

Part I: CoC Organizational Structure

HUD-Defined CoC Name:*	CoC Number*
Sarasota/Bradenton/Sarasota, Manatee Counties CoC	FL-500

A: CoC Lead Organization Chart

CoC Lead Organization: Suncoast Partnership to End Homelessness, Inc.		
CoC Contact Person: Richard Martin, Executive Director		
Contact Person's Organization Name: Suncoast Partnership to End Homelessness, Inc.		
Street Address: 1445 2nd Street		
City: Sarasota	State: FL	Zip: 34236
Phone Number: (941) 955-8987	Fax Number: (941) 365-4368	
Email Address: Richard.martin@suncoastpartnership.org		

B: CoC Geography Chart

Geographic Area Name	6-digit Code	Geographic Area Name	6-digit Code
Manatee County	129075		
City of Bradenton	120270		
Sarasota County	129115		
City of Sarasota	122766		

CoC Structure and Decision-Making Processes

C: CoC Groups and Meetings Chart

CoC Planning Groups		Meeting Frequency (check only one column)				Enter the number of organizations/entities that are members of each CoC planning group listed on this chart.
		At Least Monthly	At Least Quarterly	At Least Biannually	Annually	
CoC Primary Decision-Making Group (list only one group)						
Name:	Suncoast Partnership Board of Directors		X			26
Role:	Oversees Board policy and adherence by staff, provides guidance to Executive Director on personnel matters, policy and procedure, subcommittees; Assists in strategic planning; Approves grant applications for submission to HUD.					
Other CoC Committees, Sub-Committees, Workgroups, etc.						
Name:	Executive Committee of Board of Directors		X			5
Role:	Coordinates the development of the Continuum of Care Plan and process which provides the frame work for a seamless array of emergency, transitional and permanent housing and services to address the needs of the homeless.					
Name:	Financial Resource, Funds Integration & Grants Committee		X			6
Role:	Reviews the proposed annual operating budget of the Corporation and oversees resource development, investment of corporate funds, management, and annual budget preparation					
Name:	Suncoast Partnership to End Homelessness		X			80
Role:	Addresses current issues and priorities regarding the homeless in Sarasota and Manatee Counties and functions as a mechanism for advocacy and education of the community at large about homelessness; improves CoC-wide participation in mainstream programs					
Name:	Point-In-Time Committee		X			30
Role:	Secures enumerators for point-in-time survey; Assigns enumerators a specific area for the survey; Responsible for all the planning components and implementation of the point-in-time survey and follow up with all housing providers.					

D: CoC Planning Process Organizations Chart

	Specific Names of All CoC Organizations	Geographic Area Represented	Subpopulations Represented, if any* (no more than 2)	
PUBLIC SECTOR	STATE GOVERNMENT AGENCIES			
	State of Florida Division of Children & Families	129115, 129075		
	LOCAL GOVERNMENT AGENCIES			
	City of Bradenton	120270		
	City of Palmetto	129075		
	City of North Port Social Services	129075		
	City of Sarasota, City Commission	129115		
	Manatee County Community Services	129075		
	Manatee County, County Commission	129075		
	Manatee County, Comprehensive Planning Commission	129075		
	Sarasota County, County Commission	129115		
	Manatee County Public Health Department	129075		
	Sarasota County, Health & Human Services	129115		
	Sarasota County Health Department	129115		
	Sarasota County Veterans Commission	129115		
	PUBLIC HOUSING AGENCIES			
	Manatee County Housing Authority	129075		
	Sarasota County Community Land Trust	129115		
	Sarasota County, Office of Housing & Community Development	129115		
	SCHOOL SYSTEMS / UNIVERSITIES			
	Manatee Community College	129075		
	New College of Florida	129115		
	School Board of Sarasota County	129115	Y	
	School Board of Manatee County	129075	Y	
	USF, School of Social Work	129115, 129075		
	LAW ENFORCEMENT / CORRECTIONS			
	City of Bradenton Police Department	120270		
	City of Palmetto	122766		
	City of Sarasota Police Department	122766		
	Manatee County Sheriff's Department	129075		
	Public Defender's Office- 12 th Judicial Circuit	129115, 129075		
	Sarasota County Sheriff's Department	129115		
	LOCAL WORKFORCE INVESTMENT ACT (WIA) BOARDS			
	Suncoast Workforce Board	129115, 129075		
	NON-PROFIT ORGANIZATIONS			

	Specific Names of All CoC Organizations	Geographic Area Represented	Subpopulations Represented, if any* (no more than 2)
SUNCPRIVATE SECTOR	34 th St. Station	120270	
	All Faiths Food Bank	129115, 129075	
	American Red Cross	129115, 129075	
	Bridge of Hope	129075	
	Children First	129075	
	Coastal Behavioral Healthcare	129115	SMI
	Community Aids Network (CAN)	129115	HIV
	Community Coalition for Homelessness, Inc.	129075	
	Domestic Abuse Shelter DASH, Inc.	129115	DV
	Englewood Helping Hand	129115	
	Family Emergency Treatment Center	129075	SMI
	Family Resources	129075	
	Family Resources Manatee Runaway Youth Crisis Center	129075	Y
	First Step of Sarasota	129115, 129075	SA
	Goodwill of Manasota	129115, 129075	
	Gulfcoast Community Care	129115, 129075	
	Gulfcoast Legal Services	129115, 129075	
	Habitat for Humanity South Sarasota County	129115	
	Healthy Families	129075	
	Healthy Start	129075	
	Hispanic Latino Coalition	129115	
	HOPE Family Services	129075	DV
	Life link	129115	
	Manasota SOLVE	129075	
	Manatee Children's Services	129075	
	Manatee Coalition for Affordable Housing	129075	
	Manatee County Habitat for Humanity	129075	
	Manatee Glens	129075	SMI/SA
	Manatee Opportunity Council	129115, 129075	
	Open Door Resource Center	129075	
	Our Daily Bread	120270	SMI
	Project Challenge	129115	
	Project HEART (Homeless Education & Resource Team)	129115	
	Projects with Industry	129115	
	Renaissance Manor	129115	SMI
	Resource Connection for Kids	129075	
	Safe Place and Rape Crisis Center (SPARCC)	129115	DV
	Sarasota County Habitat for Humanity	129115	
	Sarasota Family YMCA, Inc.	129115	Y
	Second Chance Last Opportunity	129115	
Senior Friendship Centers	129115		
Step House	129075		

	Specific Names of All CoC Organizations	Geographic Area Represented	Subpopulations Represented, if any* (no more than 2)	
	Suncoast Center for Independent Living, Inc.	129115		
	Transitional Resources, Inc.	129075		
	Tri-County Counseling & Life Skills Center	129115		
	The Safe Place	120270		
	Step House	129115		
	Suncoast Partnership to End Homelessness	129115, 129075		
	United Way 211 Manasota	129115, 129075		
	Volunteers of America	129075	SA	
	Whole Child Project Manatee	129075		
	Women's Resources	129115		
	FAITH-BASED ORGANIZATIONS			
	Catholic Charities, Diocese of Venice	129115	HIV	
	Epiphany Cathedral	120270		
	FICC Faith International Christian Center	120270		
	First Presbyterian Church	122766		
	Gifts from God, Inc.	129115		
	Harvest Tabernacle	122766		
	House of Hope	129075		
	Jewish Family & Children's Service	129115		
	Lutheran Services, Florida	129115		
	Resurrection House	122766		
	Salvation Army, Manatee Corps	129075		
	Salvation Army, Sarasota Corps	129115		
	Sarasota Ministerial Alliance	122766, 129115		
	St. Martha's Catholic Church	122766		
	Throne of Grace	129115		
	FUNDERS / ADVOCACY GROUPS			
	City of Bradenton	120270		
	City of Sarasota	122766		
	State of Florida Department of Children & Families	129115, 129075		
	Manatee County Government	129075		
	Sarasota County Government	129115		
	City of Bradenton	120270		
	United Way of Manatee County	129075		
	United Way of Sarasota County	129115		
	The Community Foundation of Sarasota County	129115		
	The Glasser /Schoenbaum Human Services Center of Sarasota, Inc.	129115		
	The Gulf Coast Community Foundation of Venice	129115		
	United Way of South Sarasota County	129115		
	William G. Selby and Marie Selby Foundation	129115		

	Specific Names of All CoC Organizations	Geographic Area Represented	Subpopulations Represented, if any* (no more than 2)	
	BUSINESSES (BANKS, DEVELOPERS, BUSINESS ASSOCIATIONS, ETC.)			
	Coldwell Banker Residential Real Estate, Inc.	129075		
	Chris Craft	129115		
	Purmort Insurance Company	129115		
	Honeycomb Company of America	129075		
	Bradenton Herald	129075		
	Bradenton Downtown Development Authority	120270		
	Donzi Marine	129075		
	Icard, Merrill, Cullis et al	129115		
	Flowers Baking Company	129075		
	Fuji Corporation	129115		
	Laurel Civic Association	129115		
	Living Walls Furniture & Design	122766		
	Sarasota County Bar Association	129115		
	Sarasota County Library System	129115		
	HOSPITALS / MEDICAL REPRESENTATIVES			
	Manatee Rural Health	129075		
	Manatee Memorial Hospital	129075		
	Sarasota Memorial Hospital	129115		
	Veterans Services	129075, 129115	VET	
	We Care Manatee	129075		
	HOMELESS PERSONS			
	D. B., formerly homeless; board member (Sarasota)	129115		
	J. M. formerly homeless; staff member (Sarasota)			
	OTHER			

*Subpopulations Key: Seriously Mentally Ill (SMI), Substance Abuse (SA), Veterans (VET), HIV/AIDS (HIV), Domestic Violence (DV), and Youth (Y).

E: CoC Governing Structure Chart

1. Is the CoC's primary decision-making body a legally recognized organization (check one)? <input checked="" type="checkbox"/> Yes, a 501(c)(3) <input type="checkbox"/> Yes, a 501(c)(4) <input type="checkbox"/> Yes, other – specify: _____ <input type="checkbox"/> No, not legally recognized	
1. If your CoC were provided with additional administrative funds from HUD, would the primary decision-making body, or an agent designated by it (e.g. a city or non-profit organization), be able to be responsible for activities such as applying for HUD funding and serving as the grantee, providing project oversight, and monitoring? Explain. Yes. Suncoast Partnership to End Homelessness, Inc. has the capacity to apply for HUD funding, serve as grantee, monitor and provide project oversight as a lead agency or to a contracting non-profit agency. In addition, the Partnership has several collaborating agencies that work together to enhance services and provide needed resources who would be willing to apply for HUD funding, serve as grantee and/or provide project oversight.	
2. What percentage of the decision-making body membership represents the private sector, including non-profit providers, homeless or formerly homeless persons, advocates and consumer interests, etc.?	<u>90%</u>
4a. Indicate how the members of the primary decision-making body are selected (check all that apply): <input checked="" type="checkbox"/> Elected <input type="checkbox"/> Assigned/Volunteer <input type="checkbox"/> Appointed <input type="checkbox"/> Other – specify: _____	
4b. Briefly explain the selection process. (For example, if 5 members are appointed and 6 are elected, explain why this process was established and describe how it works.) Directors shall be elected and installed at the annual meeting of the Board of Directors. The Directors as of September 8, 2006 shall be divided into three groups serving staggered terms, with each group to be equal or nearly equal in number as possible. Members of the first group shall initially serve a 1-year terms; members of the second group shall initially serve a 2-year term; and members of the third group shall initially serve a 3-year term. Thereafter, successor members of each group shall serve terms of three years. Directors may not serve more than six consecutive years on the Board of directors. After an absence form the Board of Directors for at least one year, a person may be elected again to the Board of Directors. The Executive Committee of the Board of Directors shall convene annually for the purpose of preparing an official slate of nominees, which will be voted on by the Board of Directors.	
5. Indicate how the leaders of the primary decision-making body are selected (check all that apply): <input checked="" type="checkbox"/> Elected <input type="checkbox"/> Assigned/Volunteer <input type="checkbox"/> Appointed <input type="checkbox"/> Other – specify: _____	

F: CoC Project Review and Selection Chart

1. Open Solicitation	
a. Newspapers <input type="checkbox"/>	d. Outreach to Faith-Based Groups <input checked="" type="checkbox"/>
b. Letters/Emails to CoC Membership <input checked="" type="checkbox"/>	e. Announcements at CoC Meetings <input checked="" type="checkbox"/>
c. Responsive to Public Inquiries <input checked="" type="checkbox"/>	f. Announcements at Other Meetings <input checked="" type="checkbox"/>
2. Objective Rating Measures and Performance Assessment	
a. CoC Rating & Review Committee Exists <input checked="" type="checkbox"/>	j. Assess Spending (fast or slow) <input type="checkbox"/>
b. Review CoC Monitoring Findings <input checked="" type="checkbox"/>	k. Assess Cost Effectiveness <input type="checkbox"/>
c. Review HUD Monitoring Findings <input checked="" type="checkbox"/>	l. Assess Provider Organization Experience <input checked="" type="checkbox"/>
d. Review Independent Audit <input checked="" type="checkbox"/>	m. Assess Provider Organization Capacity <input checked="" type="checkbox"/>
e. Review HUD APR for Performance Results <input checked="" type="checkbox"/>	n. Evaluate Project Presentation <input checked="" type="checkbox"/>
f. Review Unexecuted Grants <input checked="" type="checkbox"/>	o. Review CoC Membership Involvement <input checked="" type="checkbox"/>
g. Site Visit(s) <input checked="" type="checkbox"/>	p. Review Match <input checked="" type="checkbox"/>
h. Survey Clients <input checked="" type="checkbox"/>	q. Review All Leveraging Letters (to ensure that they meet HUD requirements) <input checked="" type="checkbox"/>
i. Evaluate Project Readiness <input checked="" type="checkbox"/>	
3. Voting/Decision System	
a. Unbiased Panel / Review Committee <input type="checkbox"/>	d. One Vote per Organization <input checked="" type="checkbox"/>
b. Consumer Representative Has a Vote <input type="checkbox"/>	e. Consensus (general agreement) <input type="checkbox"/>
c. All CoC Members Present Can Vote <input type="checkbox"/>	f. Voting Members Abstain if Conflict of Interest <input checked="" type="checkbox"/>

G: CoC Written Complaints Chart

<p>Were there any written complaints received by the CoC regarding any CoC matter in the last 12 months?</p>	<p><input type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p>
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Part II: CoC Housing and Service Needs
H: CoC Services Inventory Chart

(1) Provider Organizations	(2) Prevention				(3) Outreach			(4) Supportive Services										
	Mortgage Assistance	Rental Assistance	Utilities Assistance	Counseling/Advocacy	Legal Assistance	Street Outreach	Mobile Clinic	Law Enforcement	Case Management	Life Skills	Alcohol & Drug Abuse	Mental Health Counseling	Healthcare	HIV/AIDS	Education	Employment	Child Care	Transportation
34 th Street Station											X							
American Red Cross						X		X							X			
Bradenton City Police						X	X											
Bridge of Hope									X	X					X			
Catholic Charities, Diocese of Venice	X	X	X	X				X					X	X			X	
Children First				X				X	X					X			X	
City of North Port Social Services	X	X	X		X											X		
Coastal Behavioral Healthcare				X						X	X	X						
Community Aids Network (CAN)				X				X			X	X	X	X				
Community Coalition on Homelessness (Manatee County)		X				X		X	X									X
Domestic Abuse Shelter (DASH, Inc.)				X				X	X					X				
Englewood Helping Hand	X	X	X															
Epiphany Cathedral (Mercy House Shelter)						X												
Family Emergency Treatment Center								X		X								
Family Resources Center Manatee			X					X		X								
First Step of Sarasota								X		X								
Gifts from God, Inc.								X										
Goodwill Industries, Manasota, Inc.	X		X													X		
Gulfcoast Community Care, Inc.								X		X	X	X						
Gulfcoast Legal Services, Inc.					X													
Habitat for Humanity So. Sarasota County	X			X				X										
Harvest Tabernacle																		
Healthy Families				X				X				X		X			X	
Healthy Start				X				X	X			X						X
Hispanic Latino Coalition				X	X	X			X						X			
HOPE Family Services/ Domestic Violence Center								X		X								X
Jewish Family & Children's Services of Sarasota-Manatee	X	X		X	X				X									
Lifelink																		X
Lutheran Family Services								X						X	X	X		
Manasota SOLVE				X				X	X						X			

(1) Provider Organizations	(2) Prevention				(3) Outreach			(4) Supportive Services										
	Mortgage Assistance	Rental Assistance	Utilities Assistance	Counseling/Advocacy	Legal Assistance	Street Outreach	Mobile Clinic	Law Enforcement	Case Management	Life Skills	Alcohol & Drug Abuse	Mental Health Counseling	Healthcare	HIV/AIDS	Education	Employment	Child Care	Transportation
Manatee Area Transit (MAT)																		X
Manatee Children's Services																	X	
Manatee Coalition for Affordable Housing	X																	
Manatee County Public Health Dept.							X				X	X	X	X				
Manatee County Rural Health Services												X	X		X			
Manatee County Sheriff's Office						X		X										
Manatee Glens		X	X	X		X			X	X	X	X				X		
Manatee County Habitat for Humanity	X			X					X									
Open Door Resource Center						X				X	X							X
Our Daily Bread									X									
Project HEART															X			
Projects with Industry (PWI)									X							X		
Renaissance Manor				X					X	X	X	X			X			
Resource Connection for Kids																	X	
Resurrection House				X		X				X	X							X
Safe Place & Rape Crisis Center SPARCC				X					X	X		X			X			X
Salvation Army, Manatee Corps	X	X	X	X					X	X	X							X
Salvation Army, Sarasota Corps	X	X	X	X					X	X	X							X
Sarasota City Police						X		X										
Sarasota County Area Transit (SCAT)																		X
Sarasota County Habitat for Humanity	X			X					X									
Sarasota County Health Department							X					X	X					
Sarasota County Sheriff's Office						X		X										
Sarasota Family YMCA				X					X		X						X	
Senior Friendship Centers			X						X			X						X
Sarasota Coalition on Substance Abuse				X							X				X			
Second Chance Last Opportunity				X					X	X								
Step House											X							
Suncoast Center for Independent Living				X					X	X								
Suncoast Workforce Board									X							X		X
Tri-County Counseling & Life Skills Center				X						X								
Transitional Resources, Inc.										X	X							
Veterans Services of Manatee /Sarasota									X		X	X	X	X	X	X		X
Volunteers of America												X			X			
We Care Manatee												X						
Whole Child Project Manatee																	X	
Women's Resource Center of Manatee				X											X	X		

I: CoC Housing Inventory Charts

Emergency Shelter: Fundamental Components in CoC System – Housing Inventory Chart													
Provider Name	Facility Name* *Place an asterisk after the facility name if it receives HUD McKinney-Vento dollars.	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds	Other Beds	
						A	B	Fam. Units	Fam. Beds	Indiv. Beds		Seasonal	O/V*
Current Inventory (Available for Occupancy on or before Jan. 31, 2006)			Ind.	Fam.									
34 th St. Station	34 th St. Station	D	0	0	120270	SM		0	0	18	18	0	0
Epiphany Cathedral	Mercy House Shelter	D	0	0	120270	M		3	6	0	6	0	0
Family Resources Manatee Runaway Youth Crisis Center	Safe Place 2 B	N	0	0	129075	YMF		0	0	14	14	0	0
Hope Family Services/Domestic Violence Center	Family Shelter	DV	0	0	129075	SF	DV	4	16	0	16	0	0
Salvation Army-Manatee	Men's Shelter	PA	92	0	120270	SM		0	0	92	92	0	0
Salvation Army-Manatee	Family Shelter	PA	40	0	120270	SF		0	0	40	40	0	0
Salvation Army-Sarasota	Center of Hope	PA	182	20	122766	M		5	20	182	202	0	80
Safe Place and Rape Crisis Center (SPARCC)	SPARCC*	DV	0	0	122766	FC	DV	4	16	8	24	0	0
YMCA of Sarasota	Youth Shelter	D	0	0	129115	YMF		0	0	20	20	0	0
SUBTOTALS:			314	20	SUBTOTAL CURRENT INVENTORY:			16	58	374	432	0	80
New Inventory in Place in 2006 (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)			Ind.	Fam.									
NA	NA	NA	0	0	NA	NA		0	0	0	0	0	0

SUBTOTALS:		0	0	SUBTOTAL NEW INVENTORY:		0	0	0	0	0	0
Inventory Under Development (Available for Occupancy after January 31, 2007)		Anticipated Occupancy Date									
HOPE Family Services, Inc.	Emergency Shelter	December 2009	129075	SF	DV	4	20	16	36	0	36
SUBTOTAL INVENTORY UNDER DEVELOPMENT:						4	20	16	36	0	36
Unmet Need						UNMET NEED TOTALS:					
						114	0	0	114	0	0
Total Year-Round Beds—Individuals				Total Year-Round Beds—Families							
1. Total Year-Round Individual Emergency Shelter (ES) Beds:		374		6. Total Year-Round Family Emergency Shelter (ES) Beds:						58	
2. Number of DV Year-Round Individual ES Beds:		8		7. Number of DV Year-Round Family ES Beds:						32	
3. Subtotal, non-DV Year-Round Individual ES Beds (Line 1 minus Line 2):		366		8. Subtotal, non-DV Year-Round Family ES Beds (Line 6 minus Line 7):						26	
4. Total Year-Round Individual ES Beds in HMIS:		314		9. Total Year-Round Family ES Beds in HMIS						20	
5. HMIS Coverage—Individual ES Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):		86%		10. HMIS Coverage—Family ES Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):						77%	

*In the column labeled "O/V," enter the number of Overflow and Voucher Beds

I: CoC Housing Inventory Charts

Transitional Housing: Fundamental Components in CoC System – Housing Inventory Chart											
Provider Name	Facility Name* <small>*Place an asterisk after the facility name if it receives HUD McKinney-Vento dollars.</small>	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop		Year-Round			Total Year-Round Beds
			Ind.	Fam.		A	B	Fam. Units	Fam. Beds	Indiv. Beds	
Current Inventory (Available for Occupancy on or before January 31, 2006)			Ind.	Fam.							
Catholic Charities Diocese of Venice	Our Mothers House*	N	0	0	129115	FC		10	20	0	20
Catholic Charities Diocese of Venice	Casa San Jose of Bethesda House	N	0	0	129115	SMF	HIV	0	0	8	8
Coastal Behavioral Healthcare	Heritage Home	D	0	0	129115	SMF		0	0	15	15
Domestic Abuse Shelter Inc.	DASH	DV	0	0	129115	SF	DV	0	0	6	6
First Step	Transitional Living Center	N	0	0	129115	FC		7	7	0	7
First Step	Transitions Program	N	0	0	129115	M		0	0	24	24
Gulfcoast Community Care	Gulfcoast Community Care	N	0	0	129115	SMF		0	0	24	24
HOPE Transitional Housing	SPARC of HOPE	DV	0	0	122766	FC	DV	4	16	8	24
House of Hope	House of Hope	D	0	0	129075	SF		0	0	7	7
Manasota Solve	Manasota Solve	N	0	0	129075	SF		0	0	18	18
Salvation Army-Manatee	Transitional Program	PA	20	0	120270	SM		0	0	20	20
Salvation Army-Sarasota	FAITH Program*	PA	0	38	122766	FC		12	38	38	76
Sarasota YMCA	Transitional Living Program for Youth	D	0	0	122766	M		0	8	12	20
Step House	Step House	D	0	0	129115	SM		0	0	38	38

The Safe Place	Residential Substance Abuse Recovery	D	0	0	120270	SM		0	0	24	24				
SUBTOTALS:			20	38	SUBTOTAL CURRENT INVENTORY:			33	89	242	331				
New Inventory in Place in 2006 (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)			Ind.	Fam.											
NA	NA	NA	0	0	NA	NA	NA	0	0	0	0				
SUBTOTALS:			0	0	SUBTOTAL NEW INVENTORY:			0	0	0	0				
Inventory Under Development (Available for Occupancy after January 31, 2007)			Anticipated Occupancy Date												
HOPE Family Services, Inc.	Transitional Leasing Program	June 2007						4	12	16	16				
SUBTOTAL INVENTORY UNDER DEVELOPMENT:								4	12	16	16				
Unmet Need								UNMET NEED TOTALS:				243	0	172	172
Total Year-Round Beds—Individuals						Total Year-Round Beds—Families									
1. Total Year-Round Individual Transitional Housing Beds:			242			6. Total Year-Round Family Transitional Housing Beds:			89						
2. Number of DV Year-Round Individual TH Beds:			14			7. Number of DV Year-Round Family TH Beds:			16						
3. Subtotal, non-DV Year-Round Individual TH Beds (Line 1 minus Line 2):			228			8. Subtotal, non-DV Year-Round Family TH Beds (Line 6 minus Line 7):			73						
4. Total Year-Round Individual TH Beds in HMIS:			20			9. Total Year-Round Family TH Beds in HMIS			38						
5. HMIS Coverage—Individual TH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):			5%			10. HMIS Coverage—Family TH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):			52%						

I: CoC Housing Inventory Charts

Permanent Supportive Housing*: Fundamental Components in CoC System – Housing Inventory Chart											
Provider Name	Facility Name <small>*Place an asterisk after the facility name if it receives HUD McKinney-Vento dollars.</small>	HMIS Part. Code	Number of Year-Round Beds in HMIS		Geo Code <input type="checkbox"/>	Target Pop.		Year-Round			Total Year-Round Beds
						A	B	Fam. Units	Fam. Beds	Indiv./CH Beds	
Current Inventory (Available for Occupancy on or before January 31, 2006)			Ind.	Fam.							
Goodwill of Manasota	Beneva Oaks	D	0	0	129081	SMF		0	0	60/0	60
Harvest Tabernacle	Esther's House	D	0	0	122766	SF		0	0	25/0	25
Harvest Tabernacle	Harvest House	D	0	0	122766	SM		0	0	85/0	85
Throne of Grace Ministries, Inc.	The Life Center	D	0	0	129115	SM		0	0	45/0	45
Volunteers of America	Holiday Heights VOA Living Center	D	0	0	129115	SMF		0	0	17/0	17
Volunteers of America	Bradenton VOA Living Center	D	0	0	129115	SMF		0	0	8/0	8
Volunteers of America	Manatee VOA Living Center	D	0	0	129081	SMF		0	0	10/0	10
Renaissance Manor	ALF, Independent	PA	86	2	129115	SMF		0	2	86/86	86
SUBTOTALS:			86	2	SUBTOTAL CURRENT INVENTORY:			1	2	336/86	336
New Inventory in Place in 2006 (Available for Occupancy Feb. 1, 2006 – Jan. 31, 2007)			Ind.	Fam.							
Renaissance Manor	Renaissance Manor	PA	9	0	129115	SMF		0	0	9	9
Catholic Charities	Bethseda House	D	9	0	129115	SMF	AID	0	0	9	9
SUBTOTALS:			18	0	SUBTOTAL NEW INVENTORY:			0	0	18	18
Inventory Under Development (Available for Occupancy after January 31, 2007)			Anticipated Occupancy Date								
First Step of Sarasota	Permanent Housing	D	June 1, 2008		129115	SMF		0	0	50/0	50/0

Harvest Tabernacle	Esther's House	D	June 1, 2007	122766	SMF	0	0	0	16/16	16	
Harvest Tabernacle	Harvest House	D	June 1, 2007	122766	SMF	0	0	0	65/65	65	
Manatee Glens	Shelter Plus Care	PA	June 1, 2007	129075	SMF	0	0	0	7/0	7	
Renaissance Manor	Gateways	PA	June 1, 2008	122766	SMF	0	0	0	12/12	12	
SUBTOTAL INVENTORY UNDER DEVELOPMENT:								0	0	150/93	150
Unmet Need						UNMET NEED TOTALS:		284	91	382	473
Total Year-Round Beds—Individuals				Total Year-Round Beds—Families							
1. Total Year-Round Individual Permanent Housing Beds:	336	6. Total Year-Round Family Permanent Housing Beds:	2								
2. Number of DV Year-Round Individual PH Beds:	0	7. Number of DV Year-Round Family PH Beds:	0								
3. Subtotal, non-DV Year-Round Individual PH Beds (Line 1 minus Line 2):	336	8. Subtotal, non-DV Year-Round Family PH Beds (Line 6 minus Line 7):	2								
4. Total Year-Round Individual PH Beds in HMIS:	86	9. Total Year-Round Family PH Beds in HMIS	2								
5. HMIS Coverage—Individual PH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number):	26%	10. HMIS Coverage—Family PH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number):	100%								

J: CoC Housing Inventory Data Sources and Methods Chart

(1) Indicate date on which Housing Inventory count was completed: 01/29/2007 (mm/dd/yyyy)	
(2) Identify the method used to complete the Housing Inventory Chart (check one):	
<input checked="" type="checkbox"/>	Housing inventory survey – CoC conducted a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site) of homeless programs/providers to update current bed inventories, target populations for programs, beds under development, etc.
<input checked="" type="checkbox"/>	HMIS – Used HMIS data to complete the Housing Inventory Chart
<input type="checkbox"/>	HMIS plus housing inventory – Used HMIS data supplemented by a survey of providers NOT participating in the HMIS
(3) Indicate the percentage of providers completing the housing inventory survey:	
100%	Emergency shelter providers
100%	Transitional housing providers
100%	Permanent supportive housing providers
(4) Indicate steps to ensure data accuracy for 2007 Housing Inventory Chart (check all that apply):	
<input checked="" type="checkbox"/>	Instructions – Provided written instructions for completing the housing inventory survey.
<input checked="" type="checkbox"/>	Training – Trained providers on completing the housing inventory survey.
<input checked="" type="checkbox"/>	Updated prior housing inventory information – Providers submitted updated 2006 housing inventory to reflect 2007 inventory.
<input checked="" type="checkbox"/>	Follow-up – CoC followed-up with providers to ensure the maximum possible response rate and accuracy of the housing inventory survey.
<input checked="" type="checkbox"/>	Confirmation – Providers or other independent entity reviewed and confirmed information in 2007 Housing Inventory Chart after it was completed.
<input checked="" type="checkbox"/>	HMIS – Compared HMIS and housing inventory survey data to check for consistency.
<input type="checkbox"/>	Other – specify:
Unmet Need:	
(5) Indicate type of data that was used to determine unmet need (check all that apply):	
<input checked="" type="checkbox"/>	Sheltered count (point-in-time)
<input checked="" type="checkbox"/>	Unsheltered count (point-in-time)
<input checked="" type="checkbox"/>	Housing inventory (number of beds available)
<input checked="" type="checkbox"/>	Local studies or data sources – specify: 2000 Census
<input checked="" type="checkbox"/>	National studies or data sources – specify: 2000 Census
<input checked="" type="checkbox"/>	Provider opinion through discussions or survey forms
<input type="checkbox"/>	Other – specify:
(6a) Indicate the method(s) used to calculate or determine unmet need (check all that apply):	
<input type="checkbox"/>	Stakeholder discussion – CoC stakeholders met and reviewed data to determine CoC's unmet need
<input type="checkbox"/>	Locally-determined formula – Used locally-determined formula based on local point-in-time (PIT) count data and housing inventory to calculate unmet need
<input type="checkbox"/>	Applied statistics – Used local PIT enumeration data and applied national or other local statistics
<input checked="" type="checkbox"/>	HUD unmet need formula – Used HUD's unmet need formula*
<input type="checkbox"/>	Other – specify:
(6b) If more than one method was used in 6a, please describe how these methods were used.	
NA	

K: CoC Point-in-Time Homeless Population and Subpopulations Last Point-in-Time Count: 01/29/07

Indicate date of last point-in-time count: 01/29/2007				
Part 1: Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
1. Number of Households with Dependent Children:	20	25	34	79
1a. Total Number of Persons in these Households (adults and children)	77	75	83	235
2. Number of Households without Dependent Children**	192	143	412	747
2a. Total Number of Persons in these Households	197	145	435	777
Total Persons (Add Lines 1a and 2a):	274	220	518	1012
Part 2: Homeless Subpopulations (below)				
	Sheltered		Unsheltered	Total
a. Chronically Homeless	***		135	135
b. Severely Mentally Ill	70		*	70
c. Chronic Substance Abuse	85		*	85
d. Veterans	63		*	63
e. Persons with HIV/AIDS	10		*	10
f. Victims of Domestic Violence	46		*	46
g. Unaccompanied Youth (Under 18)	34		*	34

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

L-1: Sheltered Homeless Population and Subpopulations

(1a) Check method(s) used to count sheltered homeless persons in the CoC (check all that apply):	
<input checked="" type="checkbox"/>	Survey – Providers count the total number of clients residing in their programs during the PIT count.
<input checked="" type="checkbox"/>	HMIS – CoC used HMIS to complete the PIT sheltered count and subpopulation information.
<input type="checkbox"/>	Other – specify:
(1b) If multiple methods are checked, briefly describe how data collected using the methods were combined to produce the count. HMIS was utilized to validate numbers reported by HMIS providers. Staff compared the numbers reported to the HMIS numbers entered to ensure accuracy. As more providers come online, the process will become more streamlined.	
(2a) Check the method(s) used to gather the subpopulation information on sheltered homeless persons reported in Part 2: Homeless Subpopulations (check all that apply):	
<input checked="" type="checkbox"/>	Point-in-time (PIT) interviews with each adult and unaccompanied youth – All sheltered adults and unaccompanied youth were interviewed to gather subpopulation information.
<input type="checkbox"/>	Sample of PIT interviews plus extrapolation – A sample of sheltered adults and unaccompanied youth were interviewed to gather subpopulation information, and extrapolation techniques were applied to produce the total sheltered homeless population.
<input type="checkbox"/>	Non-HMIS client-level information - Providers used individual client records (e.g., case management files) to provide subpopulation data for each adult and unaccompanied youth.
<input type="checkbox"/>	Provider expertise – Providers estimated the percentage of clients belonging to each subpopulation based on their knowledge of their client population as a whole.
<input checked="" type="checkbox"/>	HMIS – CoC used HMIS to gather subpopulation information on sheltered homeless persons.
<input type="checkbox"/>	Other –specify:
(2b) If multiple methods are checked, briefly describe how the methods were combined to produce the subpopulation information. HMIS was utilized to validate numbers reported by HMIS providers. Staff compared the numbers reported to the HMIS numbers entered to ensure accuracy. As more providers come online, the process will become more streamlined.	
(3) Indicate CoC’s steps to ensure data quality of the sheltered count (check all that apply):	
<input checked="" type="checkbox"/>	Instructions – Provided written instructions to providers for completing the sheltered PIT count.
<input checked="" type="checkbox"/>	Training – Trained providers on completing the sheltered PIT count.
<input checked="" type="checkbox"/>	Remind and Follow-up – Reminded providers about the count and followed up with providers to ensure the maximum possible response rate and accuracy.
<input checked="" type="checkbox"/>	HMIS – Used HMIS to verify data collected from providers for the sheltered PIT count.
<input checked="" type="checkbox"/>	Other –specify: Trained volunteers are available to assist consumers and agencies with the administration of their surveys. The volunteers are able to explain the purpose of the survey, help respondents with reading and/or writing problems, and ensure that completed surveys are returned to Suncoast. It places fewer demands on the program, and is likely to provide a more positive response and higher return rate for surveys. Volunteers are posted at the agency to interview individuals who arrive for services. Examples include: Food Stamps Office, Health Clinics, Career Centers (Workforce Alliance), Red Cross or other emergency Services agency, Food pantries or Clothing Distributors. Additional information is obtained from Sarasota and Manatee County Schools and Economic Assistance Services regarding individuals and families who have been identified as homeless. Suncoast Partnership has maintained consistency from year to year in the geographic areas covered so as to assist in collecting and comparing data overtime.
(4) How often will sheltered counts of sheltered homeless people take place in the future?	

<input type="checkbox"/> Biennial (every two years)
<input checked="" type="checkbox"/> Annual
<input type="checkbox"/> Semi-annual
<input type="checkbox"/> Other – specify:
(5) Month and Year when next count of sheltered homeless persons will occur: January 2008
(6) Indicate the percentage of providers providing populations and subpopulations data collected via survey, interview and/or HMIS:
95% Emergency shelter providers
95% Transitional housing providers
L-2: Unsheltered Homeless Population and Subpopulations*
(1) Check the CoC’s method(s) used to count unsheltered homeless persons (check all that apply):
<input type="checkbox"/> Public places count – CoC conducted a point-in-time (PIT) count <u>without</u> client interviews.
<input checked="" type="checkbox"/> Public places count with interviews – CoC conducted a PIT count and interviewed unsheltered homeless persons encountered during the public places count: <input type="checkbox"/> ALL persons were interviewed OR <input checked="" type="checkbox"/> Sample of persons were interviewed
<input type="checkbox"/> Public places count using probability sampling – High and low probabilities assigned to designated geographic areas based on the number of homeless people expected to be found in each area. The CoC selected a statistically valid sample of each type of area to include in the point-in-time count and extrapolated results to estimate the entire homeless population.
<input type="checkbox"/> Service-based count – Interviewed people using non-shelter services, such as soup kitchens and drop-in centers, and counted those that self-identified as unsheltered homeless persons.
<input checked="" type="checkbox"/> HMIS – Used HMIS for the count of unsheltered homeless people or for subpopulation information.
<input checked="" type="checkbox"/> Other – specify: Trained volunteers are available to assist consumers and agencies with the administration of their surveys. The volunteers are able to explain the purpose of the survey, help respondents with reading and/or writing problems, and ensure that completed surveys are returned to Suncoast. It places fewer demands on the program, and is likely to provide a more positive response and higher return rate for surveys. Volunteers are posted at the agency to interview individuals who arrive for services. Examples include: Food Stamps Office, Health Clinics, Career Centers (Workforce Alliance), Red Cross or other emergency Services agency, Food pantries or Clothing Distributors. Additional information is obtained from Sarasota and Manatee County Schools and Economic Assistance Services regarding individuals and families who have been identified as homeless. Suncoast Partnership has maintained consistency from year to year in the geographic areas covered so as to assist in collecting and comparing data overtime.
(2) Indicate the level of coverage of the PIT count of unsheltered homeless people:
<input type="checkbox"/> Complete coverage – The CoC counted every block of the jurisdiction.
<input type="checkbox"/> Known locations – The CoC counted in areas where unsheltered homeless people are known to congregate or live.
<input checked="" type="checkbox"/> Combination – CoC combined complete coverage with known locations by conducting counts for every block <u>in a portion of the jurisdiction</u> (e.g. central city) AND conducting counts in other portions of the jurisdiction where unsheltered persons are known to live.
<input type="checkbox"/> Used service-based or probability sampling (coverage is not applicable)
<input type="checkbox"/> Other –specify:
(3) Indicate community partners involved in PIT unsheltered count (check all that apply):
<input checked="" type="checkbox"/> Outreach teams
<input checked="" type="checkbox"/> Law Enforcement

<input checked="" type="checkbox"/> Service Providers
<input checked="" type="checkbox"/> Community volunteers
<input checked="" type="checkbox"/> Homeless and/or formerly homeless persons
<input checked="" type="checkbox"/> Other – specify: Faith based organizations, university students
(4) Indicate CoC’s steps to ensure data quality of the unsheltered count (check all that apply):
<input checked="" type="checkbox"/> Training – Conducted training(s) for PIT enumerators.
<input checked="" type="checkbox"/> HMIS – Used HMIS to check for duplicate information.
<input checked="" type="checkbox"/> Other – specify: Mentoring coaches assigned during the count to assist volunteers
(5) How often will CoC conduct PIT counts of unsheltered homeless people in the future?
<input type="checkbox"/> Biennial (every two years)
<input checked="" type="checkbox"/> Annual
<input type="checkbox"/> Semi-annual
<input type="checkbox"/> Quarterly
<input type="checkbox"/> Other – specify:
(6) Month and Year when next PIT count of unsheltered homeless persons will occur: January 2008

CoC Homeless Management Information System (HMIS)

M: CoC HMIS Charts

M-1: HMIS Lead Organization Information

Organization Name: Suncoast Partnership to End Homelessness, Inc.	Contact Person: James McNemar
Phone: (941) 366-2686 x224	Email: James@SuncoastPartnership.org
Organization Type: State/local government <input type="checkbox"/> Non-profit/homeless provider <input checked="" type="checkbox"/> Other <input type="checkbox"/>	

M-2: List HUD-defined CoC Name(s) and Number(s) for every CoC in HMIS Implementation:

HUD-Defined CoC Name*	CoC #
Sarasota, Bradenton, Manatee Counties CoC	FL-500

M-3: HMIS Implementation Status

HMIS Data Entry Start Date for your CoC OR Anticipated Date Entry Start Date for your CoC (mm/yyyy) 01/01/2004	If no data entry date, indicate reason: <input type="checkbox"/> New CoC in 2007 <input type="checkbox"/> Still in planning/software selection process <input type="checkbox"/> Initial implementation
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Briefly describe significant challenges/barriers the CoC has experienced in:

1. HMIS implementation: Agencies are reluctant to share information and indicate that there are insufficient resources (personnel, time, and computer equipment) to implement HMIS. US Congress provides a waiver to prevent Domestic Violence Providers from full participation in HMIS; we believe that we will be able to use aggregate (non-identifiable by individual) data and are now working towards that goal. Lack of provider staff to enter HMIS data timely (small agencies) and without “double data entry” (large agencies) have been ongoing issues in HMIS participation. Another set of providers are not currently covered because of unwillingness to do “double data entry”. This latter group of provider’s beds will be covered as we complete our current HUD funded data integration.
2. HMIS Data and Technical Standards Final Notice requirements: Agencies are reluctant to modify their current policies to meet HMIS requirements. CoC participating providers have struggled with the data entry of some homeless clients into HMIS. Several areas of the data standard are difficult for providers to enter: entering of minors not accompanied by parent or legal guardian; capturing data on homeless clients (chronic, mentally ill, DV, etc.) who refuse to be entered into the HMIS system.

M-4: CoC Client Records

Calendar Year	Number of Client Records Entered in HMIS / Analytical Database (Duplicated) for CoC	Number of Unduplicated Clients Entered in HMIS / Analytical Database for CoC
2004	12,317	11,498
2005	25,913	23,567
2006	36,593	32,855

Please provide a brief explanation of the reason(s) for any decreases in the number of records (duplicated or unduplicated) from year to year. NA

M-5: Data Collection/Completeness and Coverage

Universal Data Element	% Null/Missing Values	Universal Data Element	% Null/Missing Values
Name	0%	Gender	1%
Social Security Number	10%	Veteran Status	40%
Date of Birth	3%	Disabling Condition	57%
Ethnicity	6%	Residence Prior to Program Entry	57%
Race	3%	Zip Code of Last Permanent Address	50%

Briefly describe how the CoC ensures that valid program entry and exit dates are being recorded in the HMIS for persons served. The CoC's HMIS Program Manager regularly reviews the data with all participating agencies and checked the agency's APR reports. Since 2007, the data has been evaluated monthly through data quality reports. As a result of these evaluations, a new policy is planned to be in place June 1, 2007. After this date all Universal Data Elements will become required data entry fields within the HMIS. (No data will be saved until these elements are entered.)

(b) Indicate current OR anticipated HMIS bed coverage of 75% for each housing type.

	75% bed coverage	Anticipate 75% bed coverage	Date anticipate achieving
Emergency Shelter	N	Y	11/15/2007
Transitional Housing	N	Y	1/25/2008
Permanent Supportive Housing	N	Y	3/15/2008

(c) If CoC has not yet achieved or does not anticipate achieving 75% bed coverage for all beds (including DV beds), please explain why. Bed coverage percentages have not been achieved because of reluctance on the part of primarily faith-based providers to cooperate with data collection procedures. US Congress provides a waiver to prevent Domestic Violence Providers from full participation in HMIS; we believe that we will be able to use aggregate (non-identifiable by individual) data and are working now towards that goal. Lack of provider staff to enter HMIS data timely (small agencies) and without "double data entry" (large agencies) have been ongoing issues in HMIS participation. Another set of providers are not currently covered because of unwillingness to do "double data entry". This latter group of provider's beds will be covered as we complete our current HUD funded data integration.

M-6: Training, Data Quality and Implementation of HMIS Data & Technical Standards

	Y	N	P
1. Training Provided:			
Basic computer training	X		
HMIS software training	X		
Privacy / Ethics training			X
Security Training	X		
System Administrator training	X		
2. CoC Process/Role:			
Is the CoC able to aggregate all data to a central location at least annually?	X		
Does the CoC monitor compliance with HMIS Data & Technical Standards Final Notice?	X		
3. Security—Participating agencies have:			
Unique username and password access?	X		
Secure location?			X
Locking screen savers?	X		
Virus protection with auto update?			X
Individual or network firewalls?	X		
Restrictions on access to HMIS via public forums (e.g. PKI digital certificates or IP filtering)?	X		
4. Security—Agency responsible for centralized HMIS data collection and storage has:			
Procedures for off-site storage of HMIS data?	X		
Disaster recovery plan that has been <u>tested</u> ?	X		
5. Privacy Requirements:			
If your state has additional confidentiality provisions, have they been implemented? <input type="checkbox"/> Check here if there are no additional state confidentiality provisions.	X		
Is there a “Purpose for data collection” sign at each intake desk for all participating agencies?			X
Has each participating agency adopted a written privacy policy, including the uses and disclosures of client information?			X
Does each participating agency have a privacy policy posted on its website (if applicable)?			X
6. Data Quality—CoC has process to review and improve:			
Client level data quality (i.e. missing birth dates etc.)?	X		
Program level data quality (i.e. data not entered by agency in over 14 days)?			X
CoC bed coverage (i.e. percent of beds)?	X		
7. Unduplication of Client Records—the CoC:			
Uses only HMIS data to generate unduplicated count?	X		
Uses data integration or data warehouse to generate unduplicated count?			X
8. OPTIONAL: Uses of HMIS Data—CoC uses HMIS data for:			
Point-in-Time Count	X		
Project/Program performance monitoring	X		
Program purposes (e.g. case management, bed management, program eligibility screening)	X		
Statewide data aggregation (e.g. data warehouse)	X		

Part III: CoC Strategic Planning

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

Objectives to End Chronic Homelessness <u>and</u> Move Families and Individuals to Permanent Housing	2007 Local Action Steps How are you going to do it? List action steps to be completed within the next 12 months.	Lead Person List name and title or organization of one person responsible for accomplishing each action step.	Baseline (Current Level)	Numeric Achievement in 12 months	Numeric Achievement in 5 years	Numeric Achievement in 10 years
1. Create new PH beds for chronically homeless persons.	a. Implement a Staying Housed Initiative, moving 12 persons who are homeless into permanent housing with supportive services.	a. Laurie Gable Renaissance Manor	86 Beds	179 Beds	185 Beds	200 Beds
	b. Request funds through Sarasota County Trust Fund to include 25 subsidies/housing units for chronically homeless individuals residing in homeless shelters.	b. Richard Martin Suncoast Partnership				
	c. The Partnership will apply for Tenant Based Rental Assistance funds from Sarasota and Manatee Counties HOME allocations to create 20 slots reserved for chronically homeless.	c. Richard Martin Suncoast Partnership				
	d. Create 16 permanent supportive beds for chronically homeless women (HHA).	d. Pastor Jim Minor, Harvest Tabernacle				
	e. Create 65 permanent supportive beds for chronically homeless men (HHA).	d. Pastor Jim Minor, Harvest Tabernacle				
2. Increase percentage of homeless persons staying in PH over 6 months to at least 71%.	a. Implement APR tracking of all PH projects; monitor results quarterly.	a. Jackie McNeil Suncoast Partnership	NA, current PH renewal APRs, next year at least two providers will be able to report in this area	71%	72%	75%
	b. Provide eviction prevention and personal finance training to all persons in Permanent Housing.	b. Dave English, Del Properties				
	c. Apply for grant funds to expand case management staff needed to enhance service provision to 24 PH residents.	c. Laurie Gable Renaissance Manor				
	d. Provide intensive case management to stabilize and maintain housing to 86 clients.	d. Rich Lane, Volunteers of America				

Comment [DLM1]: Make about Renaissance

3. Increase percentage of homeless persons moving from TH to PH to at least 61.5%.	a. Implement system wide housing locator program through HMIS and 211 to increase movement from TH to PH by 25%.	a. Alberto Suarez, 211	80%	80%	85%	85%
	b. Expand successful transition to permanent housing through HOPE Family Services, Inc. leasing project for six women and their children suffering from domestic violence.	b. Laurel Lynch, HOPE Family Services, Inc.				
	c. Provide rental and/or utility deposits, and first and/or last month rents to 30 resident families a year to help them access Permanent Housing (Challenge).	c. Nancy Shoemaker, Catholic Charities				
	b. Provide salary/benefits for a job coach to assist 60 persons obtain employment and PH/year (CG).	b. Margie Genter, Goodwill				
	c. Establish a CoC Committee to research best practices for employment and vocational training for homeless persons and work with local educational institutions to test/develop an evidence-based model to reduce dependency on day labor jobs for chronic and unskilled homeless, meet goal of increasing employment to 18% and present quarterly.	c. Paul Mercier, Sarasota County Commission				
	d. Assist 50 persons who are homeless and unemployed in Back-to-Work subsidies.	d. Ashley Canesse, Salvation Army, Manatee				
	e. Establish an outreach program to reach at least 3 new homeless service providers to expand access to benefits and mainstream resources.	d. Evan Ferrar, Suncoast Center for Independent Living				
f. Create a Support Employment Program for persons who are homeless with disabilities in need of employment services.	e. Evan Ferrar, Suncoast Center for Independent Living					
5. Ensure that the CoC has a functional HMIS system.	a. Complete training and certification for all HUD and government funded programs eligible and not participating by 25%.	a. James McNemar, Suncoast Partnership	65% Bed Cover- age	75% Bed Cover- -age	90% Bed Cover- age	100% Bed Cover- age
	b. Strengthen the HMIS Committee to achieve best practice standard and long- term direction, to meet quarterly.	b. James McNemar, Suncoast Partnership				

Comment [DLM2]: Challenge grant opportunity

	c. Provide training on the benefits of HMIS and the development and use of HMIS reports for 50% of participating agencies.	c. James McNemar, Suncoast Partnership				
Barriers: If your CoC will not meet one or more of the above objectives, briefly describe why not (use less than two paragraphs). NA						
Other CoC Objectives in 2007						
1. Develop plans to implement a universal, integrated, centralized intake and assessment system for homeless services.	a. Research best practices for One Stop Centers and their success rates based on different types of models and community effectiveness and present in an annual training.	a. Adell Erozer, Community Coalition on Homelessness	Preliminary Process	Present Annual Training	Search Potential Funding Sources	
2. Develop a coordinated transportation system to meet employment, medical and other service needs.	a. Inventory current services and present homeless transportation needs to two local transportation providers and Metropolitan Planning Organization (MPO) and assist development of a plan to address unmet needs present accomplishments quarterly.	a. Danny Bilyeu, Suncoast Partnership to End Homelessness	Minimal Involvement	Discussion and Negotiation	Transportation Plan Implemented	
3. Assist provider agencies in strengthening their capacity and resources.	a. Provide current and monthly notification of funding at the local, state and federal levels for homeless funding. b. Offer technical assistance to five new and growing provider agencies in developing program services and identifying gaps in services.	a. Jackie McNeil, Suncoast Partnership b. Jackie McNeil, Suncoast Partnership	a. Irregular b. Five	a. Monthly b. Ten	a. Weekly b. Fifteen	

4. Increase percentage of homeless persons moving from ES or TH to PH.	<p>a. Provide rental and utility deposits, and first and/or last month rents to 30 resident families/year to help them access Permanent Housing.</p> <p>b. Provide Identification Cards for 50 persons to access benefits and employment.</p> <p>c. Increase engagement of at least 1,000 individuals who are homeless through the provision of essential life items through Salvation Army (Manatee/Sarasota) and Catholic Charities (Challenge).</p>	<p>a. Ashley Canesse, Salvation Army, Manatee</p> <p>b. Dave Proch, Resurrection House</p> <p>c. Bryan Pope, Salvation Army, Sarasota</p>	<p>a. 30</p> <p>b. 50</p> <p>c. 500</p>	<p>a. 60</p> <p>b. 75</p> <p>c. 1,000</p>	<p>a. 120</p> <p>b. 100</p> <p>c. 1,500</p>
5. Increase homeless prevention services and coordinate with various local resources.	<p>a. Increase the number served by 5% through Building Strong Families Crisis Prevention Program, by seeking additional State funding (Challenge, ESG).</p> <p>b. Increase Homeless Prevention program to assist persons in situation of verifiable eviction or foreclosure (an increase of 5% of persons served).</p>	<p>a. Phil Gorelick, Jewish Family and Children Services</p> <p>b. Phil Gorelick, Jewish Family and Children Services</p>	<p>a.233 families</p> <p>b.233 families</p>	<p>a.244 families</p> <p>b.244 families</p>	<p>a.255 families</p> <p>b.255 families</p>
6. Develop a Bi-County ten-year strategic plan to end chronic homelessness in Manatee and Sarasota Counties	<p>a. Hire a consultant</p> <p>b. Consultant will</p> <ul style="list-style-type: none"> ▪ Complete a needs assessment ▪ Conduct focus groups ▪ Review consolidated plans ▪ Develop Recommendations ▪ Complete Written Plan <p>c. Present the plan via community-wide meeting to introduce Ten Year Plan</p>	<p>a. Richard Martin, Suncoast Partnership</p> <p>b. TBD, Consultant</p> <p>c. TBD, Consultant</p>	Plan and Create	Implement	Continue to Serve

CoC Discharge Planning Policy Chart

Publicly Funded Institution(s) or System(s) of Care in CoC Geographic Area	None	Initial Discussion	Protocol in Development	Formal Protocol Finalized	Formal Protocol Implemented
Foster Care	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corrections	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Foster Care:
 When a child “ages out” of foster care, he/she receives an Independent Living Services Transitional Services Plan. The service plan tasks include assistance and information on applying for life skills classes; transportation; school enrollment assistance (applying for financial aid, meeting with school personnel, obtaining school records); assistance with registering for employment at Workforce Development; assistance in identifying local employment opportunities; assistance in applying for job training and/or apprenticeship programs; continued care in the areas of physical health, mental health and education; assistance in obtaining safe and stable housing; assistance in identifying organizations or community activities; and assistance with maintaining an ongoing relationship with the local system of care. Suncoast Partnership has worked with Florida Coalition for the Homeless to develop formalized protocol for a foster care discharge planning and will continue to work towards collaborative partnerships, engagement of pertinent providers and best practices.

Currently, YMCA - Sarasota has a formal plan which is termed a “Transition Plan.” Involves 4 meetings during client’s 17th year and includes: employment, education, saving money, housing and supportive services. If client is still in high school, transition money is available to pay for an apartment or to stay with foster parents. Based on certain criteria, money may be available for down payment on an apartment. Client works with a case manager and an independent living specialist.

Health Care:

Patients may be discharged from the hospital entirely or transferred to another level of care, treatment, and services, to different health professionals, or to settings for continued services. The hospital's processes for transfer or discharge are based on the patients' assessed needs. To facilitate discharge or transfer, the hospital assesses the patients' needs, plans for discharge or transfer, facilitates the discharge or transfer process, and helps to ensure that continuity of care, which may include mental health or substance abuse treatment, other treatment, and services, is maintained. A process addresses the needs for continuing care, treatment, and services after discharge or transfer. The transfer or discharge of a patient to another level of care, treatment, and services, different professionals, or different settings is based on the patients' assessed needs and the hospitals capabilities. For some patients, effective planning addresses how needs will be met as they move to the next level of care, treatment, and services. For other patients, planning will consist of a clear understanding of how to access services in the future should the need arise. When patients are transferred or discharged, appropriate information related to the care, treatment, and services provided is exchanged with other service providers. A patient may receive care, treatment, and services many settings and may move from one hospital or providers to another. To facilitate the continuity of care, treatment, and services, information is provided to any organization or provider to which the patient is accepted, transferred, or discharged. Suncoast Partnership has worked with Florida Coalition for the Homeless to develop formalized protocol for health care discharge planning and will continue to work towards collaborative partnerships, engagement of pertinent providers and best practices.

Sarasota Memorial Hospital will continue to contact the Salvation Army Sarasota and arrange for homeless patients to enter the Salvation Army program for temporary housing, drug abuse counseling, job placement and case management.

Mental Health:

Discharge planning for all local receiving and treatment facilities include transportation, access to stable living arrangements, assistance in obtaining aftercare follow up for medications and case management, assessment of medication availability, community program contact and referral information, referral to substance abuse treatment programs, and trauma or abuse recovery focused programs or other self-help groups. Suncoast Partnership has worked with Florida Coalition for the Homeless to develop formalized protocol for mental health discharge planning and will continue to work towards collaborative partnerships, engagement of pertinent providers and best practices.

First Step has a discharge plan that involves housing, vocational assistance, supportive care and individualized support that a client may need. Manatee Glens provides ongoing supportive services to discharged clients including referral to housing agencies and the Salvation Army. They also provide rental assistance to qualified individuals.

Corrections:

The Manatee and Sarasota County Sheriff's Office, the law enforcement agencies for the Suncoast Partnership, are in the process of discussing a discharge planning policy and procedure that outlines planning, continued care and follow-up after release. This plan will begin upon recognition of a serious physical or behavioral health issue. Upon release, those persons taking prescribed medications will be provided with at least a three day supply of medications for their transition back into the community. External agencies, such as the health department or community mental health providers will be involved to facilitate re-entry. Discharge planning may include formal linkages to community based organizations, list of community providers, and discussion with person on importance of follow-up/aftercare. Upon release, persons are given pertinent health information to assist in re-entry services. Suncoast Partnership has worked with Florida Coalition for the Homeless to develop formalized protocol for corrections discharge planning and will continue to work towards collaborative partnerships, engagement of pertinent providers and best practices.

Sarasota County Jail has a multi-step discharge plan which provides 1.) a bi-lingual book of referrals to agencies in the community; 2.) set up of an interview with Suncoast Workforce Board to pursue job training and placement; 3.) applications to half-way houses for housing; 4.) connection to Salvation Army Sarasota for temporary housing and substance abuse support.

The CART Program is a coalition among six agencies in Sarasota County which focuses on diverting homeless individuals from the criminal justice system through a process that provides the following:

1. Immediate secure adult receiving center for people with addictions. This program will increase from 15 to 30 beds by mid summer 2006.
2. Participation in a 10 week program which includes residential services (currently provided by Salvation Army, and with a new facility to come on line in the next 18 months); 150 hours of substance abuse treatment; mental health services provided by Coastal Renaissance; vocational assistance provided by Jobs, Etc. and Sarasota County Technical Institute (job readiness training); health care through the Sarasota County Health Department; counseling for the individual and his/her family through Jewish Family and Children's Service.
3. Discharge planning begins in depth during the last 2-3 weeks of the program through The Salvation Army and First Step of Sarasota.

P: CoC Coordination Chart

1. Consolidated Plan Coordination	YES	NO
a. Do Con Plan planners, authors and other Con Plan stakeholders participate in CoC general planning meetings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Do CoC members participate in Con Plan planning meetings, focus groups, or public forums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Were CoC strategic plan goals addressing homelessness and chronic homelessness used in the development of the Con Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Jurisdictional 10-year Plan Coordination		
a. Is there one or more formal jurisdictional 10-year Plan(s) being developed and/or being implemented within your CoC geography that are separate from the CoC 10-year plan? (If No, you may skip to Question 3a.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Do 10-year Plan conveners, authors and other stakeholders participate in CoC general planning meetings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Have 10-year Plan participants taken steps to align their planning process with the local CoC plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Were CoC strategic plan goals used in the development of the 10-year Plan(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Provide the number of jurisdictions within your CoC geography that have formally implemented a 10-year plan(s).	2	
3. Public Housing Agency Coordination		
a. Do CoC members meet with CoC area PHAs to improve coordination with and access to mainstream housing resources?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

CoC 2007 Funding Priorities

Q: CoC Project Priorities Chart

HUD-defined CoC Name:* Sarasota/Bradenton/Sarasota, Manatee Counties CoC						CoC #: FL-500			
(1) SF-424 Applicant Name (Please Remove Examples)	(2) Project Sponsor Name	(3) Project Name	(4) Priority	(5) Requested Project Amount	(6) Term	(7) Program and Component Type			
						SHP	SHP	S+C	SRO
						New	Renewal	New	New
<input checked="" type="checkbox"/> Renaissance Manor **	Renaissance Manor	Gateways to Recovery	1	79,199	2	PH			
HOPE Family Services, Inc.	HOPE	SPARCC of HOPE	2	51,724	2	TH			
Suncoast Partnership to End Homelessness, Inc.	Suncoast Partnership to End Homelessness, Inc.	HMIS Data Integration	3	37,698	1		HMIS		
Salvation Army	Salvation Army	FAITH	4	170,432	1		TH		
Catholic Charities	Catholic Charities	Our Mother's House	5	120,138	1		TH		
HOPE Family Services, Inc.	HOPE	SPARCC of HOPE	6	67,680	1		TH		
Suncoast Partnership to End Homelessness, Inc.	Suncoast Partnership to End Homelessness, Inc.	Suncoast Rental Assistance	7	80,325	2	PH			
(8) Subtotal: Requested Amount for CoC Competitive Projects:				\$607,196					
(9) Shelter Plus Care Renewals:NA						S+C Component Type			
(10) Subtotal: Requested Amount for S+C Renewal Projects:				\$0					
(11) Total CoC Requested Amount (line 8 + line 10):				\$607,196					

R: CoC Pro Rata Need (PRN) Reallocation Chart NA

1a. Will your CoC be using the PRN reallocation process? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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S: CoC Project Leveraging Summary Chart

Name of Continuum	Total Value of Written Commitment
Sarasota/Bradenton/Sarasota, Manatee Counties CoC	\$1,290,209

T: CoC Current Funding and Renewal Projections

Supportive Housing Program (SHP) Projects:												
Type of Housing	All SHP Funds Requested (Current Year)		Renewal Projections									
	2007		2008		2009		2010		2011		2012	
Transitional Housing (TH)	\$358,250		\$411,769		\$411,769		\$411,769		\$411,769		\$411,769	
Safe Havens-TH	\$0		\$0		\$0		\$0		\$0		\$0	
Permanent Housing (PH)	\$80,325		\$0		\$80,325		\$80,325		\$80,325		\$80,325	
Safe Havens-PH	\$0		\$0		\$0		\$0		\$0		\$0	
SSO	\$0		\$0		\$0		\$0		\$0		\$0	
HMIS	\$37,968		\$37,968		\$37,968		\$37,968		\$37,968		\$37,968	
Totals	\$476,543		\$449,737		\$530,062		\$530,062		\$530,062		\$530,062	
Shelter Plus Care (S+C) Projects:												
Number of S+C Bedrooms	All S+C Funds Requested (Current Year)		Renewal Projections									
	2007		2008		2009		2010		2011		2012	
	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$
SRO					15	\$82,272	15	\$82,272	15	\$82,272	15	\$82,272
0									7	\$71,988	7	\$71,988
1												
2												
3												
4												
5												
Totals					15	\$82,272	15	\$82,272	22	\$154,260	22	\$154,260

Part IV: CoC Performance

U: CoC Achievements Chart

2006 Objectives to End Chronic Homelessness and Move Families and Individuals to Permanent Housing	12-month Measurable Achievement Proposed in 2006 (from Chart N of your 2006 CoC application)	Accomplishments (Enter the numeric achievement attained during past 12 months)
1. Create new PH beds for chronically homeless persons.	a. Suncoast Partnership and First Step of Sarasota will develop nine PH units to rent to qualified chronically homeless individuals. b. Manatee Glens will fully implement its Shelter Plus Care project funded in the 2005 competition c. The Partnership will apply for Tenant Based Rental Assistance funds from Sarasota and Manatee Counties HOME allocations to create slots reserved for chronically homeless.	a. A partnership of First Step, Salvation Army, Sarasota Corps and Renaissance Manor created 18 Permanent Housing beds to serve chronically and other homeless individuals. Bethesda House created 9 PH beds for HIV/AIDS special needs clients. b. 16 out of 16 beds are now available, the second portion of the contract will be finalized the first week of June 2007 for Manatee Glens to have 7 more available chronically homeless beds for use. c. Suncoast Partnership has identified potential Tenant Based Rental Assistance funds from Sarasota and Manatee Counties HOME Programs. The Suncoast Partnership expects to apply for future funds to make available housing

	<p>d. Hold a facilitated training for affordable housing experts and homeless providers to bridge gaps in understanding between the two groups and forge a comprehensive strategy to stimulate capital housing production</p>	<p>units for the chronically homeless. Uncommitted funds are available and discussions are ongoing in the development of services to access these funds. In partnership with Manatee Housing Authority, tenant-based rental assistance was provided to income eligible homeless families to assist them in meeting their housing needs. The TBRA program provided rental assistance on a monthly basis for a maximum period of 2 years.</p> <p>d. Manatee County, as part of their 10-year plan to end chronic homelessness, has created a Manatee Housing Committee which meets monthly to forge a comprehensive strategy and bridge the gaps between affordable housing experts and fifteen homeless providers. The committee held forums to discuss concerns regarding pressing homeless needs including legal services, elderly, limited housing stock, minority families unable to find affordable housing, gap in transitional housing</p>
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		for age groups 17-24 year olds, credit issues and local ordinances.
2. Increase percentage of homeless persons staying in PH over 6 months to 71%.	<p>a. Provide intensive case management.</p> <p>b. Assist potentially eligible clients to apply for SSI.</p>	<p>a. Catholic Charities/Our Mother's House served 17 mothers and 20 children and Lutheran Services provided intensive case management. Casa San Jose/ Bethesda/ Catholic Charities provided case management for HIV/AIDS clients in 8 apartments for 8 persons who are homeless being housed for over 6 months or longer. 136 (100%) individuals received follow up case management services through the VIPER program.</p> <p>b. The Community Coalition on Homelessness assisted clients to access all mainstream resources. CCH assisted individuals through their Open Door Day Resource Program providing them information and referrals to SSI, Food Stamps, etc. From July of 2006 this program has seen 697 new clients (10 months only). 40 households representing 48 adults with 76 children. 20 of these households indicated they were still housed after 3 months, 7 after 6 months, 19 were helped but not in housing</p>

		stamps, access to health care, equipment loan, and independent living skills services.
3. Increase the percentage of homeless persons moving from transitional housing (TH) to PH to 61%.	<p>a. Manatee Housing Authority is collaborating with Salvation Army of Manatee and HOPE Family Services to create Section 8 Voucher program in the amount of \$233,000 to support 10 homeless individuals for a period of two years in moving from Transitional Housing (Salvation Army) to Permanent Housing in Manatee County.</p> <p>b. Office of Housing and Community Development (City of Sarasota and County of Sarasota) will provide up to \$100,000 in the next fiscal year in rental assistance to help up to 10 families to cover the gap between income and rent, as these families move out of transitional housing and into permanent housing.</p>	<p>a. Between the two agencies, there have been six families placed so far and four families pending. There has been extreme difficulty in obtaining Section 8 Vouchers. Both Sarasota and Manatee County are listed in the top 10 most expensive areas to live in Florida, making it an on-going challenge for providers to locate suitable permanent housing for clients.</p> <p>b. The Office of Housing and Community Development through the Suncoast Partnership to End Homelessness provided \$133,000 to address emergency prevention of homelessness needs; to date over 60 families have been served.</p>
4. Increase percentage of homeless persons becoming employed by 11%.	<p>a. Develop an MOU with Suncoast Workforce Board to continue the pilot program just launched with Salvation Army of Sarasota in bringing their mobile job search and skills training services directly to the transitional housing site on 10th Street in Sarasota (weekly), currently serving an average of 25 people per month. This program will be expanded to provide continued assistance to individuals and families</p>	<p>a. A MOU has been developed with the Suncoast Workforce Board continuing the work of a pilot program launched with The Salvation Army – Sarasota Corps, that brings mobile job search and skills training directly to the transitional housing site</p>

	<p>who move into permanent housing to enable them to increase job skills and find/retain permanent employment.</p> <p>b. Work with employers in Manatee and Sarasota Counties to expand job opportunities for homeless people. Add additional private sector representatives on Suncoast Partnership board of directors, and enlist them to assist in outreach to employers to develop contacts and jobs for homeless individuals.</p>	<p>on 10th Street in Sarasota. Onsite services served all emergency-TH 125-150 per year</p> <p>b. Suncoast Partnership has elected at least 4 new board members from the private sector to assist in employment outreach for homeless people. One of our new board members, Meghan Stout from Chris Craft, has partnered with The Salvation Army – Manatee Corps to hire 5 homeless people from job fairs held directly on site. Jobs ETC and the City of Bradenton have also completed on site at the Manatee Salvation Army in order to offer jobs to qualified individuals. The VIPER program placed 96 individuals successfully in jobs at time of discharge. 100% of individuals who requested job referrals and counseling received services on the Jobs ETC./SWB Mobile Career Opportunity Center (48).</p>
<p>5. Ensure that the CoC has a functional HMIS system.</p>	<p>a. Activate the Dormant HMIS Committee</p>	<p>a. Suncoast Partnership to End Homelessness has met with a core group to discuss current status and strategic planning as well as begun recruiting board members for the</p>

	<p>b. Apply for SHP HMIS grant for data integrated project as the next phase of development of its already functioning HMIS system. It is expected that this data integration project will be completed by September 30, 2007. The result of this phase will be an expanded ability for agencies to transfer data about homeless counts and homeless services from their databases to HMIS, without the need for double data entry and its related strain on resources.</p>	<p>standing committee.</p> <p>b. Suncoast Partnership has applied for a SHP HMIS grant in the 2006 HUD SuperNOFA application for data integrated project. The project will proceed once funds are made available. The project is expected initially to assist two key service providers in the next twelve months.</p>
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Briefly explain the reasons for not meeting one or more of your proposed measurable achievements. NA

OPTIONAL: If desired, you may use this space to describe your CoC's most significant accomplishments over the past 12 months.

HOPE Family Services:

- Increase availability of legal services for homeless victims of domestic violence.
- Educate police and criminal justice personnel through a formal training about batter accountability.
- Educate Judges about batterer accountability through formal training.
- Provide rental assistance program to domestic violence victims who meet the definition of chronically homeless.

Member agencies provided the following:

- Facilitate Workshop's on Renter's Responsibilities & Landlord/Tenant Relations for Chronic Homeless Persons (Gulf Coast Legal, Legal Services of Manatee)
- Facilitate budgeting program for formerly chronically homeless persons (Salvation Army – Sarasota)
- Develop Homeless Prevention Plan with Landlords (LL's) & Homeless Service Providers. (Jewish Children & Family Services)

V: CoC Chronic Homeless (CH) Progress Chart

1. Enter the total number of chronically homeless persons in your CoC and the total number of permanent housing beds designated for the chronically homeless in your CoC for each year.					
Year	Number of CH Persons		Number of PH beds for the CH		
2005	385		119		
2006	385		117		
2007	135		86		
Briefly describe the reason(s) for any increases in the total number of chronically homeless persons between 2006 and 2007: NA					
2. Indicate the number of new PH beds in place and made available for occupancy for the chronically homeless between February 1, 2006 and January 31, 2007:					0
3. Identify the amount of funds from each funding source for the development and operations costs of the new CH beds created between February 1, 2006 and January 31, 2007.					
Cost Type	Public/Government				Private
	HUD McKinney-Vento	Other Federal	State	Local	
Development	\$0	\$0	\$0	\$0	\$0
Operations	\$0	\$0	\$0	\$0	\$0
TOTAL	\$0	\$0	\$0	\$0	\$0

Comment [MLM5]: Change based on inventory

W: CoC Housing Performance Chart

1. Participants in Permanent Housing (PH)		
<input checked="" type="checkbox"/>	No applicable PH renewals are on the CoC Project Priorities Chart	APR Data
<input type="checkbox"/>	All PH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who exited PH project(s)—APR Question 12(a)	
b.	Number of participants who did not leave the project(s)—APR Question 12(b)	
c.	Number who exited after staying 7 months or longer in PH—APR Question 12(a)	
d.	Number who did not leave after staying 7 months or longer in PH—APR question 12(b)	
e.	Percentage of all participants in PH projects staying 7 months or longer (c. + d. divided by a. + b., multiplied by 100 = e.)	
2. Participants in Transitional Housing (TH)		
<input type="checkbox"/>	No applicable TH renewals are on the CoC Project Priorities Chart	APR Data
<input checked="" type="checkbox"/>	All TH renewal projects with APRs submitted are included in calculating the responses below	
a.	Number of participants who exited TH project(s)—including unknown destination	26
b.	Number of participants who moved to PH	21
c.	Percent of participants in TH projects who moved to PH (b. divided by a., multiplied by 100 = c.)	81%

X: Mainstream Programs and Employment Project Performance Chart

<input checked="" type="checkbox"/>	No applicable renewal projects for the Mainstream Programs and Employment Chart are included in the CoC Priorities Chart.		
<input type="checkbox"/>	All renewal projects on the CoC Priorities Chart that are not exempted from reporting in the APR are included in calculating the responses below.		
(1) Number of Adults Who Left (Use same number in each cell)	(2) Income Source	(3) Number of Exiting Adults with Each Source of Income	(4) Percent with Income at Exit (Col 3÷Col 1 x 100)
0	a. SSI	0	0
0	b. SSDI	0	0
0	c. Social Security	0	0
0	d. General Public Assistance	0	0
0	e. TANF	0	0
26	f. SCHIP	15	58%
0	g. Veterans Benefits	0	0
26	h. Employment Income	12	46%
0	i. Unemployment Benefits	0	0
0	j. Veterans Health Care	0	0
26	k. Medicaid	5	19%
26	l. Food Stamps	14	54%
0	m. Other (please specify)	0	0
26	n. No Financial Resources	13	50%

Y: Enrollment and Participation in Mainstream Programs Chart

<input checked="" type="checkbox"/>	A majority of homeless assistance providers have case managers systematically assist clients in completing applications for mainstream benefit programs.
<input checked="" type="checkbox"/>	The CoC systematically analyzes its projects' APRs to assess and improve access to mainstream programs.
<input checked="" type="checkbox"/>	The CoC has an active planning committee that meets at least three times a year to improve CoC-wide participation in mainstream programs.
<input type="checkbox"/>	A majority of homeless assistance providers use a single application form for four or more of the above mainstream programs.
<input type="checkbox"/>	The CoC systematically provides outreach and intake staff specific, ongoing training on how to identify eligibility and program changes for mainstream programs.
<input type="checkbox"/>	The CoC or any of its projects has specialized staff whose primary responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs.
<input checked="" type="checkbox"/>	A majority of homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs.
<input checked="" type="checkbox"/>	A majority of homeless assistance providers have staff systematically follow-up to ensure that mainstream benefits are received.
<input checked="" type="checkbox"/>	The CoC coordinates with the State Interagency Council(s) on Homelessness to reduce or remove barriers to accessing mainstream services.

Z: Unexecuted Grants Awarded Prior to the 2006 CoC Competition Chart
Not Applicable

AA: CoC Participation in Energy Star Chart

HUD promotes energy-efficient housing. All McKinney-Vento funded projects are encouraged to promote energy efficiency, and are specifically encouraged to purchase and use Energy Star labeled products. For information on the Energy Star initiative go to: <http://www.energystar.gov>.

Have you notified CoC members of the Energy Star initiative? Yes No

Percentage of CoC projects on CoC Priority Chart using Energy Star appliances:
 0 %

AB: Section 3 Employment Policy Chart

	YES	NO
1. Is any project in your CoC requesting HUD funds for housing rehabilitation or new construction?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

America's Affordable Communities Initiative	U.S. Department of Housing and Urban Development	OMB approval no. 2510-0013 (exp. 03/31/2007)
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Public reporting burden for this collection of information is estimated to average 3 hours. This includes the time for collecting, reviewing, and reporting the data. The information will be used for encourage applicants to pursue and promote efforts to remove regulatory barriers to affordable housing. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Questionnaire for HUD's Initiative on Removal of Regulatory Barriers Part A. Local Jurisdictions. Counties Exercising Land Use and Building Regulatory Authority and Other Applicants Applying for Projects Located in such Jurisdictions or Counties

[Sarasota County, Florida]	1	2
<p>1. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a "housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a "housing element," please enter no. If no, skip to question # 4.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>2. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>3. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped "as of right" in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon districts or zones, the applicant may also enter yes.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>4. Does your jurisdiction's zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit health standards?</p>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

<p>5. If your jurisdiction has development impact fees, are the fees specified and calculated under local or state statutory criteria? If no, skip to question #7. Alternatively, if your jurisdiction does not have impact fees, you may enter yes.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>6. If yes to question #5, does the statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (nexus), and a method for fee calculation?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>7. If your jurisdiction has impact or other significant fees, does the jurisdiction provide waivers of these fees for affordable housing?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>8. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: “<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>” (www.huduser.org/publications/destech/smartcodes.html)</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>9. Does your jurisdiction use a recent version (i.e. published within the last 5 years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification. In the case of a tribe or TDHE, has a recent version of one of the model building codes as described above been adopted or, alternatively, has the tribe or TDHE adopted a building code that is substantially equivalent to one or more of the recognized model building codes?</p> <p>Alternatively, if a significant technical amendment has been made to the above model codes, can the jurisdiction supply supporting data that the amendments do not negatively impact affordability.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>10. Does your jurisdiction’s zoning ordinance or land use regulations permit manufactured (HUD-Code) housing “as of right” in all residential districts and zoning classifications in which similar site-built housing is permitted, subject to design, density, building size, foundation requirements, and other similar requirements applicable to other housing that will be deemed realty, irrespective of the method of production?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>11. Within the past five years, has a jurisdiction official (i.e., chief executive, mayor, county chairman, city manager, administrator, or a tribally recognized official, etc.), the local legislative body, or planning commission, directly, or in partnership with major private or public stakeholders, convened or funded comprehensive studies,</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes

commissions, or hearings, or has the jurisdiction established a formal ongoing process, to review the rules, regulations, development standards, and processes of the jurisdiction to assess their impact on the supply of affordable housing?		
12. Within the past five years, has the jurisdiction initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the jurisdiction’s “HUD Consolidated Plan?” If yes, attach a brief list of these major regulatory reforms.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
13. Within the past five years has your jurisdiction modified infrastructure standards and/or authorized the use of new infrastructure technologies (e.g. water, sewer, street width) to significantly reduce the cost of housing?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
14. Does your jurisdiction give “as-of-right” density bonuses sufficient to offset the cost of building below market units as an incentive for any market rate residential development that includes a portion of affordable housing? (As applied to density bonuses, "as of right" means a density bonus granted for a fixed percentage or number of additional market rate dwelling units in exchange for the provision of a fixed number or percentage of affordable dwelling units and without the use of discretion in determining the number of additional market rate units.)	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
15. Has your jurisdiction established a single, consolidated permit application process for housing development that includes building, zoning, engineering, environmental, and related permits? Alternatively, does your jurisdiction conduct concurrent, not sequential, reviews for all required permits and approvals?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
16. Does your jurisdiction provide for expedited or “fast track” permitting and approvals for all affordable housing projects in your community?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
17. Has your jurisdiction established time limits for government review and approval or disapproval of development permits in which failure to act, after the application is deemed complete, by the government within the designated time period, results in automatic approval?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
18. Does your jurisdiction allow “accessory apartments” either as: a) a special exception or conditional use in all single-family residential zones or, b) “as of right” in a majority of residential districts otherwise zoned for single-family housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
19. Does your jurisdiction have an explicit policy that adjusts or waives existing parking requirements for all affordable housing developments?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
20. Does your jurisdiction require affordable housing projects to undergo public review or special hearings when the project is otherwise in full compliance with the zoning ordinance and other development regulations?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Total Points:	3	34

America's Affordable Communities Initiative	U.S. Department of Housing and Urban Development	OMB approval no. 2510-0013 (exp. 03/31/2007)
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Public reporting burden for this collection of information is estimated to average 3 hours. This includes the time for collecting, reviewing, and reporting the data. The information will be used to encourage applicants to pursue and promote efforts to remove regulatory barriers to affordable housing. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Questionnaire for HUD's Initiative on Removal of Regulatory Barriers

Part A. Local Jurisdictions. Counties Exercising Land Use and Building Regulatory Authority and Other Applicants Applying for Projects Located in such Jurisdictions or Counties

[City of Sarasota, Florida]	1	2
<p>1. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a "housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a "housing element," please enter no. If no, skip to question # 4.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>2. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>3. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped "as of right" in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon districts or zones, the applicant may also enter yes.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>4. Does your jurisdiction's zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit</p>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

health standards?		
5. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a "housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a "housing element," please enter no. If no, skip to question # 4.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
6. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
7. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped "as of right" in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon districts or zones, the applicant may also enter yes.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
8. Does your jurisdiction's zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit health standards?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
9. If your jurisdiction has development impact fees, are the fees specified and calculated under local or state statutory criteria? If no, skip to question #7. Alternatively, if your jurisdiction does not have impact fees, you may enter yes.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
10. If yes to question #5, does the statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (nexus), and a method for fee calculation?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
11. If your jurisdiction has impact or other significant fees, does the jurisdiction provide waivers of these fees for affordable housing?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
12. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes

<p>requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: “<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>” (www.huduser.org/publications/destech/smartcodes.html)</p>		
<p>13. Does your jurisdiction use a recent version (i.e. published within the last 5 years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification. In the case of a tribe or TDHE, has a recent version of one of the model building codes as described above been adopted or, alternatively, has the tribe or TDHE adopted a building code that is substantially equivalent to one or more of the recognized model building codes?</p> <p>Alternatively, if a significant technical amendment has been made to the above model codes, can the jurisdiction supply supporting data that the amendments do not negatively impact affordability.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>14. Does your jurisdiction’s zoning ordinance or land use regulations permit manufactured (HUD-Code) housing “as of right” in all residential districts and zoning classifications in which similar site-built housing is permitted, subject to design, density, building size, foundation requirements, and other similar requirements applicable to other housing that will be deemed realty, irrespective of the method of production?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>15. Within the past five years, has a jurisdiction official (i.e., chief executive, mayor, county chairman, city manager, administrator, or a tribally recognized official, etc.), the local legislative body, or planning commission, directly, or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or hearings, or has the jurisdiction established a formal ongoing process, to review the rules, regulations, development standards, and processes of the jurisdiction to assess their impact on the supply of affordable housing?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>16. Within the past five years, has the jurisdiction initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the jurisdiction’s “HUD Consolidated Plan?” If yes, attach a brief list of these major regulatory reforms.</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>17. Within the past five years has your jurisdiction modified infrastructure standards and/or authorized the use of new infrastructure technologies (e.g. water, sewer, street width) to significantly reduce the cost of housing?</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes

<p>18. Does your jurisdiction give “as-of-right” density bonuses sufficient to offset the cost of building below market units as an incentive for any market rate residential development that includes a portion of affordable housing? (As applied to density bonuses, "as of right" means a density bonus granted for a fixed percentage or number of additional market rate dwelling units in exchange for the provision of a fixed number or percentage of affordable dwelling units and without the use of discretion in determining the number of additional market rate units.)</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>19. Has your jurisdiction established a single, consolidated permit application process for housing development that includes building, zoning, engineering, environmental, and related permits? Alternatively, does your jurisdiction conduct concurrent, not sequential, reviews for all required permits and approvals?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>20. Does your jurisdiction provide for expedited or “fast track” permitting and approvals for all affordable housing projects in your community?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>21. Has your jurisdiction established time limits for government review and approval or disapproval of development permits in which failure to act, after the application is deemed complete, by the government within the designated time period, results in automatic approval?</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>22. Does your jurisdiction allow “accessory apartments” either as: a) a special exception or conditional use in all single-family residential zones or, b) “as of right” in a majority of residential districts otherwise zoned for single-family housing?</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>23. Does your jurisdiction have an explicit policy that adjusts or waives existing parking requirements for all affordable housing developments?</p>	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
<p>24. Does your jurisdiction require affordable housing projects to undergo public review or special hearings when the project is otherwise in full compliance with the zoning ordinance and other development regulations?</p>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<p>Total Points:</p>	<p>8</p>	<p>24</p>

America's Affordable Communities Initiative	U.S. Department of Housing and Urban Development	OMB approval no. 2510-0013 (exp. 03/31/2010)
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Questionnaire for HUD’s Initiative on Removal of Regulatory Barriers

Part A. Local Jurisdictions. Counties Exercising Land Use and Building Regulatory Authority and Other Applicants Applying for Projects Located in such Jurisdictions or Counties

[Manatee County, Florida]	1	2
<p>1. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a “housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a “housing element,” please enter no. If no, skip to question # 4.</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>2. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
<p>3. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped “as of right” in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon</p>	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes

districts or zones, the applicant may also enter yes.		
4. Does your jurisdiction's zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit health standards?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
5. If your jurisdiction has development impact fees, are the fees specified and calculated under local or state statutory criteria? If no, skip to question #7. Alternatively, if your jurisdiction does not have impact fees, you may enter yes.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
6. If yes to question #5, does the statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (nexus), and a method for fee calculation?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
7. If your jurisdiction has impact or other significant fees, does the jurisdiction provide waivers of these fees for affordable housing?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
8. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: " <i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i> " (www.huduser.org/publications/destech/smartcodes.html)	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
9. Does your jurisdiction use a recent version (i.e. published within the last 5 years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification. In the case of a tribe or TDHE, has a recent version of one of the model building codes as described above been adopted or, alternatively, has the tribe or TDHE adopted a building code that is substantially equivalent to one or more of the recognized model building codes? Alternatively, if a significant technical amendment has been made to the above model codes, can the jurisdiction supply supporting data that the amendments do not negatively impact affordability.	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
10. Does your jurisdiction's zoning ordinance or land use regulations permit manufactured (HUD-Code) housing "as of right" in all residential districts and zoning classifications in which similar site-built housing is permitted, subject to design, density, building size, foundation requirements, and other similar requirements applicable to other housing that will be deemed realty, irrespective of the method of	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes

production?		
11. Within the past five years, has a jurisdiction official (i.e., chief executive, mayor, county chairman, city manager, administrator, or a tribally recognized official, etc.), the local legislative body, or planning commission, directly, or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or hearings, or has the jurisdiction established a formal ongoing process, to review the rules, regulations, development standards, and processes of the jurisdiction to assess their impact on the supply of affordable housing?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
12. Within the past five years, has the jurisdiction initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the jurisdiction's "HUD Consolidated Plan?" If yes, attach a brief list of these major regulatory reforms.	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
13. Within the past five years has your jurisdiction modified infrastructure standards and/or authorized the use of new infrastructure technologies (e.g. water, sewer, street width) to significantly reduce the cost of housing?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
14. Does your jurisdiction give "as-of-right" density bonuses sufficient to offset the cost of building below market units as an incentive for any market rate residential development that includes a portion of affordable housing? (As applied to density bonuses, "as of right" means a density bonus granted for a fixed percentage or number of additional market rate dwelling units in exchange for the provision of a fixed number or percentage of affordable dwelling units and without the use of discretion in determining the number of additional market rate units.)	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
15. Has your jurisdiction established a single, consolidated permit application process for housing development that includes building, zoning, engineering, environmental, and related permits? Alternatively, does your jurisdiction conduct concurrent, not sequential, reviews for all required permits and approvals?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
16. Does your jurisdiction provide for expedited or "fast track" permitting and approvals for all affordable housing projects in your community?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes
17. Has your jurisdiction established time limits for government review and approval or disapproval of development permits in which failure to act, after the application is deemed complete, by the government within the designated time period, results in automatic approval?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
18. Does your jurisdiction allow "accessory apartments" either as: a) a special exception or conditional use in all single-family residential zones or, b) "as of right" in a majority of residential districts otherwise zoned for single-family housing?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
19. Does your jurisdiction have an explicit policy that adjusts or waives existing parking requirements for all affordable housing developments?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes

20. Does your jurisdiction require affordable housing projects to undergo public review or special hearings when the project is otherwise in full compliance with the zoning ordinance and other development regulations?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Total Points:	8	24

America's Affordable Communities Initiative	U.S. Department of Housing and Urban Development	OMB approval no. 2510-0013 (exp. 03/31/2010)
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**Questionnaire for HUD's Initiative on Removal of Regulatory Barriers
Part A. Local Jurisdictions. Counties Exercising Land Use and Building Regulatory Authority and Other Applicants Applying for Projects Located in such Jurisdictions or Counties**

[City of Bradenton]	1	2
1. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a "housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a "housing element," please enter no. If no, skip to question # 4.	No	XYes
2. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?	No	XYes
3. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped "as of right" in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The	No	XYes

ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon districts or zones, the applicant may also enter yes.		
4. Does your jurisdiction’s zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit health standards?	Yes	XNo
5. If your jurisdiction has development impact fees, are the fees specified and calculated under local or state statutory criteria? If no, skip to question #7. Alternatively, if your jurisdiction does not have impact fees, you may enter yes.	No	XYes
6. If yes to question #5, does the statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (nexus), and a method for fee calculation?	No	XYes
7. If your jurisdiction has impact or other significant fees, does the jurisdiction provide waivers of these fees for affordable housing?	XNo	Yes
8. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: “ <i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i> ” (www.huduser.org/publications/destech/smartcodes.html)	XNo	Yes
9. Does your jurisdiction use a recent version (i.e. published within the last 5 years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification. In the case of a tribe or TDHE, has a recent version of one of the model building codes as described above been adopted or, alternatively, has the tribe or TDHE adopted a building code that is substantially equivalent to one or more of the recognized model building codes? Alternatively, if a significant technical amendment has been made to the above model codes, can the jurisdiction supply supporting data that the amendments do not negatively impact affordability.	No	XYes

<p>10. Does your jurisdiction’s zoning ordinance or land use regulations permit manufactured (HUD-Code) housing “as of right” in all residential districts and zoning classifications in which similar site-built housing is permitted, subject to design, density, building size, foundation requirements, and other similar requirements applicable to other housing that will be deemed realty, irrespective of the method of production?</p>	No	XYes
<p>11. Within the past five years, has a jurisdiction official (i.e., chief executive, mayor, county chairman, city manager, administrator, or a tribally recognized official, etc.), the local legislative body, or planning commission, directly, or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or hearings, or has the jurisdiction established a formal ongoing process, to review the rules, regulations, development standards, and processes of the jurisdiction to assess their impact on the supply of affordable housing?</p>	No	XYes
<p>12. Within the past five years, has the jurisdiction initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the jurisdiction’s “HUD Consolidated Plan?” If yes, attach a brief list of these major regulatory reforms.</p>	XNo	Yes
<p>13. Within the past five years has your jurisdiction modified infrastructure standards and/or authorized the use of new infrastructure technologies (e.g. water, sewer, street width) to significantly reduce the cost of housing?</p>	XNo	Yes
<p>14. Does your jurisdiction give “as-of-right” density bonuses sufficient to offset the cost of building below market units as an incentive for any market rate residential development that includes a portion of affordable housing? (As applied to density bonuses, "as of right" means a density bonus granted for a fixed percentage or number of additional market rate dwelling units in exchange for the provision of a fixed number or percentage of affordable dwelling units and without the use of discretion in determining the number of additional market rate units.)</p>	XNo	Yes
<p>15. Has your jurisdiction established a single, consolidated permit application process for housing development that includes building, zoning, engineering, environmental, and related permits? Alternatively, does your jurisdiction conduct concurrent, not sequential, reviews for all required permits and approvals?</p>	No	XYes
<p>16. Does your jurisdiction provide for expedited or “fast track” permitting and approvals for all affordable housing projects in your community?</p>	No	XYes

17. Has your jurisdiction established time limits for government review and approval or disapproval of development permits in which failure to act, after the application is deemed complete, by the government within the designated time period, results in automatic approval?	XNo	Yes
18. Does your jurisdiction allow “accessory apartments” either as: a) a special exception or conditional use in all single-family residential zones or, b) “as of right” in a majority of residential districts otherwise zoned for single-family housing?	XNo	Yes
19. Does your jurisdiction have an explicit policy that adjusts or waives existing parking requirements for all affordable housing developments?	XNo	Yes
20. Does your jurisdiction require affordable housing projects to undergo public review or special hearings when the project is otherwise in full compliance with the zoning ordinance and other development regulations?	Yes	XNo
Total Points:	8	24