

**HOMELESS COALITION OF THE  
ALABAMA GULF COAST  
CONTINUUM OF CARE**

**AL-501**



**2016 ANNUAL REPORT**

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Dear Friends and Supporters:

While we have faced several challenges over the last year, we have steadfastly stayed true to our mission and vision of assisting homeless individuals and families in our community. I am honored to have served as the Continuum of Care (CoC) Board Chair for the past six years. Thank you to my fellow board members for their hard work, dedication and commitment to the critical task of addressing and ending homelessness in our community.

The Department of Housing and Urban Development (HUD) requires each CoC to be comprised of members who represent a cross-section of the communities it serves; in our case, those communities are Mobile and Baldwin Counties. The CoC currently has members from local governments, businesses, civic groups, community agencies, banks, healthcare entities, homeless service providers, institutions of higher learning, housing authorities, mental health providers, and educational entities.

Each year, according to the requirements of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, the CoC decides which projects will be funded in our community through a ranking and prioritization process, which is explained in this report. During the 2015-2016 all Tier 1 projects were funded and approved by HUD for a total of \$3,851,277. Unfortunately, Tier 2 projects were not funded this year resulting in a deficit of \$293,907.

A community-wide Housing Summit is in the planning stage. The purpose of the summit is to engage business, industry and faith-based leaders in our community to increase awareness and build capacity to address homelessness.

It is my fervent hope, as we continue to educate our community about the many faces of homelessness, we will see our common threads and not our differences. Collaborating with our community stakeholders will encourage innovative solutions and reveal additional resources to end homelessness.

The CoC Board and its member organizations express our deepest gratitude to Housing First, Inc. for providing staff support for the CoC in accomplishing its mission of preventing, reducing and eventually ending homelessness.

In Partnership,

*Denise Riemer, LCSW-PIP*

Denise Riemer, LCSW-PIP, Chair, Continuum of Care Board

# WHAT IS THE CONTINUUM OF CARE (CoC)

A group of representatives from local organizations that are organized to plan for and provide a system of outreach, engagement, and assessment; emergency shelter; rapid re-housing; transitional housing, permanent housing; and prevention strategies to address the various needs of the homeless or those at risk of homelessness.

## EXAMPLES OF CoC REPRESENTATIVES

- ◆ Nonprofit homelessness assistance providers
- ◆ Victim services providers
- ◆ Faith-based organizations
- ◆ Governments
- ◆ Businesses
- ◆ Advocates
- ◆ Public housing agencies
- ◆ School districts
- ◆ Social services providers
- ◆ Mental health agencies
- ◆ Hospitals
- ◆ Universities
- ◆ Affordable housing developers
- ◆ Law enforcement
- ◆ Organizations serving veterans
- ◆ Homeless or formerly homeless individuals

# **RESPONSIBILITIES OF A CONTINUUM OF CARE**

- ◆ Conducting the federally required year-round community-organizing needs assessment and planning process for addressing and ending homelessness.
- ◆ Developing and submitting an annual application to HUD for the jurisdictionally assigned pro rata share of federal grants available for sponsor-based projects to serve and house homeless citizens.
- ◆ Monitoring and making recommendations regarding projects that are funded through this process. Coordinating, implementing and oversight of outcomes.
- ◆ Operating the federally mandated Homeless Management Information Systems.
- ◆ Reviewing and approving a Point in Time County plan annually and empowering a lead agency to coordinate efforts to conduct the count.
- ◆ Making resource information about homelessness, services and housing for homeless citizens available to the citizens of the two-county area.

# HOMELESSNESS IN ALABAMA



## STATE OF ALABAMA

Year Round Beds 3,489

Sheltered 2,893

Unsheltered 1,218

## MOBILE & BALDWIN COUNTIES

Year Round Beds 476

Sheltered 387

Unsheltered 236

Data above is derived from state and local  
Point-In-Time and Housing Inventory Counts (2016).

# COORDINATED ENTRY

Coordinated Entry is a system designed to unite provider efforts, create a real-time list of individuals experiencing a housing crisis in our community, and quickly link these individuals with the resources they need to prevent or end a housing crisis. Coordinated Entry works to ensure all people experiencing a housing crisis in a defined geographic area are equally and fairly assessed, and resources are applied first to those individuals and households with the greatest service needs and highest levels of vulnerability.



**2,997**  
**Clients**  
**Assessed**



**1267**  
**Individual**  
**Referrals**



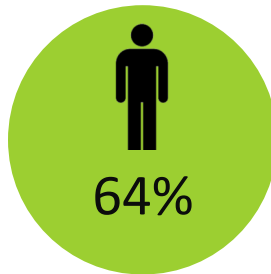
**810**  
**Achieved**  
**Permanent Housing**

# WHO IS EXPERIENCING HOMELESSNESS

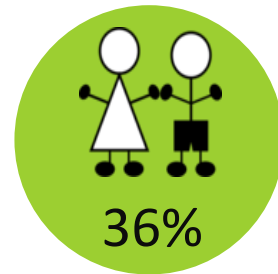
(Based on data obtained through the community's Coordinated Entry program)



\$0 - \$1,000  
MONTHLY INCOME



ADULTS



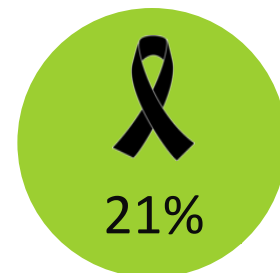
CHILDREN



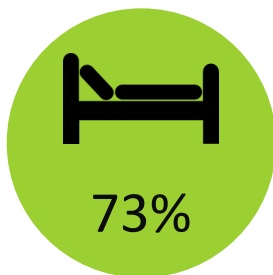
DISABLED



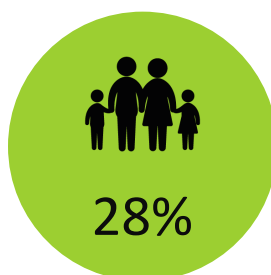
MENTAL HEALTH  
ISSUES



EXPERIENCED  
DOMESTIC VIOLENCE



SLEEPING ON STREETS  
OR IN A SHELTER



FAMILIES

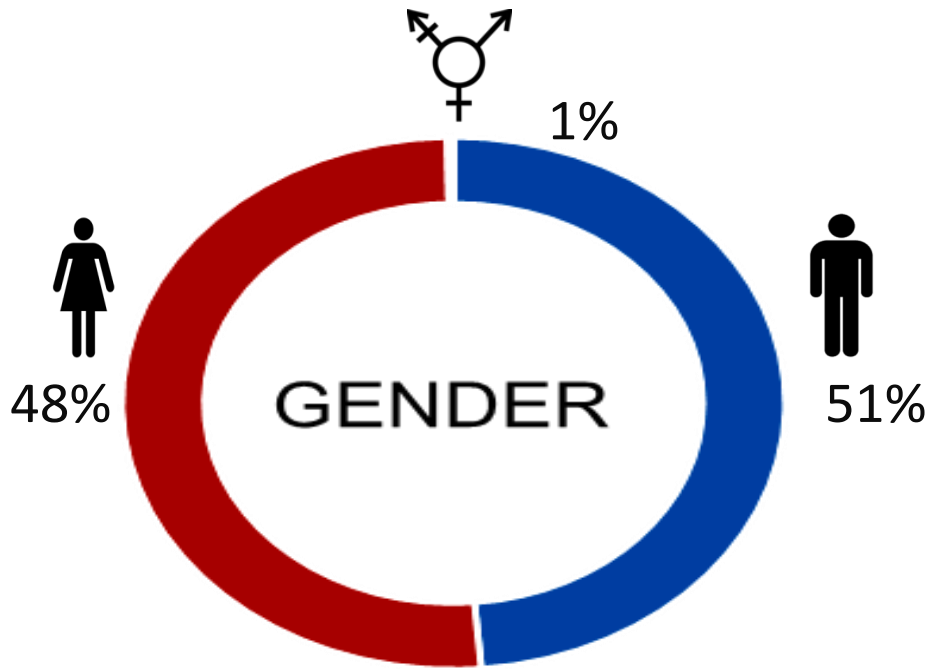


PUBLIC SCHOOL  
STUDENTS ARE  
HOMELESS

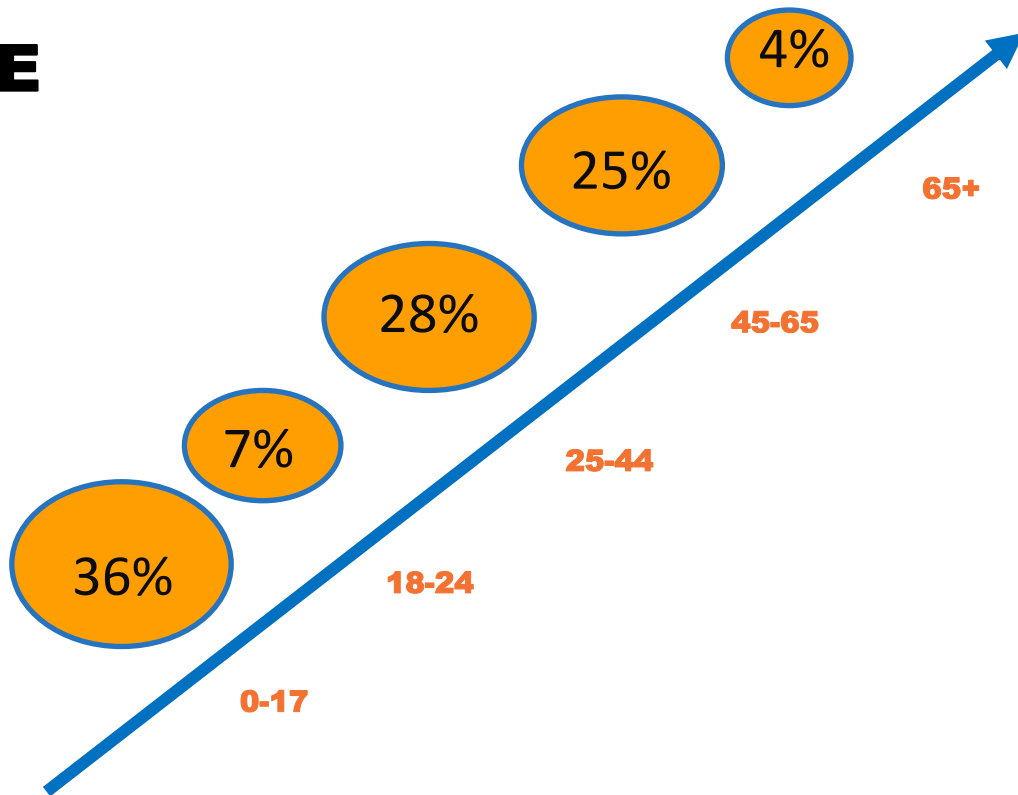


# WHO IS EXPERIENCING HOMELESSNESS

(Based on data obtained through the community's Coordinated Entry program)



## AGE



# SUPPORTIVE SERVICES FOR VETERAN FAMILIES

# 225

## VETERANS

Factors such as joblessness, limited income, disabilities, mental illness, substance use, poor credit, criminal histories, and traumatic events affect housing stability. Supportive Services for Veteran Families (SSVF) program is designed to help Veteran families address these issues and secure permanent housing. SSVF provides a short, intensive period of case management to link families to benefits and provide temporary financial assistance with housing or moving



# 84%

## OBTAINED PERMANENT

# HOMELESS MANAGEMENT INFORMATION SYSTEM

A Homeless Management Information System (HMIS) is a local information technology system used to collect data on the individuals and families seeking services designed to prevent and end homelessness, as well as the services and housing supports provided these clients. The software ensures compliance with Housing and Urban Development's data collection, management, and reporting standards.

## HMIS 2016 PARTNERS

- ◆ AltaPointe Health Systems
- ◆ Dumas Wesley
- ◆ Family Promise of Mobile
- ◆ Franklin Primary Health Care
- ◆ McKemie Place
- ◆ Mobile Area Interfaith Conference
- ◆ Salvation Army of Coastal Alabama
- ◆ St. Mary's Home
- ◆ Volunteers of America
- ◆ Waterfront Rescue Mission

# 44

**Trainings  
Conducted**



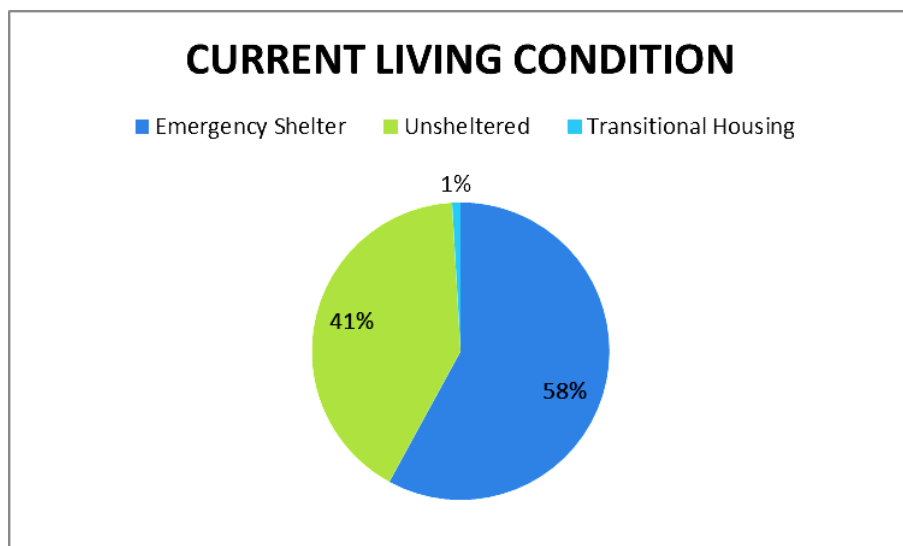
# POINT-IN-TIME

During the last 10 days of January, communities nation-wide participate in the HUD mandated annual Point-In-Time count to capture a snapshot of the homelessness within the United States. On the night of January 27, 2016, volunteers in our community surveyed sheltered and unsheltered individuals experiencing homelessness.



**623**  
INDIVIDUALS  
WERE IDENTIFIED AS  
HOMELESS IN 2016

**112**  
VOLUNTEERS  
PARTICIPATED IN  
THE POINT-IN-TIME  
COUNT



# PROJECT HOMELESS CONNECT

Mobile Project Homeless Connect is designed to provide a centralized location for needed services to the homeless of Mobile and Baldwin Counties at no cost to them. The event provided health and wellness services, legal assistance, dental and vision screenings, along with access to housing assistance and mainstream resources (food stamps, identifications, etc.)

**345**

**CLIENTS  
ATTENDED**



**177 CLIENTS SEEN AT  
THE HEALTH AND  
WELLNESS CLINIC**

**550**

**VOLUNTEERS  
ASSISTED**



**77 CLIENTS PROVIDED  
LEGAL SERVICES**



**93 STATE  
IDENTIFICATIONS  
ISSUED**



**41 INDIVIDUAL  
SERVICE  
PROVIDERS**



**133 CLIENTS  
TRANSPORTED BY BUS**



**12 EMPLOYERS TAKING  
APPLICATIONS**

# 2015-2016 FUNDING

## CoC Program Funding

Community Housing Program	944,235
Community Connections Network	611,799
Rapid Re-Housing for Families & Youth	575,626
Disabled Homeless Program	499,247
Chronic Permanent Housing	405,329
Shelter Plus Care	280,307
Rapid Re-Housing	191,866
Community Connections Network Expansion	141,174
Homeless Management Information System	107,000
CoC Planning	<u>47,951</u>
Total	<b>3,804,534</b>

## Emergency Solutions Grants

### Alabama Department of Economic and Community Affairs (ADECA)

Family Haven Emergency Shelter	139,997
Domestic Violence Shelter	89,000
Women's Shelter	54,000
Rapid Re-Housing	43,999
Transitional Housing	40,000
Prevention	37,052
Homeless Management Information System	12,280
Administrative	<u>12,280</u>
Total	<b>428,608</b>

## Mobile County Commission

Rapid Re-Housing	59,373
Prevention	39,582
Homeless Management Information System	25,226
Administrative	<u>8,069</u>
Total	<b>132,250</b>

## City of Mobile

Homeless Management Information System	60,000
Domestic Violence Shelter	40,000
Women's Shelter	27,826
Family Shelter	26,000
Transitional Housing	<u>34,875</u>
Total	<b>188,701</b>

# PROJECT ELIGIBILITY

Renewal projects must meet minimum project eligibility, capacity, timeliness and performance standard identified in the NOFA or they will be rejected from consideration for funding. When considering renewal projects for award, the Board will review information in LOCCS; Annual Performance Reports (APRs); and information provided from the local HUD/CPDS Field Office including monitoring reports and A-133 audit reports as applicable, and performance standard on prior grants, and will assess projects using the following criteria

- ◆ Project must meet performance plans and goals established in the initial application.
- ◆ Project demonstrated all timeliness standards for grants being renewed, include the standards for the expenditure of grant funds have been met.
- ◆ Project's performance in assisting program participants to achieve and maintain independent living and record of success, except HMIS-dedicated project are not required to meet this standard.
- ◆ Evidence that the project has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval or has lost a project site.

All projects must meet basic eligibility requirements as outlined on pp. 20-22 of the 2016 NOFA.

# PROJECT RANKING

HUD requires the CoC to rank all projects into two Tiers. Tier 1 is equal to 93 percent of the CoC's fiscal year 2016 ARD. Tier 2 is the difference between Tier 1 and the CoC's Annual Renewal Demand (ARD) plus any amount available for a permanent housing bonus. The CoC's ranking process is intended to be a coordinated, inclusive, and outcome-oriented community process for the ranking and selection of project applications.

- ◆ The CoC considers the objective criteria and data elements of each applicant's Annual Performance Report (APR) to rank projects. Where possible the CoC will review individualized reports to rank projects according to their performance measure.
  - ◆ Reports from Homeless Management Information System (HMIS)
  - ◆ Annual Performance Report (APR)
    - ◆ Data quality
    - ◆ Bed utilization
    - ◆ Number of persons served
    - ◆ Housing stability measure (% of persons who retained or exited to permanent housing)
    - ◆ Total income measure (% of adults who obtained additional income of any kind)
    - ◆ Earned income measure (% of adults who obtained additional income from employment)



# PROJECT RANKING

- ◆ The CoC considers the performance of projects within the Coordinated Entry System and utilization of the Vulnerability Index Service Prioritization and Decision Assistance Tool (VI-SPDAT), which allows for uniform client prioritization based on multiple factors.
  - ◆ Reports from Homeless Management Information System (HMIS)
  - ◆ Referral reports
    - ◆ Adherence to the "Housing First" model
      - ◆ Referrals accepted unless eligibility is not met under HUD's criteria
    - ◆ Adherence to the Coordinated Entry Process
      - ◆ Percent of appropriate prioritized referrals accepted (a minimum of 75% is required)
- ◆ In addition to the objective criteria outlined above, the CoC will consider each project on its effectiveness in addressing HUD's 2016 Policy and Program Priorities.



# ANNUAL COST OF HOMELESSNESS



= \$22,493,737

ANNUAL COST OF HOMELESSNESS TO OUR COMMUNITY



= \$2,661,875

ANNUAL COST OF PERMANENT HOUSING

# ANNUAL COST OF HOMELESSNESS

**HOMELESSNESS IS A COMMUNITY ISSUE.  
LET US UNITE AND END HOMELESSNESS,  
SAVING OUR COMMUNITY AN ANNUAL  
AMOUNT OF**

**\$19,831,862**





**Denise Riemer**  
**Chair**



**LaKeisha McGill**  
**Vice-Chair**



**Ira Bates**  
**Member**

PHOTO  
NOT  
AVAILABLE

**Major Mark Brown**  
**Member**



**James Calvert**  
**Member**



**Phillip Davenport**  
**Member**



**Christine L. Fouty M.D.**  
**Member**



**Warren Greene**  
**Member**



**Vickery Jones**  
**Member**

**BOARD OF DIRECTORS**

PHOTO  
NOT  
AVAILABLE

**Zina May**  
**Member**



**Pam Maumenee**  
**Member**



**Marie Mhoon**  
**Member**



**Margaret Moore-Nadler**  
**Member**

PHOTO  
NOT  
AVAILABLE

**Beverly Reed**  
**Member**



**Stephanie Streeter**  
**Member**



**Herman Tinsley**  
**Member**



**Carol Thompson**  
**Member**

PHOTO  
NOT  
AVAILABLE

**Michon Trent**  
**Member**

**BOARD OF DIRECTORS**

**ORGANIZATION****REPRESENTATIVES**

AIDS Alabama South	Lanita	Kharel
AIDS Alabama South	Jasmine	Pettway
Alabama Department of Mental Health	Zina	May
Alabama Department of Mental Health	Vickery	Jones
AltaPointe Health Systems	Pam	Maumenee
Bancorp South Bank	Terry	Harbin
Bishop State Community College	Carol	Thompson
City of Mobile	Michon	Trenton
City of Mobile	Beverly	Reed
Department of Human Resources	Stephanie	Streeter
Dumas Wesley Community Center	Kate	Carver
Ecumenical Ministries, Inc.	Sally	Deane
Exodyne, Inc.	Lakeisha	McGill
Family Promise of Costal Alabama	Diane	McCaskey
Franklin Primary Health Care for the Homeless	Jimmy	Calvert
Homeless Advocate - Retired, Mobile Chamber of Commerce	Herman	Tinsley

**ORGANIZATION****REPRESENTATIVES**

Housing First, Inc.	Eric	Jefferson
IPC - The Hospitalist Company / Mobile Infirmiry Hospital	Dr. Christine	Fouty
Legal Services of Alabama	Ann	Brown
Mobile Area Interfaith Conference	Dan	Williams
Mobile Development Enterprises, Community	Marie	Mhoon
Mobile Infirmiry Hospital	Dr. Kenneth	Brewington
McKemie Place	Jessica	James
Mobile County Commission	Phillip	Davenporte
Mobile County Public Schools	Denise	Riemer
Salvation Army	Major Mark	Brown
Salvation Army	Angel	Steadman
United Way of Southwest Alabama	Clifford	Grimes
USA Medical Center	Warren	Greene
USA School of Nursing	Margaret	Moore-Nadler
Volunteers of America Southeast	Emily	Head
W.W. Grainger, Inc.	Michael	Guillory

**CoC GENERAL MEMBERS**

**HOMELESS COALITION OF THE  
ALABAMA GULF COAST  
CONTINUUM OF CARE**

**AL-501**



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