20 Annual Action Plan identified persons with special needs, including persons with HIV/AIDS, as one of its top priorities.

To that end, the City facilitated the allocation of \$1,307,467 in HOPWA funds to four (4) agencies located throughout the Richmond-Petersburg MSA to provide a range of housing assistance and supportive services, including facilities and community residences, rental assistance, short-term payments to prevent homelessness, supportive services and other activities to serve persons with HIV/AIDS. Funds in the amount of \$33,000 were also provided to one city department for the general administration of the HOPWA program.

To ensure that the above services are provided, the City in collaboration with the AIDS Service Organizations (ASOs) developed a comprehensive and coordinated regional housing and service delivery system called a "Continuum of Care for Persons with HIV/AIDS." The fundamental components of the Continuum of Care are:

- 1. HIV/AIDS prevention education programs
- 2. Outreach and assessment
- 3. Short-term rental assistance (up to 21 weeks)

- 4. Long-term rental housing assistance
- 5. Permanent Housing Placement (first month's rent)
- 6. Case management and support services

The following agencies received HOPWA funds to implement the Continuum of Care:

- HOPWA Greater Richmond Commonwealth Catholic Charities (CCC) A budget of \$772,757 (\$715,209 budgeted, \$32,548 in carryover, and \$25,000 in reallocated HOPWA funds) was allocated to provide short term financial assistance (i.e., mortgage, rental, or utility assistance), permanent housing placement (first month's rent) and long term financial assistance (TBRA). To address the support service needs of persons affected by HIV/AIDS, funds were contracted to provide for case management and support services to 177 individuals and/or families receiving services (unduplicated). The agency provided supportive services without housing assistance to 63 clients, provided TBRA assistance to 45 households, provided STRMU assistance to 67 households and provided 36 clients with permanent housing placement.
- <u>HOPWA Program Administration Dept. of Housing & Community Development</u> A budget of \$33,000 was allocated to provide overall administration of the HOPWA funds. City staff spent a large amount of time monitoring and providing technical assistance all three providers. Program Administration also covered accounting and financial technical assistance, including financial monitoring. City of Richmond HOPWA staff conducted two on-site monitoring visits to Commonwealth Catholic Charities and Virginia Supportive Housing during FY19-20, and completed the HUD required HOPWA CAPER.
- <u>Stratford House Virginia Supportive Housing</u> A budget of \$270,000 (\$255,000 budgeted plus \$15,000 of reallocated HOPWA funds) was allocated to subsidize permanent housing at Stratford House, an AIDS Guest House, for at least 10 persons with AIDS. VSH also provides case management and housing services to scattered site program participants. The funds help staff perform the day-to-day management and operation of the properties. A total of 29 persons were served. VSH provided supportive services to all HOPWA households that received HOPWA housing assistance.
  - VSH cost for its permanent supportive housing exceeds the average because of the age of the facility. The facility is over 20 years old, the cost to maintain, staff including utility costs have all increased over the years.
- <u>Serenity Inc.</u> A budget of \$207,310 (\$163,000 budgeted & \$44,310 carryover) was allocated to provide Short term Mortgage, Rent and Utility assistance (STMRU)), Permanent Housing Placement (PHP) and Supportive Services needs of persons affected by HIV/AIDS. The agency provided supportive services to 81 households, provided STRMU assistance to 17 households, and PHP to 6 households.
- <u>HOMEWARD</u> A budget of \$24,400 was allocated to compile data on clients submitted by sub-recipients and produce program progress reports on a quarterly and annual basis and to provide client data analysis and provide a management system for client referrals.

HOPWA funds were used to carry out the following activities:

Short-Term Housing Assistance, STRMU – (CCC & Serenity) for clients who need temporary housing assistance while waiting for disability assistance. The client pays no more than 30% of his/her income for housing. The ASO pays the difference between this amount and the respective rent or mortgage, for up to 5 months. When needed, utilities may also be paid using HOPWA funds. This assistance provides the client stable housing while awaiting disability or other assistance. A client who constantly needs emergency financial assistance or a client who is waiting for disability assistance is a candidate for this assistance.

- Total Number of Services by Providers: 160
- Total Number of Unduplicated Households: 84

<u>Long-Term Housing Assistance, TBRA</u> – (CCC) for clients who because of their illness are at-risk of homelessness or who reside in substandard housing. The client pays no more than 30% of his/her income for housing. The ASO pays the difference between this amount and the fair market rent for the client, using HOPWA funds. This assistance allows the individual to focus on his or her medical needs as opposed to housing. A client who constantly needs short-term assistance is a candidate for long-term housing.

• Total Number of Services by Providers: 518

• Total Number of Unduplicated Households: 44

<u>Scattered Sites Housing</u> – (VSH) for clients who are both low income and living with HIV/AIDS and in need of long term housing in private housing units. The client pays no more than 30% of his/her income for housing. Each client is offered support services by MCV Hospitals and is drug tested before admission. City of Richmond only funds Supportive Services for Scattered Sites with HOPWA funds.

• Total Number of Services by Providers: 443

• Total Number of Unduplicated Households: 18

<u>Facility-based Housing</u> – (Stratford/HomeLink/New Clay) & for clients who are both low income and living with HIV/AIDS and in need of long term housing. The client pays no more than 30% of his/her income for housing. Each client is offered support services by MCV Hospitals and is drug tested before admission.

• Total Number of Services by Providers: 270

• Total Number of Unduplicated Households: 11

<u>Permanent Housing Placement (first month's rent)</u> – (CCC & Serenity) for clients who are both low income, living with HIV/AIDS and are capable of living independently, financial and otherwise, but need a onetime shot of assistance to obtain an independent living situation.

• Total Number of Services by Providers: 75

• Total Number of Unduplicated Households: 60

<u>Case Management/Supportive Services (All agencies)</u> - All clients receive housing information, referral and case management services along with the individualized specific service. These services ensure that clients have the necessary information to make decisions about their housing, and to gain access to services. Other services may include transportation, childcare, counseling, budgeting, support groups, and referral to medical and dental care.

• Total Number of Services by Providers: 2,009

• Total Number of Unduplicated Households: 287

<u>Program Administration</u> – The ASOs were allowed to use up to 7% of their total HOPWA budget for program administration. The City of Richmond was allowed to use up to 3% (\$33,000) of its entitlement allocation for program administration but only used approximately 88.85% (\$29,319) of the allocation.

#### Demographics of Clients Receiving Services (CCC, VSH & Serenity)

Total Clients Receiving Service (unduplicated)	287	% of Total
Sex of Client		
Male	164	57%
Female	113	39%
Transgender	10	4%
Unknown	0	0%

### **Race of Client**

White	29	10%
Afro-American	250	87%
Asian	0	-%
Am. Indian/Alaskan	0	-%
Native Hawaiian/Pacific Islander	0	-%
Asian & White	0	-%
Am. Indian/Alaskan & White	2	0.01%

Black/African Am & White	3	0.01%
Am Indian/Alaskan & African Am	3	0.01%
Other Multi-racial	0	0.01%

Hispanic	8	.03%
HIV Positive Yes	287	100%
No	0	0%

#### **Allocated HOPWA Funds**

Project Name	Agency	FY 19-20	FY 19-20
		Funding*	Spent
	Commonwealth Catholic		
AIDS Housing Project	Charities	\$772,757	\$670,633.16
HOPWA Program Administration	City Of Richmond, HCD	\$33,000	\$29,319
Serenity Inc.	Serenity Inc.	\$207,310	\$132,979.54
Stratford House	VA Supportive Housing	\$270,000	\$270,000
HOPWA CIS	Homeward	\$24,400	\$24,400
Total		\$1,307,467	\$1,127,331.70

<sup>\*</sup>Includes carryover funds

#### Information on other resources that were used in conjunction with HOPWA funded activities.

- The VCU HIV/AIDS Center provided education; training and consultation services for health care providers.
- MCV Hospitals Infectious Disease Clinic provided medical care to clients.

In addition to the above resources, the HOPWA funded agencies used funds from foundations, Virginia Department of Health, private sector, religious community, private donations, the United Way, and fundraisers to carry out the activities. These include:

- Continuum of Care V=\$50,000
- Local Government
- Private donations V=\$1,000
- Foundations \$0
- Housing Subsidy Assistance V=\$40,000
- Housing Rent Fees: V=\$15,000
- Medical Reimbursements: V=\$5,000
- **3. Coordination**. Report on program coordination with other mainstream housing and supportive services resources, including the use of committed leveraging from other public and private sources that helped to address needs for eligible persons identified in the Consolidated Plan/Strategic Plan.

The City's sub-recipients attempt to leverage other resources such as housing vouchers or project based vouchers from the local housing authority's however these funds are highly in demand and are not readably available. The City and its partners plan to look into LIHTC projects and if there is any opportunities to place residents in these programs. HOPWA subrecipients work with Virginia Commonwealth University HIV/AIDS Center to provide education, training, and consultation services for health care providers. MCV Hospitals Infectious Disease Clinic provides meals to HOPWA Clients

**4. Technical Assistance.** Describe any program technical assistance needs and how they would benefit program beneficiaries.

The Richmond MSA sub-recipients would benefit from addition technical assistance focused on case file management and benefit tracking. VSH and Commonwealth Catholic Charities have very high quality file organization, however Serenity, Inc. needs a great deal of technical assistance on client file upkeep. All sub-recipients would benefit from a workshop or seminar that would help them track how long a client has received assistance, and how much longer they are eligible for assistance (STRMU).

#### c. Barriers and Trends Overview

Provide a narrative addressing items 1 through 3. Explain how barriers and trends affected your program's ability to achieve the objectives and outcomes discussed in the previous section.

1. Describe any barriers (including regulatory and non-regulatory) encountered in the administration or implementation of the HOPWA program, how they affected your program's ability to achieve the objectives and outcomes discussed, and, actions taken in response to barriers, and recommendations for program improvement. Provide an explanation for each barrier selected.

**Barrier**: Lack of low-income housing or insufficient income for market-rate housing.

<u>Recommendation</u>: Increase low-income, safe and maintained housing. As clients face an AIDS-related health challenge or address the challenges of living with a chronic illness their income remains the same (disability) or perhaps lessens (reduced time at work) despite an increase in illness-related costs while housing rents/mortgages and utilities remain the same or increase.

**Barrier:** Limited number of ASOs to provide housing services to persons with AIDS.

**Recommendation:** Need to provide additional training to raise the capacity of ASOs to meet the housing needs of this population.

Barrier: Difficulty implementing HUD allowable activities.

<u>Recommendation</u>: ASOs need to continue to meet regularly to discuss ways in which HUD allowable activities can be implemented without creating an undue burden on responsible staff.

Barrier: The frequent use of HOPWA funds by clients to resolve continuing financial problems.

Recommendation: ASOs need to continue to refine their service planning of HOPWA client needs on a regular and continuing basis. There is a need to provide additional training and resources to the staff providing direct care in case management techniques, especially in money management and budget counseling. In addition, for clients who demonstrate sound money management but are seriously limited in employment options due to limited education, experience and training, additional case management planning needs to focus on developing employment skills (when possible due to health stability) to increase income potential. Finally, clients who have demonstrated poor money management should be required to attend workshops concerning these same financial issues. Service limitations in dollar amount caps and assistance duration period caps should be evaluated.

**Barrier:** Public misperception of AIDS and victims of the disease.

**Recommendation:** ASOs need to continue to conduct public education and outreach to civic and religious groups, and outreach to neighborhoods where housing or services are being provided to persons with AIDS.

☐ HOPWA/HUD Regulations	□ Planning	☐ Housing Availability	☐ Rent Determination and Fair Market Rents
☐ Discrimination/Confidentiality	☐ Multiple Diagnoses	☐ Eligibility	□ Technical Assistance or Training
☐ Supportive Services	☐ Credit History	☐ Rental History	☐ Criminal Justice History
☐ Housing Affordability	☐ Geography/Rural Access expand services with new orga		client outreach/search. Also provider outreach to

2. Describe any trends in the community that may affect the way in which the needs of persons living with HIV/AIDS are being addressed, and provide any other information important to the future provision of services to this population.

Linkage to Care Trend: Virginia has been designated as one of six states serving as pilot locations for a SPNS (Special Project of National Significance) Initiative. Through a multi-year grant, the Virginia Department of Health is working with key stakeholders throughout the state to assess, standardize, and improve core service process and procedural steps for those living with HIV. Key agency ASO players from the Richmond community are involved in the SPNS initiative. Although housing is not being specifically addressed through SPNS, factors with a high correlation to housing stability are being addressed such as linkage to HIV care, successful transition from Department of Corrections to HIV care and services and Mental Health services for those living with HIV.

Currently, HOMEWARD provides HOPWA data collection and management in order to ensure accurate data, report properly, provide quality assurance and assist the city and AIDS service organizations to identify areas where resources and referrals can be utilized.

3. Identify any evaluations, studies, or other assessments of the HOPWA program that are available to the public.

HIV Case Managers in the community do meet quarterly to share general information and resources. During fiscal year 2019-20, City staff and staff from the ASOs met to address various issues that were identified.

- a) Systems issues The efficiency of service systems working together, also a lack of service system collaboration at the institutional level.
- b) Community support The lack of community support affects both the consumers and the providers.
- c) General housing market issues There is a shortage of permanent affordable housing, subsidized or unsubsidized.
- d) Gaps in the HIV/AIDS housing continuum Needs were identified in short-term emergency housing, transitional housing and for people with higher care needs. Balancing resources with needs requires difficult choices.
- e) Support services gaps The limited resources available do not meet the level of demand in a range of support services areas. Specific needs identified included mental health treatment, dental care, affordable day care and bilingual services.
- f) Transportation Transportation is critical to accessing housing, services, medical care, and employment opportunities.
- g) Evaluated individual cases for possible extension of long term care for a defined period.
- h) Worked on HOPWA modernization

End of PART 1

### PART 2: Sources of Leveraging and Program Income

#### 1. Sources of Leveraging

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in the Consolidated or Annual Plan and used in the delivery of the HOPWA program and the amount of leveraged dollars. In Column [1], identify the type of leveraging. Some common sources of leveraged funds have been provided as a reference point. You may add Rows as necessary to report all sources of leveraged funds. Include Resident Rent payments paid by clients directly to private landlords. Do NOT include rents paid directly to a HOPWA program as this will be reported in the next section. In Column [2] report the amount of leveraged funds expended during the operating year. Use Column [3] to provide some detail about the type of leveraged contribution (e.g., case management services or clothing donations). In Column [4], check the appropriate box to indicate whether the leveraged contribution was a housing subsidy assistance or another form of support.

Note: Be sure to report on the number of households supported with these leveraged funds in Part 3, Chart 1, Column d.

A. Source of Leveraging Chart

	[2] Amount of		[4] Housing Subsidy
547.0	Leveraged	[3] Type of	Assistance or Other
[1] Source of Leveraging	Funds	Contribution	Support
Public Funding			
			☐ Housing Subsidy Assistance
Ryan White-Housing Assistance			☐ Other Support
			☐ Housing Subsidy Assistance
Ryan White-Other			☐ Other Support
H ' CI ' H   D	Ф.40.000		☐ Housing Subsidy Assistance
Housing Choice Voucher Program	\$40,000		☐ Other Support ☐ Housing Subsidy Assistance
I I II II T C 1/4			☐ Other Support
Low Income Housing Tax Credit			☐ Housing Subsidy Assistance
HOME			☐ Other Support
HOME			☐ Housing Subsidy Assistance
Continuum of Care	\$50,000		☐ Housing Subsidy Assistance ☐ Other Support
Continuum of Care	Ψ30,000		☐ Housing Subsidy Assistance
Emergency Solutions Grant			☐ Other Support
Emergency borderons crain			⊠ Housing Subsidy Assistance
Other Public:			☐ Other Support
			☐ Housing Subsidy Assistance
Other Public: Medicaid Reimbursements	\$5,000		
			☐ Housing Subsidy Assistance
Other Public:			☐ Other Support
			☐ Housing Subsidy Assistance
Other Public:			☐ Other Support
			☐ Housing Subsidy Assistance
Other Public:			☐ Other Support
Private Funding			
			☐ Housing Subsidy Assistance
Grants			☐ Other Support
			☐ Housing Subsidy Assistance
In-kind Resources			☐ Other Support
			☐ Housing Subsidy Assistance
Other Private: Philanthropy	\$1,000		⊠ Other Support
			☐ Housing Subsidy Assistance
Other Private:			☐ Other Support
Other Funding			
Cuentas/Dusiast Smangan (Accesse) Co-l			☐ Housing Subsidy Assistance
Grantee/Project Sponsor (Agency) Cash			☐ Other Support
Resident Rent Payments by Client to Private Landlord			
TOTAL (Sum of all Rows)	\$96,000		

#### 2. Program Income and Resident Rent Payments

In Section 2, Chart A, report the total amount of program income and resident rent payments directly generated from the use of HOPWA funds, including repayments. Include resident rent payments collected or paid directly to the HOPWA program. Do NOT include payments made directly from a client household to a private landlord.

**Note:** Please see report directions section for definition of <u>program income</u>. (Additional information on program income is available in the HOPWA Grantee Oversight Resource Guide).

## A. Total Amount Program Income and Resident Rent Payment Collected During the Operating Year

	Program Income and Resident Rent Payments Collected	Total Amount of Program Income (for this operating year)
1.	Program income (e.g. repayments)	\$0
2.	Resident Rent Payments made directly to HOPWA Program	\$15,000
3.	Total Program Income and Resident Rent Payments (Sum of Rows 1 and 2)	\$15,000

#### B. Program Income and Resident Rent Payments Expended To Assist HOPWA Households

In Chart B, report on the total program income and resident rent payments (as reported above in Chart A) expended during the operating year. Use Row 1 to report Program Income and Resident Rent Payments expended on Housing Subsidy Assistance Programs (i.e., TBRA, STRMU, PHP, Master Leased Units, and Facility-Based Housing). Use Row 2 to report on the Program Income and Resident Rent Payment expended on Supportive Services and other non-direct Housing Costs.

I	Program Income and Resident Rent Payment Expended on HOPWA programs	Total Amount of Program Income Expended (for this operating year)
1.	Program Income and Resident Rent Payment Expended on Housing Subsidy Assistance costs	\$15,000
2.	Program Income and Resident Rent Payment Expended on Supportive Services and other non- direct housing costs	
3.	Total Program Income Expended (Sum of Rows 1 and 2)	\$15,000

End of PART 2

### PART 3: Accomplishment Data Planned Goal and Actual Outputs

In Chart 1, enter performance information (goals and actual outputs) for all activities undertaken during the operating year supported with HOPWA funds. Performance is measured by the number of households and units of housing that were supported with HOPWA or other federal, state, local, or private funds for the purposes of providing housing assistance and support to persons living with HIV/AIDS and their families.

1. HOPWA Performance Planned Goal and Actual Outputs

	for WA Feriormance Flamled Goal and Actual Outputs	[1] Output: Households		[2] Output: Funding			
	HOPWA Performance	HOPWA Assistance			everaged useholds	НОР	VA Funds
	Planned Goal	a.	b.	c.	d.	e.	f.
	and Actual	1	Actual	Goal	Actual	MdOH	Budget HOPWA Actual
	HOPWA Housing Subsidy Assistance	ſ	1] Outpu	ıt: Hou	seholds	[2] Out	out: Funding
1.	Tenant-Based Rental Assistance	42	44			\$447,548	\$399,811.11
2a.	Permanent Housing Facilities:					ψ117,510	
21	Received Operating Subsidies/Leased units (Households Served)	10	11			\$131,290	\$131,290
2ь.	Transitional/Short-term Facilities: Received Operating Subsidies/Leased units (Households Served) (Households Served)						
3a.	Permanent Housing Facilities: Capital Development Projects placed in service during the operating year (Households Served)						
3b.	Transitional/Short-term Facilities: Capital Development Projects placed in service during the operating year (Households Served)						
4.	Short-Term Rent, Mortgage and Utility Assistance	159	84			\$203,116	\$162,796.65
5.	Permanent Housing Placement Services	56	60			\$61,611	\$42,628.31
6.	Adjustments for duplication (subtract)	21	21			\$01,011	\$ 12,020.31
7.	Total HOPWA Housing Subsidy Assistance (Columns a – d equal the sum of Rows 1-5 minus Row 6; Columns e and f equal the sum of Rows 1-5)	246	178				
	Housing Development (Construction and Stewardship of facility based housing)		] Output:	Honei	ng Unite	[2] Outr	out: Funding
8.	Facility-based units; Capital Development Projects not yet opened (Housing Units)	L±.	J Output.	Housi	ing Units	[2] Out	out. Punding
9.	Stewardship Units subject to 3- or 10- year use agreements						
10.	Total Housing Developed (Sum of Rows 8 & 9)						
	Supportive Services		[1] Outpu	t: Hous	seholds	[2] Outr	out: Funding
	Supportive Services provided by project sponsors that also delivered <u>HOPWA</u> housing subsidy assistance		287			\$325,828	\$231,410.63
	Supportive Services provided by project sponsors that only provided supportive services.	N/A	N/A			N/A	N/A
12.	Adjustment for duplication (subtract)						
13.	Total Supportive Services (Columns a – d equals the sum of Rows 11 a & b minus Row 12; Columns e and f equal the sum of Rows 11a & 11b)	445	287				
	Housing Information Services		[1] Outpu	ıt: Hou	seholds	[2] Outj	out: Funding
14.	Housing Information Services						
15.	Total Housing Information Services						

	Grant Administration and Other Activities	[1] Output: Households		[2] Output: Funding		
16.	Resource Identification to establish, coordinate and develop housing assistance					
	resources					
17.	Technical Assistance					
	(if approved in grant agreement)					
18.	Grantee Administration					
	(maximum 3% of total HOPWA grant)				\$33,000	\$29,319
19.	Project Sponsor Administration					
	(maximum 7% of portion of HOPWA grant awarded)				\$80,944	\$80,944
20.	Total Grant Administration and Other Activities					
	(Sum of Rows 16 – 19)				\$113,944	\$110,263
	Total Expended					HOPWA Funds pended
					Budget	Actual
21.	Total Expenditures for operating year (Sum of Rows 7, 10, 13, 15, and 20)					
					\$1,283,337	\$1,078,199.70

# 2. Listing of Supportive Services

Report on the households served and use of HOPWA funds for all supportive services. Do NOT report on supportive services leveraged with non-HOPWA funds.

Data check: Total unduplicated households and expenditures reported in Row 17 equal totals reported in Part 3, Chart 1, Row 13.

	Supportive Services	[1] Output: Number of <u>Households</u>	[2] Output: Amount of HOPWA Funds Expended
1.	Adult day care and personal assistance		
2.	Alcohol and drug abuse services		
3.	Case management	287	\$231,410.63
4.	Child care and other child services		
5.	Education		
6.	Employment assistance and training		
	Health/medical/intensive care services, if approved		
7.	Note: Client records must conform with 24 CFR §574.310		
8.	Legal services		
9.	Life skills management (outside of case management)		
10.	Meals/nutritional services		
11.	Mental health services		
12.	Outreach		
13.	Transportation		
14.	Other Activity (if approved in grant agreement).  Specify:		
15.	Sub-Total Households receiving Supportive Services (Sum of Rows 1-14)	287	
16.	Adjustment for Duplication (subtract)		
17.	TOTAL Unduplicated Households receiving Supportive Services (Column [1] equals Row 15 minus Row 16; Column [2] equals sum of Rows 1-14)	287	

#### 3. Short-Term Rent, Mortgage and Utility Assistance (STRMU) Summary

In Row a, enter the total number of households served and the amount of HOPWA funds expended on Short-Term Rent, Mortgage and Utility (STRMU) Assistance. In Row b, enter the total number of STRMU-assisted households that received assistance with mortgage costs only (no utility costs) and the amount expended assisting these households. In Row c, enter the total number of STRMU-assisted households that received assistance with both mortgage and utility costs and the amount expended assisting these households that received assistance with rental costs only (no utility costs) and the amount expended assisting these households. In Row e, enter the total number of STRMU-assisted households that received assistance with both rental and utility costs and the amount expended assisting these households. In Row f, enter the total number of STRMU-assisted households that received assistance with utility costs only (not including rent or mortgage costs) and the amount expended assisting these households. In row g, report the amount of STRMU funds expended to support direct program costs such as program operation staff.

**Data Check:** The total households reported as served with STRMU in Row a, column [1] and the total amount of HOPWA funds reported as expended in Row a, column [2] equals the household and expenditure total reported for STRMU in Part 3, Chart 1, Row 4, Columns b and f, respectively.

**Data Check:** The total number of households reported in Column [1], Rows b, c, d, e, and f equal the total number of STRMU households reported in Column [1], Row a. The total amount reported as expended in Column [2], Rows b, c, d, e, f, and g. equal the total amount of STRMU expenditures reported in Column [2], Row a.

Housing Subsidy Assistance Categories (STRMU)		[1] Output: Number of <u>Households</u> Served	[2] Output: Total HOPWA Funds Expended on STRMU during Operating Year
a.	Total Short-term mortgage, rent and/or utility (STRMU) assistance	84	\$162,796.65
b.	Of the total STRMU reported on Row a, total who received assistance with mortgage costs ONLY.	4	\$5,352.73
c.	Of the total STRMU reported on Row a, total who received assistance with mortgage and utility costs.	2	\$4,096.94
d.	Of the total STRMU reported on Row a, total who received assistance with rental costs ONLY.	44	\$91,378.03
e.	Of the total STRMU reported on Row a, total who received assistance with rental and utility costs.	15	\$36,096.52
f.	Of the total STRMU reported on Row a, total who received assistance with utility costs ONLY.	19	\$10,217.59
g.	Direct program delivery costs (e.g., program operations staff time)		\$15,654.84

End of PART 3

# Part 4: Summary of Performance Outcomes

In Column [1], report the total number of eligible households that received HOPWA housing subsidy assistance, by type. In Column [2], enter the number of households that continued to access each type of housing subsidy assistance into next operating year. In Column [3], report the housing status of all households that exited the program.

**Data Check**: The sum of Columns [2] (Number of Households Continuing) and [3] (Exited Households) equals the total reported in Column[1]. **Note**: Refer to the housing stability codes that appear in Part 5: Worksheet - Determining Housing Stability Outcomes.

Section 1. Housing Stability: Assessment of Client Outcomes on Maintaining Housing Stability (Permanent Housing and Related Facilities)

A. Permanent Housing Subsidy Assistance

	[1] Output: Total Number of Households Served	[2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year	[3] Assessment: Nu Households that ex HOPWA Program; the Status after Exi	ited this eir Housing	[4] HOPWA Client Outcomes
			1 Emergency Shelter/Streets		Unstable Arrangements
			2 Temporary Housing		Temporarily Stable, with Reduced Risk of Homelessness
			3 Private Housing		
Tenant-Based Rental	44	42	4 Other HOPWA		Stable/Permanent Housing (PH)
Assistance			5 Other Subsidy		Stable/Permanent Housing (PH)
			6 Institution		
			7 Jail/Prison		Unstable Arrangements
			8 Disconnected/Unknown		Onsidote Arrangements
			9 Death	2	Life Event
			1 Emergency Shelter/Streets		Unstable Arrangements
			2 Temporary Housing		Temporarily Stable, with Reduced Risk of Homelessness
<b>.</b>			3 Private Housing	1	
Permanent Supportive	11		4 Other HOPWA	1	Stable/Permanent Housing (PH)
Housing Facilities/ Units		8	5 Other Subsidy	1	Stable/1 ermanent Housing (1 H)
racinties/ Units			6 Institution		
			7 Jail/Prison		
			8 Disconnected/Unknown		Unstable Arrangements
			9 Death		Life Event

**B.** Transitional Housing Assistance

	[1] Output: Total Number of Households Served	[2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year	[3] Assessment: Number Households that exited t HOPWA Program; the Housing Status after Exi	this eir [4] HOPWA Client Outcomes
			1 Emergency Shelter/Streets	Unstable Arrangements
			2 Temporary Housing	Temporarily Stable with Reduced Risk of Homelessness
Transitional/ Short-Term			3 Private Housing	
Housing			4 Other HOPWA	Stable/Permanent Housing (PH)
Facilities/ Units			5 Other Subsidy	Stable/Fermanent Housing (F11)
			6 Institution	
			7 Jail/Prison	Unstable Arrangements
			8 Disconnected/unknown	Chisable Arrangements
			9 Death	Life Event

# Section 2. Prevention of Homelessness: Assessment of Client Outcomes on Reduced Risks of Homelessness (Short-Term Housing Subsidy Assistance)

Report the total number of households that received STRMU assistance in Column [1].

In Column [2], identify the outcomes of the households reported in Column [1] either at the time that they were known to have left the STRMU program or through the project sponsor's best assessment for stability at the end of the operating year. Information in Column [3] provides a description of housing outcomes; therefore, data is not required.

At the bottom of the chart:

- In Row 1a, report those households that received STRMU assistance during the operating year of this report, and the prior operating year.
- In Row 1b, report those households that received STRMU assistance during the operating year of this report, and the two prior operating years.

**Data Check:** The total households reported as served with STRMU in Column [1] equals the total reported in Part 3, Chart 1, Row 4, Column b.

Data Check: The sum of Column [2] should equal the number of households reported in Column [1].

#### Assessment of Households that Received STRMU Assistance

[1] Output: Total number of households	number of		[3] HOPW	A Client Outcomes	
	Maintain Private Housing without subsidy (e.g. Assistance provided/completed and client is stable, not likely to seek additional support)	20			
	Other Private Housing without subsidy (e.g. client switched housing units and is now stable, not likely to seek additional support)		Stable/Permanent Hou.		
	Other HOPWA Housing Subsidy Assistance		Stable/1 cmi	aneni Housing (1 11)	
	Other Housing Subsidy (PH)	4			
84	Institution (e.g. residential and long-term care)	1			
01	Likely that additional STRMU is needed to maintain current housing arrangements	59			
	Transitional Facilities/Short-term	Temporarily Stable,		•	
	(e.g. temporary or transitional arrangement)		Reduced Ri	sk of Homelessness	
	<b>Temporary/Non-Permanent Housing arrangement</b> (e.g. gave up lease, and moved in with family or friends but expects to live there less than 90 days)				
	Emergency Shelter/street				
	Jail/Prison		Unstabl	e Arrangements	
	Disconnected		_		
	Death		L	ife Event	
1a. Total number of those h STRMU assistance in the pryears).	33				
	b. Total number of those households that received STRMU Assistance in the operating year of this report that also received TRMU assistance in the two prior operating years (e.g. households that received STRMU assistance in three consecutive perating years).				

#### Section 3. HOPWA Outcomes on Access to Care and Support

#### 1a. Total Number of Households

Line [1]: For project sponsors that provided HOPWA housing subsidy assistance during the operating year identify in the appropriate row the number of households that received HOPWA housing subsidy assistance (TBRA, STRMU, Facility-Based, PHP and Master Leasing) and HOPWA funded case management services. Use Row c to adjust for duplication among the service categories and Row d to provide an unduplicated household total.

Line [2]: For project sponsors that did <u>NOT</u> provide HOPWA housing subsidy assistance identify in the appropriate row the number of households that received HOPWA funded case management services.

**Note:** These numbers will help you to determine which clients to report Access to Care and Support Outcomes for and will be used by HUD as a basis for analyzing the percentage of households who demonstrated or maintained connections to care and support as identified in Chart 1b below.

Total Number of	of Households	
	ect Sponsors that provided HOPWA Housing Subsidy Assistance: Identify the total number of households that receive HOPWA-funded services:	d the
a.	Housing Subsidy Assistance (duplicated)-TBRA, STRMU, PHP, Facility-Based Housing, and Master Leasing	178
b.	Case Management	287
c.	Adjustment for duplication (subtraction)	287
d.	Total Households Served by Project Sponsors with Housing Subsidy Assistance (Sum of Rows a and b minus Row c)	178
	ect Sponsors did NOT provide HOPWA Housing Subsidy Assistance: Identify the total number of households that rece HOPWA-funded service:	eived the
a.	HOPWA Case Management	N/A
b.	Total Households Served by Project Sponsors without Housing Subsidy Assistance	N/A

#### 1b. Status of Households Accessing Care and Support

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report the number of households that demonstrated access or maintained connections to care and support within the operating year.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report the number of households that demonstrated improved access or maintained connections to care and support within the operating year.

Note: For information on types and sources of income and medical insurance/assistance, refer to Charts below.

Categories of Services Accessed	[1] For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following:	[2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following:	Outcome Indicator
Has a housing plan for maintaining or establishing stable ongoing housing	86	N/A	Support for Stable Housing
2. Had contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan (may include leveraged services such as Ryan White Medical Case Management)	59	N/A	Access to Support
3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan	83	N/A	Access to Health Care
4. Accessed and maintained medical insurance/assistance	46	N/A	Access to Health Care
5. Successfully accessed or maintained qualification for sources of income	216	N/A	Sources of Income

<sup>\*</sup>Many HOPWA clients answered providers with no answer in some cases which is filled out as "Question Not Answered". Additionally, the COVID-19 pandemic affected the capacity of clients to meet with case managers and medical providers on a consistent basis.

# Chart 1b, Line 4: Sources of Medical Insurance and Assistance include, but are not limited to the following (Reference only)

- MEDICAID Health Insurance Program, or use local program name
- MEDICARE Health Insurance Program, or use local program name
- Veterans Affairs Medical Services
- AIDS Drug Assistance Program (ADAP)
- State Children's Health Insurance Program (SCHIP), or use local program name
- Ryan White-funded Medical or Dental Assistance

# Chart 1b, Row 5: Sources of Income include, but are not limited to the following (Reference only)

- Earned Income
- · Veteran's Pension
- Unemployment Insurance
- Pension from Former Job
- Supplemental Security Income (SSI)
- Child Support
- Social Security Disability Income (SSDI)
- Alimony or other Spousal Support
- Veteran's Disability Payment
- Retirement Income from Social Security
- Worker's Compensation

- General Assistance (GA), or use local program name
- Private Disability Insurance
- Temporary Assistance for Needy Families (TANF)
- Other Income Sources

### 1c. Households that Obtained Employment

Column [1]: Of the households identified as receiving services from project sponsors that provided HOPWA housing subsidy assistance as identified in Chart 1a, Row 1d above, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or related case management/counseling services.

Column [2]: Of the households identified as receiving services from project sponsors that did NOT provide HOPWA housing subsidy assistance as reported in Chart 1a, Row 2b, report on the number of households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA-funded Job training, employment assistance, education or case management/counseling services.

*Note:* This includes jobs created by this project sponsor or obtained outside this agency.

**Note:** Do not include jobs that resulted from leveraged job training, employment assistance, education or case management/counseling services.

Categories of Services Accessed	[1 For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following:	[2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following:
Total number of households that obtained an income-producing job	14	N/A

**End of PART 4** 

### PART 5: Worksheet - Determining Housing Stability Outcomes (optional)

**1.** This chart is designed to assess program results based on the information reported in Part 4 and to help Grantees determine overall program performance. Completion of this worksheet is optional.

Permanent	Stable Housing	Temporary Housing	Unstable	Life Event
Housing Subsidy Assistance	(# of households remaining in program plus 3+4+5+6)	(2)	Arrangements (1+7+8)	(9)
Tenant-Based Rental Assistance (TBRA)	N/A	N/A	N/A	N/A
Permanent Facility- based Housing Assistance/Units	N/A	N/A	N/A	N/A
Transitional/Short- Term Facility-based Housing Assistance/Units	N/A	N/A	N/A	N/A
Total Permanent HOPWA Housing Subsidy Assistance	N/A	N/A	N/A	N/A
Reduced Risk of Homelessness: Short-Term Assistance	Stable/Permanent Housing	Temporarily Stable, with Reduced Risk of Homelessness	Unstable Arrangements	Life Events
Short-Term Rent, Mortgage, and Utility Assistance (STRMU)	N/A	N/A	N/A	N/A
Total HOPWA Housing Subsidy Assistance	N/A	N/A	N/A	N/A

# **Background on HOPWA Housing Stability Codes Stable Permanent Housing/Ongoing Participation**

- 3 = Private Housing in the private rental or home ownership market (without known subsidy, including permanent placement with families or other self-sufficient arrangements) with reasonable expectation that additional support is not needed.
- 4 = Other HOPWA-funded housing subsidy assistance (not STRMU), e.g. TBRA or Facility-Based Assistance.
- 5 = Other subsidized house or apartment (non-HOPWA sources, e.g., Section 8, HOME, public housing).
- 6 = Institutional setting with greater support and continued residence expected (e.g., residential or long-term care facility).

#### **Temporary Housing**

2 = Temporary housing - moved in with family/friends or other short-term arrangement, such as Ryan White subsidy, transitional housing for homeless, or temporary placement in institution (e.g., hospital, psychiatric hospital or other psychiatric facility, substance abuse treatment facility or detox center).

#### **Unstable Arrangements**

- 1 = Emergency shelter or no housing destination such as places not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station, or anywhere outside).
- 7 = Jail / prison.
- 8 = Disconnected or disappeared from project support, unknown destination or no assessments of housing needs were undertaken.

#### Life Event

9 = Death, i.e., remained in housing until death. This characteristic is not factored into the housing stability equation.

**Tenant-based Rental Assistance**: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as reported under: 3, 4, 5, and 6. <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item: 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

**Permanent Facility-Based Housing Assistance**: <u>Stable Housing</u> is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Temporary <u>Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. Unstable Situations is the sum of numbers reported under items: 1, 7, and 8.

**Transitional/Short-Term Facility-Based Housing Assistance:** <u>Stable Housing</u> is the sum of the number of households that (i) continue in the residences (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Other <u>Temporary Housing</u> is the number of households that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. <u>Unstable Situations</u> is the sum of numbers reported under items: 1, 7, and 8.

**Tenure Assessment**. A baseline of households in transitional/short-term facilities for assessment purposes, indicate the number of households whose tenure exceeded 24 months.

STRMU Assistance: Stable Housing is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period and there is reasonable expectation that additional support is not needed in order to maintain permanent housing living situation (as this is a time-limited form of housing support) as reported under housing status: Maintain Private Housing with subsidy; Other Private with Subsidy; Other HOPWA support; Other Housing Subsidy; and Institution. Temporarily Stable, with Reduced Risk of Homelessness is the sum of the number of households that accessed assistance for some portion of the permitted 21-week period or left their current housing arrangement for a transitional facility or other temporary/non-permanent housing arrangement and there is reasonable expectation additional support will be needed to maintain housing arrangements in the next year, as reported under housing status: Likely to maintain current housing arrangements, with additional STRMU assistance; Transitional Facilities/Short-term; and Temporary/Non-Permanent Housing arrangements Unstable Situation is the sum of number of households reported under housing status: Emergency Shelter; Jail/Prison; and Disconnected.

**End of PART 5** 

# PART 6: Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY)

The Annual Report of Continued Usage for HOPWA Facility-Based Stewardship Units is to be used in place of Part 7B of the CAPER if the facility was originally acquired, rehabilitated or constructed/developed in part with HOPWA funds but no HOPWA funds were expended during the operating year. Scattered site units may be grouped together on one page.

Grantees that used HOPWA funding for new construction, acquisition, or substantial rehabilitation are required to operate their facilities for HOPWA eligible individuals for at least ten (10) years. If non-substantial rehabilitation funds were used, they are required to operate for at least three (3) years. Stewardship begins once the facility is put into operation.

Operating Year for this report

Note: See definition of Stewardship Units.

1	General	inform.	a4: am
Ι.	General	i intorm	amon

HUD Grant Number(s)		From (mm/dd/yy) To (mm/dd/yy)	☐ Final Yr	
N/A		$\square$ Yr 1; $\square$ Yr 2; $\square$ Yr 3; $\square$ Yr 4;	$\square$ Yr 5; $\square$ Yr 6;	
		$\square$ Yr 7; $\square$ Yr 8; $\square$ Yr 9; $\square$ Yr 10	)	
Grantee Name		Date Facility Began Operations (mm/dd	(yy)	
N/A		N/A		
2 Number of Units and Non-HODWA	Ermanditunas			
2. Number of Units and Non-HOPWA 1	Expenditures			
Facility Name: N/A	Number of Stewardship Units Developed with HOPWA funds	Amount of Non-HOPWA Funds Ex Stewardship Units during th		
Total Stewardship Units	N/A	N/A		
(subject to 3- or 10- year use periods)				
3. Details of Project Site				
Project Sites: Name of HOPWA-funded project	N/A			
Site Information: Project Zip Code(s)	N/A			
Site Information: Congressional District(s)	N/A			
Is the address of the project site confidential?				

End of PART 6

N/A

If the site is not confidential:

different from facility address

Please provide the contact information, phone,

email address/location, if business address is

### Part 7: Summary Overview of Grant Activities

# A. Information on Individuals, Beneficiaries, and Households Receiving HOPWA Housing Subsidy Assistance (TBRA, STRMU, Facility-Based Units, Permanent Housing Placement and Master Leased Units ONLY)

**Note:** Reporting for this section should include ONLY those individuals, beneficiaries, or households that received and/or resided in a household that received HOPWA Housing Subsidy Assistance as reported in Part 3, Chart 1, Row 7, Column b. (e.g., do not include households that received HOPWA supportive services ONLY).

#### Section 1. HOPWA-Eligible Individuals Who Received HOPWA Housing Subsidy Assistance

#### a. Total HOPWA Eligible Individuals Living with HIV/AIDS

In Chart a., provide the total number of eligible (and unduplicated) <u>low-income individuals living with HIV/AIDS</u> who qualified their household to receive HOPWA housing subsidy assistance during the operating year. This total should include only the individual who qualified the household for HOPWA assistance, NOT all HIV positive individuals in the household.

Individuals Served with Housing Subsidy Assistance	
Number of individuals with HIV/AIDS who qualified their household to receive HOPWA housing subsidy assistance.	178

### **Chart b. Prior Living Situation**

In Chart b, report the prior living situations for all Eligible Individuals reported in Chart a. In Row 1, report the total number of individuals who continued to receive HOPWA housing subsidy assistance from the prior operating year into this operating year. In Rows 2 through 17, indicate the prior living arrangements for all new HOPWA housing subsidy assistance recipients during the operating year.

**Data Check:** The total number of eligible individuals served in Row 18 equals the total number of individuals served through housing subsidy assistance reported in Chart a above.

	Category	Total HOPWA Eligible Individuals Receiving Housing Subsidy Assistance
1.	Continuing to receive HOPWA support from the prior operating year	83
New	Individuals who received HOPWA Housing Subsidy Assistance support during Operating Year	
2.	Place not meant for human habitation (such as a vehicle, abandoned building, bus/train/subway station/airport, or outside)	8
3.	Emergency shelter (including hotel, motel, or campground paid for with emergency shelter voucher)	
4.	Transitional housing for homeless persons	1
5.	Total number of new Eligible Individuals who received HOPWA Housing Subsidy Assistance with a Prior Living Situation that meets HUD definition of homelessness (Sum of Rows 2 – 4)	9
6.	Permanent housing for formerly homeless persons (such as Shelter Plus Care, SHP, or SRO Mod Rehab)	
7.	Psychiatric hospital or other psychiatric facility	1
8.	Substance abuse treatment facility or detox center	1
9.	Hospital (non-psychiatric facility)	2
10.	Foster care home or foster care group home	
11.	Jail, prison or juvenile detention facility	
12.	Rented room, apartment, or house	34
13.	House you own	6
14.	Staying or living in someone else's (family and friends) room, apartment, or house	14
15.	Hotel or motel paid for without emergency shelter voucher	16
16.	Other	1
17.	Don't Know or Refused	11
18.	TOTAL Number of HOPWA Eligible Individuals (sum of Rows 1 and 5-17)	178

### c. Homeless Individual Summary

In Chart c, indicate the number of eligible individuals reported in Chart b, Row 5 as homeless who also are homeless Veterans and/or meet the definition for Chronically Homeless (See Definition section of CAPER). The totals in Chart c do <u>not</u> need to equal the total in Chart b, Row 5.

Category	Number of Homeless Veteran(s)	Number of Chronically Homeless
HOPWA eligible individuals served with HOPWA Housing Subsidy Assistance	3	9

#### Section 2. Beneficiaries

In Chart a, report the total number of HOPWA eligible individuals living with HIV/AIDS who received HOPWA housing subsidy assistance (*as reported in Part 7A, Section 1, Chart a*), and all associated members of their household who benefitted from receiving HOPWA housing subsidy assistance (resided with HOPWA eligible individuals).

Note: See definition of HOPWA Eligible Individual

*Note:* See definition of <u>Transgender</u>. *Note:* See definition of <u>Beneficiaries</u>.

**Data Check:** The sum of <u>each</u> of the Charts b & c on the following two pages equals the total number of beneficiaries served with HOPWA housing subsidy assistance as determined in Chart a, Row 4 below.

a. Total Number of Beneficiaries Served with HOPWA Housing Subsidy Assistance

Individuals and Families Served with HOPWA Housing Subsidy Assistance	Total Number
1. Number of individuals with HIV/AIDS who qualified the household to receive HOPWA housing subsidy assistance (equals the number of HOPWA Eligible Individuals reported in Part 7A, Section 1, Chart a)	178
2. Number of ALL other persons <b>diagnosed</b> as HIV positive who reside with the HOPWA eligible individuals identified in Row 1 and who benefitted from the HOPWA housing subsidy assistance	2
3. Number of ALL other persons <b>NOT diagnosed</b> as HIV positive who reside with the HOPWA eligible individual identified in Row 1 and who benefited from the HOPWA housing subsidy	43
4. TOTAL number of ALL <u>beneficiaries</u> served with Housing Subsidy Assistance (Sum of Rows 1, 2, & 3)	223

#### b. Age and Gender

In Chart b, indicate the Age and Gender of all beneficiaries as reported in Chart a directly above. Report the Age and Gender of all HOPWA Eligible Individuals (those reported in Chart a, Row 1) using Rows 1-5 below and the Age and Gender of all other beneficiaries (those reported in Chart a, Rows 2 and 3) using Rows 6-10 below. The number of individuals reported in Row 11, Column E. equals the total number of beneficiaries reported in Part 7, Section 2, Chart a, Row 4.

	HOPWA Eligible Individuals (Chart a, Row 1)						
		Α.	В.	C.	D.	Е.	
		Male	Female	Transgender M to F	Transgender F to M	TOTAL (Sum of Columns A-D)	
1.	Under 18						
2.	18 to 30 years	13	7	3		23	
3.	31 to 50 years	37	27	4		68	
4.	51 years and Older	51	34	2		87	
5.	Subtotal (Sum of Rows 1-4)	101	68	9		178	
		A	ll Other Benefici	aries (Chart a, Rows 2	and 3)		
		Α.	B.	C.	D.	E.	
		Male	Female	Transgender M to F	Transgender F to M	TOTAL (Sum of Columns A-D)	
6.	Under 18	11	17			28	
7.	18 to 30 years	9	1			10	
8.	31 to 50 years	2	2			4	
9.	51 years and Older	1	2			3	
10.	Subtotal (Sum of Rows 6-9)	23	22			45	
			Total Benefi	ciaries (Chart a, Row 4			
11.	TOTAL (Sum of Rows 5 & 10)	124	90	9		223	

#### c. Race and Ethnicity\*

In Chart c, indicate the Race and Ethnicity of all beneficiaries receiving HOPWA Housing Subsidy Assistance as reported in Section 2, Chart a, Row 4. Report the <u>race</u> of all HOPWA eligible individuals in Column [A]. Report the <u>ethnicity</u> of all HOPWA eligible individuals in column [B]. Report the <u>race</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [C]. Report the <u>ethnicity</u> of all other individuals who benefitted from the HOPWA housing subsidy assistance in column [D]. The summed total of columns [A] and [C] equals the total number of beneficiaries reported above in Section 2, Chart a, Row 4.

Category		HOPWA Eligible Individuals		All Other Beneficiaries	
		[A] Race [all individuals reported in Section 2, Chart a, Row 1]	[B] Ethnicity [Also identified as Hispanic or Latino]	[C] Race [total of individuals reported in Section 2, Chart a, Rows 2 & 3]	[D] Ethnicity [Also identified as Hispanic or Latino]
1.	American Indian/Alaskan Native				
2.	Asian				
3.	Black/African American	153	3	35	3
4.	Native Hawaiian/Other Pacific Islander				
5.	White	21	3	8	3
6.	American Indian/Alaskan Native & White	1	1		
7.	Asian & White				
8.	Black/African American & White	2	1		
9.	American Indian/Alaskan Native & Black/African American	1			
10.	Other Multi-Racial			2	1
11.	Column Totals (Sum of Rows 1-10)	178	8	45	7

Data Check: Sum of Row 11 Column A and Row 11 Column C equals the total number HOPWA Beneficiaries reported in Part 3A, Section 2, Chart a, Row 4.

#### Section 3. Households

#### Household Area Median Income

Report the income(s) for all households served with HOPWA housing subsidy assistance.

**Data Check**: The total number of households served with HOPWA housing subsidy assistance should equal Part 3C, Row 7, Column b and Part 7A, Section 1, Chart a. (Total HOPWA Eligible Individuals Served with HOPWA Housing Subsidy Assistance).

**Note:** Refer to <a href="https://www.huduser.gov/portal/datasets/il.html">https://www.huduser.gov/portal/datasets/il.html</a> for information on area median income in your community.

	Percentage of Area Median Income	Households Served with HOPWA Housing Subsidy Assistance		
1.	0-30% of area median income (extremely low)	64		
2.	31-50% of area median income (very low)	74		
3.	51-80% of area median income (low)	40		
4.	Total (Sum of Rows 1-3)	178		

<sup>\*</sup>Reference (data requested consistent with Form HUD-27061 Race and Ethnic Data Reporting Form)

# Part 7: Summary Overview of Grant Activities B. Facility-Based Housing Assistance

Complete one Part 7B for each facility developed or supported through HOPWA funds.

Do not complete this Section for programs originally developed with HOPWA funds but no longer supported with HOPWA funds. If a facility was developed with HOPWA funds (subject to ten years of operation for acquisition, new construction and substantial rehabilitation costs of stewardship units, or three years for non-substantial rehabilitation costs), but HOPWA funds are no longer used to support the facility, the project sponsor should complete Part 6: Continued Usage for HOPWA Facility-Based Stewardship Units (ONLY).

Complete Charts 2a, Project Site Information, and 2b, Type of HOPWA Capital Development Project Units, for all Development Projects, including facilities that were past development projects, but continued to receive HOPWA operating dollars this reporting year.

1	1. Project Sponsor Agency Name (Required)					
	Virginia Supportive Housing					

# 2. Capital Development

2a. Project Site Information for HOPWA Capital Development of Projects (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this reporting year)

Note: If units are scattered-sites, report on them as a group and under type of Facility write "Scattered Sites."

De	Type of velopment s operating year	HOPWA Funds Expended this operating year (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of Facility: Stratford House		
□ New construction         \$           □ Rehabilitation         \$           □ Acquisition         \$           ⋈ Operating         \$ 131,290			\$ \$ \$	Type of Facility [Check only one box.]  □ Permanent housing □ Short-term Shelter or Transitional housing □ Supportive services only facility		
a.	Purchase/lease of property:  Rehabilitation/Construction Dates:			Date (mm/dd/yy):  Date started: Date Completed:		
c.	Operation dates: 07/1/19-6/30/20			Date residents began to occupy: N/A  ☐ Not yet occupied		
d. e.	Date supportive services began:  Number of units in the facility:			Date started:  ☐ Not yet providing services  HOPWA-funded units = 10 Total Units = 10		
f.	Is a waiting list maintained for the facility?		·	<ul> <li>✓ Yes ☐ No</li> <li>If yes, number of participants on the list at the end of operating year</li> </ul>		
g.	What is the address of the facility (if different from business address)?		ent from business address)?			
h.	Is the address of the project site confidential?		al?	<ul> <li>         ⊠ Yes, protect information; do not publish list     </li> <li>         □ No, can be made available to the public     </li> </ul>		

# 2b. Number and Type of HOPWA Capital Development Project Units (For Current or Past Capital Development Projects that receive HOPWA Operating Costs this Reporting Year)

For units entered above in 2a, please list the number of HOPWA units that fulfill the following criteria:

	Number Designated for the Chronically Homeless	Number Designated to Assist the Homeless	Number Energy- Star Compliant	Number 504 Accessible
Rental units constructed (new) and/or acquired with or without rehab				
Rental units rehabbed				
Homeownership units constructed (if approved)				

# 3. Units Assisted in Types of Housing Facility/Units Leased by Project Sponsor

<u>Charts 3a, 3b, and 4 are required for each facility</u>. In Charts 3a and 3b, indicate the type and number of housing units in the facility, including master leased units, project-based or other scattered site units leased by the organization, categorized by the number of bedrooms per unit.

*Note:* The number units may not equal the total number of households served.

Please complete separate charts for each housing facility assisted. Scattered site units may be grouped together.

3a.	Check one only
$\geq$	Permanent Supportive Housing Facility/Units
	Short-term Shelter or Transitional Supportive Housing Facility/Units

## **3b.** Type of Facility

Complete the following Chart for all facilities leased, master leased, project-based, or operated with HOPWA funds during the reporting year.

Name of Project Sponsor/Agency Operating the Facility/Leased Units:

Type of housing facility operated by the project sponsor		Total Number of <u>Units</u> in use during the Operating Year Categorized by the Number of Bedrooms per Units					
		SRO/Studio/0 bdrm	1 bdrm	2 bdrm	3 bdrm	4 bdrm	5+bdrm
a.	Single room occupancy dwelling	10					
b.	Community residence						
c.	Project-based rental assistance units or leased units						
d.	Other housing facility Specify:						

#### 4. Households and Housing Expenditures

Enter the total number of households served and the amount of HOPWA funds expended by the project sponsor on subsidies for housing involving the use of facilities, master leased units, project based or other scattered site units leased by the organization.

Housing Assistance Category: Facility Based Housing		Output: Number of Households	Output: Total HOPWA Funds Expended during Operating Year by Project Sponsor		
a.	Leasing Costs				
b.	Operating Costs	11	\$131,290		
c.	Project-Based Rental Assistance (PBRA) or other leased units				
d.	Other Activity (if approved in grant agreement) <b>Specify:</b>				
e.	Adjustment to eliminate duplication (subtract)				
f.	TOTAL Facility-Based Housing Assistance (Sum Rows a through d minus Row e)	11	\$131,290		