



Housing Opportunities for Persons With AIDS (HOPWA) Program

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

OMB Number 2506-0133 (Expiration Date: 08/31/2011)

The HOPWA CAPER report for formula grantees provides annual information on program accomplishments in meeting the program's performance outcome measure: maintain housing stability; improve access to care; and reduce the risk of homelessness for low-income persons and their families living with HIV/AIDS. This information is also covered under the Consolidated Plan Management Process (CPMP) report and includes Narrative Responses and Performance Charts required under the Consolidated Planning Regulations. The public reporting burden for the collection of information is estimated to average 45 hours per manual response, or less if an automated data collection and retrieval system is in use, along with 68 hours for record keeping, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Grantees are required to report on the activities undertaken only, thus there may be components of these reporting requirements that may not be applicable. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a valid OMB control number.

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

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

The revisions contained within this edition are designed to accomplish the following: (1) provide for an assessment of unmet need; (2) streamline reporting sources and uses of leveraged resources; (3) differentiate client outcomes for temporary/short-term and permanent facility-based assistance; (4) clarify indicators for short-term efforts and reducing the risk of homelessness; and (5) clarify indicators for Access to Care and Support for this special needs population. In addition, grantees are requested to comply with the Federal Funding Accountability and Transparency Act 2006 (Public Law 109-282) which requires federal grant recipients to provide general information for all entities (including subrecipients) receiving \$25,000+ in federal funds.

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Central Contractor Registration (CCR): *This is a new reporting requirement effective October 1, 2009.* The primary registrant database for the U.S. Federal Government; CCR collects, validates, stores, and disseminates data in support of agency acquisition missions, including Federal agency contract and assistance awards. Both current and potential federal government registrants are required to register in CCR in order to be awarded contracts by the federal government. Registrants must update or renew their registration at least once per year to maintain an active status. Although recipients of direct federal contracts and grant awards have been required to be registered with CCR since 2003, this requirement is now being extended to indirect recipients of federal funds with the passage of ARRA. Per ARRA (American Recovery and Reinvestment Act) and FFATA (Federal Funding Accountability and Transparency Act) federal regulations, all sub-grantees or subcontractors receiving federal grant awards or contracts must have a DUNS (Data Universal Numbering System) Number and be registered with the CCR (Central Contractor Registration).

Continued Use Periods. Grantees that use HOPWA funds for new construction, acquisition, or substantial rehabilitation are required to operate their facilities for ten years for HOPWA-eligible beneficiaries. For the years in which grantees do not receive and expend HOPWA funding for these activities, the grantee must submit an Annual Certification of Continued Project Operation throughout the required use periods. This certification is included in Part 5 in CAPER.

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

Filing Requirements. Within 90 days of the completion of each program year, grantees must submit their completed CAPER to the CPD Director in the grantee's State or Local HUD Field Office, and to the HOPWA Program Office: Office of HIV/AIDS Housing, Room 7212, U.S. Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, D.C. 20410.

Definitions: Facility-Based Housing Assistance: All HOPWA housing expenditures which provide support to facilities, including community residences, SRO dwellings, short-term or transitional facilities, project-based units, master leased units, scattered site units leased by the organization, and other housing facilities approved by HUD.

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

Housing Assistance Total: The non-duplicated number of households receiving housing subsidies and residing in units of facilities that were dedicated to persons living with HIV/AIDS and their families that were supported with HOPWA or leveraged funds during this operating year.

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

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

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

Outcome: The HOPWA assisted households who have been enabled to establish or better maintain a stable living environment in housing that is safe, decent, and sanitary, (per the regulations at 24 CFR 574.310(b)) and to reduce the risks of homelessness, and improve access to HIV treatment and other health care and support. The goal that eighty percent of HOPWA clients will maintain housing stability, avoid homelessness, and access care by 2011.

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

Program Income: Gross income directly generated from the use of HOPWA funds, including repayments. See grant administration requirements on program income for state and local governments at 24 CFR 85.25, or for non-profits at 24 CFR 84.24.

Short-Term Rent, Mortgage and Utility Payments (STRMU): Subsidy or payments subject to the 21-week limited time period to prevent the homelessness of a household (e.g., HOPWA short-term rent, mortgage and utility payments).

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

Tenant-Based Rental Assistance: (TBRA): An on-going rental housing subsidy for units leased by the client, where the amount is determined based in part on household income and rent costs. Project-based costs are considered facility-based expenditures.

Total by Type of Housing Assistance/Services: The non-duplicated households assisted in units by type of housing assistance dedicated to persons living with HIV/AIDS and their families or services provided that were supported with HOPWA and leveraged funds during the operating year

Housing Opportunities for Persons with AIDS (HOPWA) Consolidated Annual Performance and Evaluation Report - Measuring Performance Outcomes

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Part 1: Grantee Executive Summary

As applicable, complete the charts below followed by the submission of a written narrative to questions A through C, and the completion of Chart D. Chart 1 requests general grantee information and Chart 2 is to be completed for each organization selected or designated as a project sponsor, as defined by CFR 574.3. In Chart 3, indicate each subrecipient organization with a contract/agreement of \$25,000 or greater that assists grantees or project sponsors carrying out their activities. Agreements include: grants, subgrants, loans, awards, cooperative agreements, and other forms of financial assistance; and contracts, subcontracts, purchase orders, task orders, and delivery orders. These elements address requirements in the Federal Funding and Accountability and Transparency Act of 2006 (Public Law 109-282).

1. Grantee Information

| | | | | |
|---|--|---|---|----------|
| HUD Grant Number H09CO09F999 and COH10F999 | | Operating Year for this report <i>From (mm/dd/yy)</i> 04/01/2010 <i>To (mm/dd/yy)</i> 03/31/2011 | | |
| Grantee Name Colorado Department of Local Affairs, Division of Housing | | | | |
| Business Address | | 1313 Sherman St., Room 500 | | |
| City, County, State, Zip | | Denver | Denver | CO 80203 |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | | 84-0644739 | | |
| DUN & Bradstreet Number (DUNS): | | 87-8192483 | Central Contractor Registration (CCR): Is the grantee's CCR status currently active? <small>(See pg 2 of instructions)</small> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| *Congressional District of Business Address | | CO-1 | | |
| *Congressional District of Primary Service Area(s) | | CO-2 CO-3 CO-4 CO-5 CO-6 CO-7 | | |
| *Zip Code(s) of Primary Service Area(s) | | Not Applicable | | |
| City(ies) and County(ies) of Primary Service Area(s) | | Not Applicable | | |
| Organization's Website Address www.colorado.gov/dola/cdh/index.html | | Does your organization maintain a waiting list? <input type="checkbox"/> Yes <input type="checkbox"/> No Not Applicable If yes, explain in the narrative section how this list is administered. | | |
| Have you prepared any evaluation report? <i>If so, please indicate its location on an Internet site (url) or attach copy.</i> | | | | |

2. Project Sponsor Information

In Chart 2, provide the following information for each organization designated or selected to serve as a project sponsor, as defined by CFR 574.3.

| | | | | | |
|--|--|---|---------|---|-------|
| Project Sponsor Agency Name (1) Boulder County AIDS Project | | Parent Company Name, if applicable | | | |
| Name and Title of Contact at Project Sponsor Agency | | Ana Hopperstad, Executive Director | | | |
| Email Address | | ana@bcap.org | | | |
| Business Address | | 2118 14 th Street | | | |
| City, County, State, Zip, | | Boulder | Boulder | CO | 80302 |
| Phone Number (with area code) | | 303-444-6121 x 104 | | Fax Number (with area code) 303-444-0260 | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | | 74-2442032 | | | |
| DUN & Bradstreet Number (DUNs): | | 84-5731454 | | Central Contractor Registration (CCR): Is the sponsor's CCR status currently active? (See pg 2 of instructions) <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Congressional District of Business Location of Sponsor | | 2 nd Congressional District (Boulder); 4 th Congressional District (Longmont) | | | |
| Congressional District(s) of Primary Service Area(s) | | Same as above. | | | |
| Zip Code(s) of Primary Service Area(s) | | 80301, 80302, 80303, 80304, 80305, 80306, 80501, 80503 | | | |
| City(ies) and County(ies) of Primary Service Area(s) | | Boulder County (HOPWA Service Area) Boulder, Broomfield, Gilpin and Clear Creek Counties (Ryan White Service Area) | | Boulder, Longmont (HOPWA) | |
| Total HOPWA contract amount for this Organization | | 2009-2010: \$97,146 2010-2011: \$59,053 | | | |
| Organization's Website Address www.bcap.org | | Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input type="checkbox"/> | | If yes, explain in the narrative section how this list is administered. A waiting list is maintained at the agency. New applicants are added in order of the date of application. We have not been able to add any new subsidies to the HOPWA subsidy program since 2009 due to funding. | | | |

| | | | | | |
|--|--|---|--|--|--|
| Project Sponsor Agency Name (2) Northern Colorado AIDS Project | | Parent Company Name, if applicable | | | |
| Name and Title of Contact at Project Sponsor Agency | | Jennifer Chase, Client Services Director | | | |
| Email Address | | Jennifer@ncaids.org | | | |
| Business Address | | 400 Remington, Suite 100 | | | |
| City, County, State, Zip, | | Fort Collins | | | |
| Phone Number (with area code) | | 970-484-4469 | | | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | | 84-1035151 | | | |
| DUN & Bradstreet Number (DUNs): | | 05-0012009 | | | |
| Congressional District of Business Location of Sponsor | | 4 th | | | |
| Congressional District(s) of Primary Service Area(s) | | 4 th | | | |
| Zip Code(s) of Primary Service Area(s) | | 80524, 80521, 80537, 80631, 80751 | | | |
| City(ies) and County(ies) of Primary Service Area(s) | | Fort Collins, Loveland, Greeley, Evans, Estes Park, Windsor, Sterling, Fort Morgan, Fort Lupton, Yuma, Berthoud | | | |

| | | | |
|--|---|--|--|
| Total HOPWA contract amount for this Organization | 2009-2010: \$71,536 2010-2011: \$39,073 | | |
| Organization's Website Address www.ncaids.org | Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input type="checkbox"/> | If yes, explain in the narrative section how this list is administered. We currently have a closed wait list that was populated during an open application period in January 2009. The list was randomly ordered and clients were notified in order when a current client transitions out of TBRA. When the wait list is exhausted, another open application period will be held to populate the wait list. | | |

| | | | |
|--|--|--|--|
| Project Sponsor Agency Name (3) Southern Colorado AIDS Project | Parent Company Name, if applicable N/A | | |
| Name and Title of Contact at Project Sponsor Agency | Richard Blair, Executive Director | | |
| Email Address | rblair@s-cap.org | | |
| Business Address | 1301 South 8 th Street, Suite 200 | | |
| City, County, State, Zip, | Colorado Springs | | |
| Phone Number (with area code) | 719-578-9092 | | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | 84-1054293 | | |
| DUN & Bradstreet Number (DUNs): | 80-3367259 | Central Contractor Registration (CCR): Is the sponsor's CCR status currently active? (See pg 2 of instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Congressional District of Business Location of Sponsor | Fifth Congressional District | | |
| Congressional District(s) of Primary Service Area(s) | Third, Fourth and Fifth | | |
| Zip Code(s) of Primary Service Area(s) | 80901 thru 80951 Colorado Springs 81002 thru 81012 pueblo | | |
| City(ies) and County(ies) of Primary Service Area(s) | Colorado Springs and Pueblo | | |
| Total HOPWA contract amount for this Organization | 2009-2010: \$132,234 2010-2011: \$282,070 | | |
| Organization's Website Address www.s-cap.org | Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Please check if yes and a faith-based organization. <input type="checkbox"/> Please check if yes and a grassroots organization. <input type="checkbox"/> | HOPWA is administered to client based on the date of application- first in, first out. | | |

| | | | | |
|--|--|----|--|------|
| Project Sponsor Agency Name (4) Western Colorado AIDS Project | Parent Company Name, if applicable Western Colorado Health Network | | | |
| Name and Title of Contact at Project Sponsor Agency | Scott Montgomery, Housing Coordinator/Prevention Education Coordinator | | | |
| Email Address | scott@westcap.info | | | |
| Business Address | 805 Main Street | | | |
| City, County, State, Zip, | Grand Junction | CO | 81501 | 3506 |
| Phone Number (with area code) | 970-243-2437 | | Fax Number (with area code) 970-243-5791 | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | 84-1112986 | | | |

| | | |
|--|---|--|
| DUN & Bradstreet Number (DUNs): | 79-2128878 | Central Contractor Registration (CCR): Is the sponsor's CCR status currently active? (See pg 2 of instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Congressional District of Business Location of Sponsor | 3 | |
| Congressional District(s) of Primary Service Area(s) | 3 | |
| Zip Code(s) of Primary Service Area(s) | See below | |
| City(ies) and County(ies) of Primary Service Area(s) | <u>Zip code/City/County:</u> 80423 Bond Eagle, 80424 Breckenridge, Summit, 08428 Clark Routt, 08430 Coalmont Jackson, 80435 Dillon Summit, 80446 Granby Grand, 80447 Grand Lake Grand, 80459 Kremmling Grand, 80461 Leadville Lake, 80463 McCoy Eagle, 80467 Oak Creek Routt, 80468 Parshall Grand, 80479 Toponas Routt, 80480 Walden Jackson, 80487 Steamboat Springs Routt, 80498 Silverthorne Summit, 81137 Ignacio LaPlata, 81147 Pagosa Springs Archuleta, 81210 Almont Gunnison, 81220 Cimarron Montrose, 81224 Crested Butte Gunnison, 81230 & 81247 Gunnison Gunnison, 81235 Lake City Hinsdale, 81237 Ohio City Gunnison, 81239 Parlin Gunnison, 81243 Powderhorn Gunnison, 81251 Twin Lakes Lake, 81301 & 81303 Durango La Plata, 81320 Cahone Dolores, 81321 Cortez Montezuma, 81323 Dolores Montezuma, 81324 Dove Creek Dolores, 81325 Egnar San Miguel, 81326 Hesperus La Plata, 81327 Lewis Montezuma, 81328 Mancos Montezuma, 81331 Pleasant View Montezuma, 81335 Yellow Jacket Montezuma, 81401 Montrose Montrose, 81410 Austin Delta, 81411 Bedrock Montrose, 81413 Cedaredge Delta, 81415 Crawford Delta, 81416 Delta Delta, 81418 Eckert Delta, 81419 Hotchkiss Delta, 81422 Naturita Montrose, 81424 Nucla Montrose, 81425 Olathe Montrose, 81428 Paonia Delta, 81431 Redvale Montrose, 81432 Ridgeway Ouray, 81434 Somerset Gunnison, 81435 Telluride San Miguel, 81501 & 81503 & 81504 & 81505 & 81506 Grand Junction Mesa, 81520 Clifton Mesa, 81521 Fruita Mesa, 81522 Gateway Mesa, 81524 Loma Mesa, 81525 Mack Mesa, 81526 Palisade Mesa, 81527 Whitewater Mesa, 81601 Glenwood Springs Garfield, 81610 & 81633 Dinosaur Moffat, 81611 Aspen Pitkin, 81621 Basalt Eagle, 81623 Carbondale Garfield, 81624 Collbran Mesa, 81625 Craig Moffat, 81630 DeBeque Mesa, 81632 Edwards Eagle, 81635 Parachute Garfield, 81637 Gypsum Eagle, 81638 Hamilton Moffat, 81639 Hayden Routt, 81640 Maybell Moffat, 81641 Meeker Rio Blanco, 81642 Meredith Pitkin, 81643 Mesa Mesa, 81647 New Castle Garfield, 81648 Rangely Rio Blanco, 81650 Rifle Garfield, 81652 Silt Garfield, 81653 Slater Moffat, 81654 Snowmass Pitkin, 81657 Vail Eagle. | <u>Counties:</u> Moffat, Routt, Jackson, Grand, Rio Blanco, Garfield, Eagle, Summit, Mesa, Delta, Montrose, Pitkin, Lake, Gunnison, Ouray, San Miguel, Dolores, San Juan, Montezuma, Hinsdale, La Plata, Archuleta. |
| Total HOPWA contract amount for this Organization | 2009-2010: \$51,536 2010-2011: \$2,671 | |
| Organization's Website Address www.westcap.info | Does your organization maintain a waiting list? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is the sponsor a nonprofit organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please check if yes and a faith-based organization.</i> <input type="checkbox"/> <i>Please check if yes and a grassroots organization.</i> <input type="checkbox"/> | If yes, explain in the narrative section how this list is administered. The Housing Coordinator maintains a TBRA waiting list based upon date of client request and availability. A point system determines priority amongst those waiting. | |

3. Subrecipient Information

In Chart 3, provide the following information for each subrecipient with a contract/agreement of \$25,000 or greater that assist the grantee or project sponsors to carry out their administrative or service delivery functions. Agreements include: grants, subgrants, loans, awards, cooperative agreements, and other forms of financial assistance; and contracts, subcontracts, purchase orders, task orders, and delivery orders. (Organizations listed may have contracts with project sponsors or other organizations beside the grantee.) These elements address requirements in the Federal Funding and Accountability and Transparency Act of 2006 (Public Law 109-282).

| | | | | |
|--|--|----|---|---|
| Subrecipient Name Colorado Health Network, Inc DBA Colorado AIDS Project | | | | Parent Company Name, if applicable Not Applicable |
| Name and Title of Contact at Subrecipient | Ruth Pederson, Executive Director Robert George, Director of Client Services | | | |
| Email Address | ruthp@coloradoaidsproject.org robertg@coloradoaidsproject.org | | | |
| Business Address | 2490 W. 26 th Ave. Ste. 300A | | | |
| City, State, Zip, County | Denver | CO | 80211 | Denver |
| Phone Number (with area code) | 303-837-1510 | | Fax Number (include area code) 303-837-0388 | |
| Employer Identification Number (EIN) or Tax Identification Number (TIN) | 84-0961159 | | | |
| DUN & Bradstreet Number (DUNS): | 14-09553331 | | Central Contractor Registration (CCR): if applicable. Is the subrecipient's CCR status currently active? (See pg 2 of instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| North American Industry Classification System (NAICS) Code | 64120 | | | |
| Congressional District of Location | 1st | | | |
| Congressional District of Primary Service Area | 1st | | | |
| Zip Code(s) of Primary Service Area(s) | Not applicable | | | |
| City (ies) and County (ies) of Primary Service Area(s) | Not Applicable | | | |
| Total HOPWA Contract Amount | \$412,645.00 | | | |

A. Grantee and Community Overview

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

Boulder County AIDS Project (BCAP)

Major Achievements and Highlights:

BCAP is proud to have provided housing services, including a HOPWA-funded rent subsidy to a total of 12 persons living with HIV across Boulder County. These services included housing counseling, medical case management including linkage to care, adherence counseling, risk reduction counseling and benefits navigation. All clients in the HOPWA subsidy program received on-going bio-psycho-social assessments of need, creation of a treatment plan with related referrals to agency and community resources, and on-going support. Agency resources included: access twice a month to the agency food bank, medical transportation services, access once a month to a therapeutic massage clinic; weekly access to an acupuncture clinic; receipt of a monthly newsletter; access to pro bono psychotherapy; pro bono legal; and pro bono substance abuse counseling. Each housing client developed a permanent housing plan with their case manager and were required to apply for all available permanent housing opportunities which presented themselves in the Boulder community.

Brief Description of the Grant Organization: Boulder County AIDS Project (BCAP)

The Boulder County AIDS Project (BCAP) is a nonprofit 501c3 organization which has provided HIV/ AIDS services (case management, prevention, and basic needs) to the community for 26 years. BCAP is the only agency in this service area which provides medically accurate, evidence-based HIV-specific services. Along with case management, BCAP provides HIV testing and counseling, community outreach through education presentation in area public schools, community-based organizations, and at public events. BCAP also provides a Positive Speaker's service to the community. BCAP has maintained powerful and active prevention programming to men who have sex with men – gay, bisexual and non-gay identifying men – who at high risk of HIV infection in our state. Our community outreach program serves high risk youth, the incarcerated population in Boulder County, the homeless and injection drug using populations.

Area of Service: Boulder County AIDS Project (BCAP)

The Boulder County AIDS Project serves four Colorado counties: Boulder, Broomfield, Gilpin and Clear Creek Counties. BCAP's HOPWA subsidies cover Boulder County only. Our staff provides Medical Case Management to individuals who receive a HOPWA subsidy from the Colorado AIDS Project in Denver but who live in our Ryan White service area.

Program Contacts: Boulder County AIDS Project (BCAP)

The primary contact for BCAP's Housing-related services is Ana Hopperstad, Executive Director (ana@bcap.org; 303-444-6121 x 104). A secondary contact is Celeste LeBlanc, Care Services Director (celeste@bcap.org; 303-444-6121 x 102).

Overview of the Range/Type of Housing Activities Provided: Boulder County AIDS Project (BCAP)

BCAP provides housing counseling to all clients enrolled in Medical and Non-Medical Case Management. This includes identifying clients who are homeless or under-housed in our service area. We work with area homeless shelters and day treatment programs for the homeless, transitional housing programs in Boulder and Longmont, the local mental health center which has housing subsidies available through the state-funded Supportive Housing and Homeless Program (SHHP), and area housing authorities (Boulder Housing Partners, Boulder County Housing Authority and the Longmont Housing Authority). In addition, BCAP is fortunate to have received community support in 2002 to build a group home specifically designed for persons living with HIV. This home houses up to five adults and provides a peer support atmosphere for individuals who need to be located in proximity to Boulder Community Hospital and the Beacon Center for Infectious Disease in Boulder.

Clients receive budgeting support, help accessing employment/career counseling through Work Force Boulder County and the YWCA Career Counseling Center located near our Boulder offices. In addition, clients receive support identifying sustainable permanent housing opportunities to achieve long-term stability. BCAP case managers work closely with the Boulder County Department of Housing and Human Services to apply for food stamps, Medicaid, child care, home and community based services, and a myriad of other County-funded benefits.

Northern Colorado AIDS Project (NCAP) serves the eight northeast counties of Colorado. The purpose of our TBRA program is to provide temporary assistance to clients transitioning into stable, affordable housing. All clients participating on TBRA are required to show proof that they are applying for other permanent, subsidized housing or that they are on a waitlist for permanent housing. At the beginning of the grant year, we had ten people housed on TBRA. We have had an extremely successful year transitioning clients onto Section 8. During the grant year, we had 5 TBRA clients obtain permanent, subsidized housing and terminate TBRA. We took one family off of the waitlist and we currently have 6 people on TBRA. Affordable housing in northeast Colorado is extremely limited. Obtaining Section 8 housing is also difficult in northern Colorado due to the low vacancy rate. It often takes more than 60 days for a client to obtain housing for TBRA or Section 8. We are unable to move anyone else off of the waitlist due to limited funding. NCAP has a closed wait list that was populated

and randomly ordered in January 2009. The waitlist is purged of inactive clients annually. There are currently 5 people on the wait list. Once the current wait list is exhausted we will open up the applications and populate a new wait list. We also receive STRMU that we use to provide mortgage assistance.

The Southern Colorado AIDS Project (S-CAP) distributed a total of \$197,412 of HOPWA funds between 04/01/2010 thru 03/31/2011. These funds, while designated for use by S-CAP clients, are administered by the Colorado AIDS Project (CAP). CAP Also provides training and oversight for the HOPWA program at S-CAP. S-CAP provides housing assistance to clients throughout its entire 25 county service area: El Paso, Elbert, Lincoln, Kit Carson, Cheyenne, Teller, Park Chaffee, Fremont, Pueblo, Custer, Saguache, Mineral, Rio Grande, Alamosa, Conejos, Costilla, Huerfano, Las Animas, Baca, Prowers, Bent, Otero, Crowley and Kiowa counties.

S-Cap assesses all clients for housing needs based on level of income, household size, expenses (including medical and medications), special needs, and overall health status. Clients applying for HOPWA assistance are first referred to public housing to determine eligibility for other federally funded housing programs.

The HOPWA Contacts at S-CAP are:

- Sandra Dunlap, Medical Case Manager and HOPWA Coordinator
- Richard Blair, Executive Director and HOPWA Supervisor
- Maggie La Duca, Accountant and HOPWA Financial Administrator

S-CAP, through HOPWA funds, provides long-term rental assistance (Tenant Based Rental Assistance—TBRA), non-direct housing supportive services and Short Term Rental Mortgage and Utility Assistance—(STRMU). Homeless prevention via short-term rental assistance and utilities are provided through Ryan White Care Act funds.

Western Colorado AIDS Project serves 22 counties—an area approximately 41,000 square miles of rural, frontier rural, resort, and small metro-area communities. WestCAP's CHAMP program is managed by Scott Montgomery and provides short term rent, mortgage, and/or utility assistance, as well as providing ongoing housing that is intended to assist clients to transitioning to other long-term forms of housing such as Section 8, low-income housing, or employment that supports individual ability to pay.

B. Annual Performance under the Action Plan

Provide a narrative addressing each of the following four items:

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

Due to flat funding BCAP was not able to offer any additional subsidies to clients in need during this grant year. We received funds to keep 11 clients housed at subsidized levels through the year. In addition, we terminated one client's housing subsidy due to no engagement in case management and lease violations. On a positive note, we were able to fund 25% personnel costs for one housing case manager's permanent housing counseling services, including employment counseling and benefits navigation.

Western Colorado AIDS Project was able to assist 8 clients in long term housing assistance as well as assisting 16 other unduplicated clients in obtaining individually-sustained housing through deposit and/or short term rental assistance throughout the 22-county region. Clients were referred to other housing opportunities such as Section 8 and low-income housing as applicable. WestCAP does not currently have specific rental units but, rather, refers individual clients to rental properties that meet the HOPWA guidelines with Fair Market Rent and through home inspections. It is difficult at times, especially within the resort communities, to find housing opportunities below the Fair Market Rent. It is also difficult, due to financial constraints, to support the number of clients requesting ongoing housing assistance, thus the need for the waiting list. HOPWA funds were distributed based on individual client request within the service region and a committee review of individual circumstances that included a long term plan for housing. The current TBRA program was based on first come, first serve.

2. Outcomes Assessed. Assess program goals against actual client outcomes for achieving housing stability, reducing risks of homelessness, and improving access to care. If current year results are lower than the national program targets (80 percent of HOPWA clients maintain housing stability, avoid homelessness and access care), please describe the steps being taken to achieve the national outcome goal in next operating year.

BCAP: 11 clients maintained stable housing and access to medical care during the grant year thanks to this housing subsidy. One client was not able to sustain successful enrollment in this program during the grant year. This was a 92% success rate for those enrolled in the HOPWA subsidy program. BCAP staff will continue to assess, refer, and provide permanent housing counseling to 100% of those in the housing subsidy program in the next operating year. Three residents in the HOPWA subsidy program have been selected in a local housing authority lottery to be considered for a Housing Choice Section 8 voucher. These vouchers are provided to preference populations with disability. All three of these residents are eligible based on this local area preference. It is our hope that three HOPWA residents will transition to a permanent Section 8 voucher in the coming operating year and transition out of the HOPWA funded subsidy program. Once these clients have transitioned, they will continue to receive supportive services funded through the Ryan White Medical and Non-medical case management programs to ensure on-going sustainable stability.

The program goal is to assist clients in obtaining and maintaining adequate housing. Clients are more apt to attend and participate in their medical care if they have stable housing. WestCAP was able to transition 2 individual clients off of TBRA and onto Section 8 housing that will continue to provide housing stability. Of the 16 other unduplicated clients who were assisted with Permanent Housing and/or STRMU, 14 maintained their current housing and 2 moved out of the area. With the advent of a waiting list for the TBRA program, if more funds were available, WestCAP would have been able to assist more clients with long-term stable housing options.

3. Coordination. Report on program coordination with other mainstream housing and supportive services resources, including the use of committed leveraging from other public and private sources that helped to address needs for eligible persons identified in the Consolidated Plan/Strategic Plan.

BCAP is a referring partner with the Boulder County Advocates for Transitional Housing (BCATH) program and the Inn Between Transitional Housing program. As a referring partner, BCAP staff participate in monthly screening meetings designed to identify homeless individuals with the greatest need and highest potential for success for limited subsidized units in our service area. BCAP also collaborates with the local Boulder Shelter for the Homeless and their Transitions program. Our staff are active advocates when local housing authorities call for applications during open application periods. We work with landlords who provide affordable housing, and site-based and choice section 8 housing. In addition, BCAP maintains a group home for residents who are living with HIV.

CHAMP is designed to be a alternative housing program while clients are waiting for Section 8 housing, low-income housing, employee-assistance housing, or obtaining additional income to become self-sufficient. It can also support a client while searching for employment. Referrals are made to other short-term community entities within WestCAP's 22-county region for assistance. Case Management is implemented to assist clients in obtaining or reviewing any possible long- or short-term housing solutions.

This grant year has been a tremendous success for NCAP in transitioning people from TBRA to permanent, subsidized housing through Section 8. The City of Fort Collins Housing Authority was awarded 100 Section 8 mainstream vouchers this year for disabled adults. Five people transitioned off of TBRA into mainstream Section 8 housing. Due to limited affordable housing in the area, each of the 5 clients maintained their current residence in order to secure Section 8 within 60 days. We housed one additional family from our wait list this year in northeastern Colorado. It took over 90 days to find affordable housing in the area due to extremely low vacancy rates. We no longer have any TBRA clients in Fort Collins, but maintain clients in Greeley, Loveland, Fort Morgan and Sterling. Section 8 waitlists in Weld county and northeast counties are closed. All clients currently on TBRA are in medical care and stable in housing at this time.

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

| |
|--|
| As federal funds change their priorities, BCAP would benefit from on-going updates and training to help us optimize available funding in our area. |
|--|

| |
|---|
| CAP has been very helpful in working with our HOPWA Coordinator to address technical assistance needs. For queries beyond the capacity of CAP, it is beneficial to have a HUD trained advisor on board to address issues that arise. Additionally, consistent updates in changes in regulations regarding not only in HOPWA, but in public housing in general as well as links to other resources, would be useful. |
|---|

| |
|---|
| It would be beneficial to have scheduled housing meetings statewide to ensure compliance and standardization as well as to develop and implement a standardized current client handbook and policies/procedures manual. Recognition of the unique rural services areas within the state is an important part of delivering Case Management and housing assistance services. At times, it is very difficult for clients to obtain housing within the FMR guidelines. |
|---|

C. Barriers and Trends Overview

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

1. Describe any barriers (including regulatory and non-regulatory) encountered, actions taken in response to barriers, and recommendations for program improvement. Provide an explanation for each barrier selected.

| | | | |
|--|--|---|---|
| <input type="checkbox"/> HOPWA/HUD Regulations | <input type="checkbox"/> Planning | <input type="checkbox"/> Housing Availability | <input type="checkbox"/> Rent Determination and Fair Market Rents |
| <input checked="" type="checkbox"/> Discrimination/Confidentiality | <input checked="" type="checkbox"/> Multiple Diagnoses | <input type="checkbox"/> Eligibility | <input type="checkbox"/> Technical Assistance or Training |
| <input checked="" type="checkbox"/> Supportive Services | <input checked="" type="checkbox"/> Credit History | <input type="checkbox"/> Rental History | <input checked="" type="checkbox"/> Criminal Justice History |
| <input checked="" type="checkbox"/> Housing Affordability | <input type="checkbox"/> Other, please explain further | | |

Discrimination/Confidentiality – BCAP must maintain confidentiality regarding our residents’ HIV status in all interactions with landlords and potential landlords. Actions taken to respond to barrier: For this reason we use the name Boulder County Housing Network and Colorado Housing Assistance Made Possible when referring to HOPWA-funded housing. Area providers may recognize Boulder County AIDS Project but we do not want to disclose HIV status to those who do not want to disclose their HIV status to their housing and other providers. Program improvement: continued societal pressure to address the stigma which continues to surround individuals with HIV. BCAP works collaboratively with other social justice and community organizations that advocate for marginalized populations in our area. We provide pro bono legal support to individuals who experience discrimination in housing, employment, etc.

Supportive Services – BCAP provides a intensive level of support to HOPWA funded residents without receiving funding for all the services provided. Actions taken to respond to barrier: BCAP’s board has placed a priority to supporting those living with HIV. They continue to fundraise to ensure support services are available to HIV individuals at risk for homelessness. They fund the Eaton House group home 100% through their fundraising efforts. BCAP does not receive any funding for this program.

Housing Affordability – Housing costs remain high in Boulder County. A few landlords consistently offer lower rents to our clients. These units are in high demand and do not turn over very often. Actions taken in response to barriers: we work hard to maintain good relationships with landlords and to advocate to new landlords so they feel confident in housing our clients.

Multiple Diagnoses – 25% of those we serve who are living with HIV are also living with co-morbid conditions such as mental illness or substance abuse. In addition many are under-housed, under-employed, undocumented and living in poverty. Actions taken in response to barriers: BCAP works collaboratively with other social justice and community organizations that advocate for marginalized populations in our area. We provide pro bono legal support to individuals who experience discrimination in housing, employment, etc.

Credit History – 75% of our clients are living at or below 200% of federal poverty level. 50% of our clients are living at or below 100% of federal poverty level. With this income many of our clients lack a positive credit history. Many of our clients are currently working hard to secure employment but have not been successful in this economic environment. Actions taken in response to barriers; BCAP works closely with Work Force Boulder County and the YWCA Career Center to provide training and support to clients who are seeking increased employment opportunities. We also provide benefits navigation for individuals deemed disabled by medical providers.

Criminal Justice History – Our case managers work with clients as they are released from jail and prison to ensure they have a place to live. BCAP works collaboratively with other social justice and community organizations that advocate for marginalized populations in our area. We provide pro bono legal support to individuals who experience discrimination in housing, employment, etc.

NCAP

| | | | |
|---|--|--|--|
| <input type="checkbox"/> HOPWA/HUD Regulations | <input type="checkbox"/> Planning | <input checked="" type="checkbox"/> Housing Availability | <input checked="" type="checkbox"/> Rent Determination and Fair Market Rents |
| <input type="checkbox"/> Discrimination/Confidentiality | <input type="checkbox"/> Multiple Diagnoses | <input type="checkbox"/> Eligibility | <input type="checkbox"/> Technical Assistance or Training |
| <input type="checkbox"/> Supportive Services | <input type="checkbox"/> Credit History | <input type="checkbox"/> Rental History | <input type="checkbox"/> Criminal Justice History |
| <input checked="" type="checkbox"/> Housing Affordability | <input type="checkbox"/> Other, please explain further | | |

SCAP

| | | | |
|---|--|--|--|
| <input type="checkbox"/> HOPWA/HUD Regulations | <input type="checkbox"/> Planning | <input type="checkbox"/> Housing Availability | <input type="checkbox"/> Rent Determination and Fair Market Rents |
| <input type="checkbox"/> Discrimination/Confidentiality | <input checked="" type="checkbox"/> Multiple Diagnoses | <input type="checkbox"/> Eligibility | <input checked="" type="checkbox"/> Technical Assistance or Training |
| <input checked="" type="checkbox"/> Supportive Services | <input checked="" type="checkbox"/> Credit History | <input checked="" type="checkbox"/> Rental History | <input checked="" type="checkbox"/> Criminal Justice History |
| <input type="checkbox"/> Housing Affordability | <input type="checkbox"/> Other, please explain further | | |

WCAP

| | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> HOPWA/HUD Regulations | <input type="checkbox"/> Planning | <input checked="" type="checkbox"/> Housing Availability | <input checked="" type="checkbox"/> Rent Determination and Fair Market Rents |
| <input checked="" type="checkbox"/> Discrimination/Confidentiality | <input type="checkbox"/> Multiple Diagnoses | <input type="checkbox"/> Eligibility | <input type="checkbox"/> Technical Assistance or Training |
| <input type="checkbox"/> Supportive Services | <input checked="" type="checkbox"/> Credit History | <input checked="" type="checkbox"/> Rental History | <input checked="" type="checkbox"/> Criminal Justice History |
| <input checked="" type="checkbox"/> Housing Affordability | <input type="checkbox"/> Other, please explain further | | |

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

BCAP is the only community-based organization in our service area that provides HIV specific education and services. With the advent of Medicaid it is unclear how these types of services will be funded, if at all. BCAP continues to hold conversations with local government, health care providers, etc. to create a safety net for persons living with HIV as health care reform is implemented in the state of Colorado.

Trends in the community that affect our participants are much like those around the country. We have seen increased unemployment and cost of living. Today's economic and housing crises are placing more families and individuals in our service area at extreme risk of sliding into poverty or into deeper levels of poverty, marginalization and potential homelessness. Demand for housing assistance programs has escalated, while funding for human service programs in general has decreased. A continued record rate of foreclosures in our service area has put pressure on rental rates as former homeowners enter this market. In our city, we have also seen a reduction in mass transit availability. Reduction in public transit straps the ability of our low-income clients to seek and maintain work and uphold medical adherence. Our referral efforts to tap resources from other community service and housing programs led to creating a general resource guide so clients can access a broader continuum of care beyond TBRA.

Undocumented individuals often have a very difficult time obtaining affordable housing. It has been necessary to seek out financial assistance, other than HOPWA, to assist with the housing needs of undocumented and HIV-positive individuals/families. In WestCAP's territory, housing availability and affordability has always presented challenges. Within most of the 22-county region, the Fair Market Rent is not adequate. Housing costs often exceed the FMR and thus clients are not eligible for HOPWA assistance. Some clients have criminal histories and/or poor credit and may be turned down for housing as well as have more difficulty in finding adequate employment.

Affordable housing and housing availability is extremely limited in our eight county northern Colorado service area. Housing in northeastern Colorado is extremely limited. A client recently housed in Fort Morgan was given a fair market rent exception for housing due to lack of housing resources in the city and surrounding areas. Clients that received Section 8 vouchers and transitioned off of TBRA maintained their residences due to lack of available and affordable housing in Fort Collins. Housing and case management staff have spent significant time and effort in investigating possible housing opportunities and other housing resources in the service area with little to no success.

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

The S-CAP Coordinator provides monthly reports of enrollments and expenditures to the Executive Director, who passes this information onto the Board of Directors. The HOPWA Coordinator and S-CAPs Executive Director are available for public queries regarding HOPWA and all other agency programs. S-CAP undergoes a full financial audit and submits an IRS 990 form, which are made available to the public. Additionally, through community outreach forums such as Homeward Pikes Peak and other venues, S-CAP informs interested members of the public about our services, HOPWA included.

D. Unmet Housing Needs: An Assessment of Unmet Housing Needs

In Chart 1, provide an assessment of the number of HOPWA-eligible households that require housing assistance but are not currently served by HOPWA in this service area.

In Line 1, report the total unmet need of the geographical service area, as reported in *Unmet Needs for Persons with HIV/AIDS*, Table 1B of the Consolidated or Annual Plan(s), or as reported under HOPWA worksheet in the Needs Workbook of the Consolidated Planning Management Process (CPMP) tool. *Note: Report most current data available, through Consolidated or Annual Plan(s), and account for local housing issues, or changes in HIV/AIDS cases, by using combination of one or more of the sources in Chart 2.*

In Rows a through c, enter the number of HOPWA-eligible households by type of housing assistance whose housing needs are not met. For an approximate breakdown of overall unmet need by type of housing assistance refer to the Consolidated or Annual Plan (s), CPMP tool or local distribution of funds.

1. Assessment of Unmet Need for HOPWA-eligible Households

| | |
|--|-------|
| 1. Total number of households that have unmet housing needs | = 233 |
| From Item 1, identify the number of households with unmet housing needs by type of housing assistance | |
| a. Tenant-Based Rental Assistance (TBRA) | = 81 |
| b. Short-Term Rent, Mortgage and Utility payments (STRMU) | = 22 |
| c. Housing Facilities, such as community residences, SRO dwellings, other housing facilities | = 0 |

2. Recommended Data Sources for Assessing Unmet Need (check all sources used)

| | |
|-------------------------------------|---|
| <input type="checkbox"/> | = Data as reported in the area Consolidated Plan, e.g. Table 1B, CPMP charts, and related narratives |
| <input type="checkbox"/> | = Data established by area HIV/AIDS housing planning and coordination efforts, e.g. Continuum of Care |
| <input type="checkbox"/> | = Data from client information provided in Homeless Management Information Systems (HMIS) |
| <input checked="" type="checkbox"/> | = Data from project sponsors or housing providers, including waiting lists for assistance or other assessments on need |
| <input type="checkbox"/> | = Data from prisons or jails on persons being discharged with HIV/AIDS, if mandatory testing is conducted |
| <input type="checkbox"/> | = Data from local Ryan White Planning Councils or reported in CARE Act Data Reports, e.g. number of clients with permanent housing |
| <input type="checkbox"/> | = Data collected for HIV/AIDS surveillance reporting or other health assessments, e.g. local health department or CDC surveillance data |

End of PART 1

PART 2: Sources of Leveraging

Report the source(s) of cash or in-kind leveraged federal, state, local or private resources identified in the Consolidated or Annual Plan and used in the delivery of the HOPWA program and the amount of leveraged dollars.

| [1] Sources of Leveraging | | Total Amount of Leveraged Dollars (for this operating year) | |
|---------------------------|--|---|--|
| | | [2] Housing Assistance | [3] Supportive Services and other non-direct housing costs |
| 1. | Program Income | 342,730 | 33,331 |
| 2. | Federal government (please specify): | 0 | 0 |
| | Ryan White | 279,610 | 563,319 |
| | University Hospital | 0 | 2,094 |
| 3. | State government (please specify) | 0 | 0 |
| | Colorado HIV/AIDS Prevention Program: Atlas | 50,246 | 0 |
| | Colorado HIV/AIDS Prevention Program: HEP C | 18,000 | 0 |
| | Colorado HIV/AIDS Prevention Program:: MPACT | 0 | 72,699 |
| 4. | Local government (please specify) | 0 | 0 |
| | Boulder County | 61,800 | 0 |
| | City of Boulder | 35,000 | 0 |
| | City of Longmont | 10,000 | 0 |
| | City of Colorado Springs | 1,485 | 0 |
| | City of Fort Collins | 2,750 | 0 |
| | City of Loveland | 1,000 | 0 |
| 5. | Foundations and other private cash resources (please specify) | 0 | 0 |
| | Corporate | 80,000 | 0 |
| | Foundations | 100,000 | 0 |
| | Gill Foundation | 0 | 50,000 |
| | Pikes Peak United Way | 0 | 13,700 |
| | Hylton House | 11,262 | 12,738 |
| | Packard | 0 | 20,000 |
| | Macys | 0 | 3,000 |
| | Castaways Foundation | 0 | 2,000 |
| | Edmondson Foundation | 0 | 1,000 |
| | Kaiser Permanente | 0 | 5,000 |
| | USAA | 0 | 1,000 |
| | Inasmuch Foundation | 1,628 | 8,372 |
| | United Way | 0 | 6,690 |
| 6. | In-kind Resources | 250,000 | 6,417 |
| 7. | Resident rent payments in Rental, Facilities, and Leased Units | 5,000 | 0 |
| 8. | Grantee/project sponsor (Agency) cash | 0 | 0 |
| 9. | TOTAL (Sum of 1-7) | 1,250,511,250,511 | 801,360 |

End of PART 2

PART 3: Accomplishment Data - Planned Goal and Actual Outputs

In Chart 1, enter performance information (goals and actual outputs) for all activities undertaken during the operating year supported with HOPWA funds. Performance is measured by the number of households and units of housing that were supported with HOPWA or other federal, state, local, or private funds for the purposes of providing housing assistance and support to persons living with HIV/AIDS and their families. *Note: The total households assisted with HOPWA funds and reported in PART 3 of the CAPER should be the same as reported in the annual year-end IDIS data, and goals reported should be consistent with the Annual Plan information. Any discrepancies or deviations should be explained in the narrative section of PART 1.*

1. HOPWA Performance Planned Goal and Actual Outputs

| HOPWA Performance Planned Goal and Actual | | Output Households | | | | Funding | |
|---|---|--------------------------|--------|-----------|--------|--------------|--------------|
| | | HOPWA Assistance | | Non-HOPWA | | e. | f. |
| | | a. | b. | c. | d. | | |
| | | Goal | Actual | Goal | Actual | HOPWA Budget | HOPWA Actual |
| Housing Subsidy Assistance | | Output Households | | | | | |
| 1. | Tenant-Based Rental Assistance | 103 | 103 | 0 | 0 | 462828 | \$409,553 |
| 2a. | Households in permanent housing facilities that receive operating subsidies/leased units | 0 | 0 | 0 | 0 | 0 | 0 |
| 2b. | Households in transitional/short-term housing facilities that receive operating subsidies/leased units | 0 | 0 | 1 | 1 | 0 | 0 |
| 3a. | Households in permanent housing facilities developed with capital funds and placed in service during the program year | 0 | 0 | 0 | 0 | 0 | 0 |
| 3b. | Households in transitional/short-term housing facilities developed with capital funds and placed in service during the program year | 0 | 0 | 0 | 0 | 0 | 0 |
| 4. | Short-Term Rent, Mortgage and Utility Assistance | 10 | 6 | 0 | 0 | \$15748 | \$6380 |
| 5. | Adjustments for duplication (subtract) - <i>No clients received both STRMU & TBRA</i> | 0 | 0 | 0 | 0 | | |
| 6. | Total Housing Subsidy Assistance | 113 | 109 | 1 | 1 | 478576 | \$415,933 |
| Housing Development (Construction and Stewardship of facility based housing) | | Output Units | | | | | |
| 7. | Facility-based units being developed with capital funding but not opened (show units of housing planned) | 0 | 0 | 0 | 0 | 0 | 0 |
| 8. | Stewardship Units subject to 3 or 10 year use agreements | 0 | 0 | 0 | 0 | | |
| 9. | Total Housing Developed | 0 | 0 | 0 | 0 | 0 | 0 |
| Supportive Services | | Output Households | | | | | |
| 10a. | Supportive Services provided by project sponsors also delivering HOPWA housing assistance | 103 | 112 | | | 61988 | \$45,488 |
| 10b. | Supportive Services provided by project sponsors serving households who have other housing arrangements | 200 | 218 | | | 0 | 0 |
| 11. | Adjustment for duplication (subtract) - <i>No clients received supportive services who had both HOPWA and Non-HOPWA housing</i> | 0 | 0 | | | | |
| 12. | Total Supportive Services | 303 | 330 | | | 61988 | 45488 |
| Housing Placement Assistance Activities | | | | | | | |
| 13. | Housing Information Services | | | | | 61988 | \$45,488 |
| 14. | Permanent Housing Placement Services | 4 | 4 | | | \$70 | \$70 |
| 15. | Adjustment for duplication | | | | | | |
| 16. | Total Housing Placement Assistance | 4 | 4 | | | \$70 | \$70 |
| Grant Administration and Other Activities | | | | | | | |
| 17. | Resource Identification to establish, coordinate and develop housing assistance resources | | | | | | |
| 18. | Technical Assistance (if approved in grant agreement) | | | | | | |
| 19. | Grantee Administration (maximum 3% of total HOPWA grant) | | | | | | |
| 20. | Project Sponsor Administration (maximum 7% of portion of HOPWA grant awarded) | | | | | 32932 | \$32,932 |
| Total Expenditures for program year (Sum of rows 6, 9, 12, 16, and 20) | | | | | | 574366 | \$491,173 |

2. Listing of Supportive Services

Report on the use of HOPWA funds for all supportive services. In Rows 1 through 16, provide the (unduplicated) total of all households and expenditures for each type of supportive service for all project sponsors.

| Supportive Services | | Number of <u>Households</u> Receiving HOPWA Assistance | Amount of HOPWA Funds Expended |
|---------------------|---|--|--------------------------------|
| 1. | Adult day care and personal assistance | | |
| 2. | Alcohol and drug abuse services | | |
| 3. | Case management/client advocacy/ access to benefits & services | 112 | \$45,488.00 |
| 4. | Child care and other child services | | |
| 5. | Education | | |
| 6. | Employment assistance and training | | |
| 7. | Health/medical/intensive care services, if approved Note: Client records must conform with 24 CFR §574.310 | | |
| 8. | Legal services | | |
| 9. | Life skills management (outside of case management) | | |
| 10. | Meals/nutritional services | | |
| 11. | Mental health services | | |
| 12. | Outreach | | |
| 13. | Transportation | | |
| 14. | Other Activity (if approved in grant agreement). Specify: | | |
| 15. | Adjustment for Duplication (subtract) | | |
| 16. | TOTAL Households receiving Supportive Services (unduplicated) | 112 | \$45,488.00 |

End of PART 3

Part 4: Summary of Performance Outcomes

HOPWA Long-term Performance Objective: *Eighty percent of HOPWA clients will maintain housing stability, avoid homelessness, and access care each year through 2011.*

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

In Column 1, report the total number of eligible households that received HOPWA housing assistance, by type. In Column 2, enter the number of households continuing to access each type of housing assistance, the following year. In Column 3, report the housing status of all households that exited the program. Columns 2 (Number of Households Continuing) and 3 (Exited Households) summed will equal the total households reported in Column 1. *Note: Refer to the housing stability codes that appear in Part 5: Worksheet - Determining Housing Stability Outcomes.*

| [A] Permanent Housing Assistance | [1] Total Number of Households Receiving Housing Assistance | [2] Assessment: Number of Households Continuing with this Housing (per plan or expectation for next year) | | [3] Assessment: Number of Exited Households and Housing Status | |
|---|---|---|-----|--|------|
| Tenant-Based Rental Assistance | = 103 | = 66 | | 1 Emergency Shelter/Streets | = 1 |
| | | | | 2 Temporary Housing | = |
| | | | | 3 Private Housing | = 36 |
| | | | | 4 Other HOPWA | = |
| | | | | 5 Other Subsidy | = |
| | | | | 6 Institution | = |
| | | | | 7 Jail/Prison | = |
| | | | | 8 Disconnected/Unknown | = |
| | | | | 9 Death | = |
| Permanent Supportive Housing Facilities/Units | = 0 | 0 | | 1 Emergency Shelter/Streets | = |
| | | | | 2 Temporary Housing | = |
| | | | | 3 Private Housing | = |
| | | | | 4 Other HOPWA | = |
| | | | | 5 Other Subsidy | = |
| | | | | 6 Institution | = |
| | | | | 7 Jail/Prison | = |
| | | | | 8 Disconnected/Unknown | = |
| | | | | 9 Death | = |
| [B] Transitional Housing Assistance | [1] Total Number of Households Receiving Housing Assistance | [2] Of the Total Number of Households Receiving Housing Assistance this Operating Year | | [3] Assessment: Number of Exited Households and Housing Status | |
| Transitional/Short-Term Supportive Facilities/Units | = 0 | Total number of households that will continue in residences: | = 0 | 1 Emergency Shelter/Streets | = |
| | | 2 Temporary Housing | | = | |
| | | 3 Private Housing | | = | |
| | | 4 Other HOPWA | | = | |
| | | Total number of households whose tenure exceeded 24 months: | = 0 | 5 Other Subsidy | = |
| | | 6 Institution | | = | |
| | | 7 Jail/Prison | | = | |
| | | 8 Disconnected/unknown | | = | |
| | | 9 Death | | = | |

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

Report the total number of households that received STRMU assistance in Column 1. In Column 2, identify the result of the housing assessment made at time of assistance, or updated in the operating year. (Column 3 provides a description of housing outcomes; therefore, data is not required.) In Row 1a, enter the total number of households served in the prior operating year that received STRMU assistance this year. In Row 1b, enter the total number of households that received STRMU Assistance in the 2 prior operating years that received STRMU assistance this year. *Note: The sum of Column 2 should equal the number of households reported in Column 1.*

Assessment of Households receiving STRMU Assistance

| [1] STRMU Housing Assistance | [2] Assessment of Housing Status | | [3] HOPWA Client Outcomes |
|--|---|-----|--|
| | Maintain Private Housing without subsidy (e.g. Assistance provided/completed and client is stable, not likely to seek additional support) | = 5 | <i>Stable/Permanent Housing (PH)</i> |
| | Other Private Housing without subsidy | = 0 | |
| | Other HOPWA support (PH) | = 0 | |
| | Other housing subsidy (PH) | = 0 | |
| | Institution (e.g. residential and long-term care) | = 0 | |
| = 5 | Likely to maintain current housing arrangements, with additional STRMU assistance | = 0 | <i>Temporarily Stable, with Reduced Risk of Homelessness</i> |
| | Transitional Facilities/Short-term (e.g. temporary or transitional arrangement) | = 0 | |
| | Temporary/non-permanent Housing arrangement (e.g. gave up lease, and moved in with family or friends but expects to live there less than 90 days) | = 0 | |
| | Emergency Shelter/street | = 0 | <i>Unstable Arrangements</i> |
| | Jail/Prison | = 0 | |
| | Disconnected | = | |
| | Death | = 0 | <i>Life Event</i> |
| 1a. Total number of households that received STRMU assistance in the prior operating year, that also received STRMU assistance in the current operating year. | | | = 0 |
| 1b. Total number of those households that received STRMU assistance in the two (2 years ago) prior operating years, that also received STRMU assistance in the current operating year. | | | = 0 |

Section 3. HOPWA Outcomes on Access to Care and Support

1A. Status of Households Accessing Care and Support by Project Sponsors delivering HOPWA Housing Assistance/Housing Placement/Case Management

Use Table 1 A for project sponsors that provide HOPWA housing assistance/housing placement with or without case management services. In Table 1A, identify the number of client households receiving any type of HOPWA housing assistance that demonstrated improved access or maintained connections to care and support within the program year by: having a housing plan; having contact with a case manager/benefits counselor; visiting a primary health care provider; accessing medical insurance/assistance; and accessing or qualifying for income benefits. *Note: For information on types and sources of income and medical insurance/assistance, refer to Charts 1C and 1D.*

| Categories of Services Accessed | Households Receiving Housing Assistance within the Operating Year | Outcome Indicator |
|--|---|-----------------------------------|
| 1. Has a housing plan for maintaining or establishing stable on-going housing. | 112 | <i>Support for Stable Housing</i> |
| 2. Has contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan.. | 112 | <i>Access to Support</i> |
| 3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan, | 112 | <i>Access to Health Care</i> |
| 4. Has accessed and can maintain medical insurance/assistance. | 112 | <i>Access to Health Care</i> |
| 5. Successfully accessed or maintained qualification for sources of income. | 112 | <i>Sources of Income</i> |

1B. Number of Households Obtaining Employment

In Table 1B, identify the number of recipient households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA funded: job training, employment assistance, education or related case management/counseling services. *Note: This includes jobs created by this project sponsor or obtained outside this agency.*

| Categories of Services Accessed | Number of Households that Obtained Employment | Outcome Indicator |
|--|---|--------------------------|
| Total number of households that obtained an income-producing job | 8 | <i>Sources of Income</i> |

Chart 1C: Sources of income include, but are not limited to the following (Reference only)

| | |
|--|--|
| <ul style="list-style-type: none"> • Earned Income • Unemployment Insurance • Supplemental Security Income (SSI) • Social Security Disability Income (SSDI) • Veteran's Disability Payment • General Assistance, or use local program name • Temporary Assistance for Needy Families (TANF) income, or use local program name | <ul style="list-style-type: none"> • Veteran's Pension • Pension from Former Job • Child Support • Alimony or Other Spousal Support • Retirement Income from Social Security • Private Disability Insurance • Worker's Compensation |
|--|--|

Chart 1D: Sources of medical insurance and assistance include, but are not limited to the following (Reference only)

| | |
|---|---|
| <ul style="list-style-type: none"> • MEDICAID Health Insurance Program, or local program name • Veterans Affairs Medical Services • State Children's Health Insurance Program (SCHIP), or local program name | <ul style="list-style-type: none"> • MEDICARE Health Insurance Program, or local program name • AIDS Drug Assistance Program (ADAP) • Ryan White-funded Medical or Dental Assistance |
|---|---|

2A. Status of Households Accessing Care and Support through HOPWA-funded Services receiving Housing Assistance from Other Sources

In Table 2A, identify the number of client households served by project sponsors receiving HOPWA-funded housing placement or case management services who have other and housing arrangements that demonstrated improved access or maintained connections to care and support within the program year by: having a housing plan; having contact with a case manager/benefits counselor; visiting a primary health care provider; accessing medical insurance/assistance; and accessing or qualifying for income benefits. *Note: For information on types and sources of income and medical insurance/assistance, refer to Charts 2C and 2D.*

| Categories of Services Accessed | Households Receiving HOPWA Assistance within the Operating Year | Outcome Indicator |
|--|---|-----------------------------------|
| 1. Has a housing plan for maintaining or establishing stable on-going housing. | 86 | <i>Support for Stable Housing</i> |
| 2. Successfully accessed or maintained qualification for sources of income. | 86 | <i>Sources of Income</i> |
| 3. Had contact with a primary health care provider consistent with the schedule specified in clients individual service plan. | 86 | <i>Access to Health Care</i> |
| 4. Has accessed and can maintain medical insurance/assistance. | 86 | <i>Access to Health Care</i> |
| 5. Has contact with case manager, benefits counselor, or housing counselor consistent with the schedule specified in client’s individual service plan. | 86 | <i>Access to Support</i> |

2B. Number of Households Obtaining Employment

In Table 2B, identify the number of recipient households that include persons who obtained an income-producing job during the operating year that resulted from HOPWA funded: job training, employment assistance, education or related case management/counseling services. *Note: This includes jobs created by this project sponsor or obtained outside this agency.*

| Categories of Services Accessed | Number of Households that Obtained Employment | Outcome Indicator |
|--|---|--------------------------|
| Total number of households that obtained an income-producing job | 5 | <i>Sources of Income</i> |

Chart 2C: Sources of income include, but are not limited to the following (Reference only)

| | |
|--|--|
| <ul style="list-style-type: none"> • Earned Income • Unemployment Insurance • Supplemental Security Income (SSI) • Social Security Disability Income (SSDI) • Veteran’s Disability Payment • General Assistance, or use local program name • Temporary Assistance for Needy Families (TANF) income, or use local program name | <ul style="list-style-type: none"> • Veteran’s Pension • Pension from Former Job • Child Support • Alimony or Other Spousal Support • Retirement Income from Social Security • Private Disability Insurance • Worker’s Compensation |
|--|--|

Chart 2D: Sources of medical insurance and assistance include, but are not limited to the following (Reference only)

| | |
|---|---|
| <ul style="list-style-type: none"> • MEDICAID Health Insurance Program, or local program name • Veterans Affairs Medical Services • State Children’s Health Insurance Program (SCHIP), or local program name | <ul style="list-style-type: none"> • MEDICARE Health Insurance Program, or local program name • AIDS Drug Assistance Program (ADAP) • Ryan White-funded Medical or Dental Assistance |
|---|---|

End of PART 4

PART 5: Worksheet - Determining Housing Stability Outcomes

1. This chart is designed to assess program results based on the information reported in Part 4.

| Permanent Housing Assistance | Stable Housing (# of households remaining in program plus 3+4+5+6=#) | Temporary Housing (2) | Unstable Arrangements (1+7+8=#) | Life Event (9) |
|---|--|--|---|--------------------------|
| Tenant-Based Rental Assistance (TBRA) | 103 | 0 | 0 | 0 |
| Permanent Facility-based Housing Assistance/Units | 0 | 0 | 0 | 0 |
| Transitional/Short-Term Facility-based Housing Assistance/Units | 0 | 0 | 0 | 0 |
| Total Permanent HOPWA Housing Assistance | 103 | 0 | 0 | 0 |
| Reduced Risk of Homelessness: Short-Term Assistance | Stable/Permanent Housing | Temporarily Stable, with Reduced Risk of Homelessness | Unstable Arrangements | Life Events |
| Short-Term Rent, Mortgage, and Utility Assistance (STRMU) | 5 | 0 | 0 | 0 |
| Total HOPWA Housing Assistance | 5 | 0 | 0 | 0 |

Background on HOPWA Housing Stability Codes

Stable Permanent Housing/Ongoing Participation

3 = Private Housing in the private rental or home ownership market (without known subsidy, including permanent placement with families or other self sufficient arrangements) with reasonable expectation that additional support is not needed.

4 = Other HOPWA-funded housing assistance (not STRMU), e.g. TBRA or Facility-Based Assistance.

5 = Other subsidized house or apartment (non-HOPWA sources, e.g., Section 8, HOME, public housing).

6 = Institutional setting with greater support and continued residence expected (e.g., residential or long-term care facility).

Temporary Housing

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

Unstable Arrangements

1 = Emergency shelter or no housing destination such as places not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station, or anywhere outside).

7 = Jail /prison.

8 = Disconnected or disappeared from project support, unknown destination or no assessments of housing needs were undertaken.

Life Event

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

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

Permanent Facility-Based Housing Assistance: Stable Housing is the sum of the number of households that (i) remain in the housing and (ii) those that left the assistance as shown as items: 3, 4, 5, and 6. Temporary Housing is the number of households

that accessed assistance, and left their current housing for a non-permanent housing arrangement, as reported under item 2. Unstable Situations is the sum of numbers reported under items: 1, 7, and 8.

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

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

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

End of PART 5

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

Grantees that use HOPWA funding for new construction, acquisition, or substantial rehabilitation are required to operate their facilities for HOPWA eligible individuals for at least ten years. If non-substantial rehabilitation funds were used they are required to operate for at least three years. Stewardship begins once the facility is put into operation. This Annual Certification of Continued HOPWA Project Operations is to be used in place of other sections of the APR, in the case that no additional HOPWA funds were expended in this operating year at this facility that had been acquired, rehabilitated or constructed and developed in part with HOPWA funds.

1. General information

| | |
|---------------------|---|
| HUD Grant Number(s) | Operating Year for this report <i>From (mm/dd/yy) To (mm/dd/yy)</i> <input type="checkbox"/> Final Yr <input type="checkbox"/> Yr 1; <input type="checkbox"/> Yr 2; <input type="checkbox"/> Yr 3; <input type="checkbox"/> Yr 4; <input type="checkbox"/> Yr 5; <input type="checkbox"/> Yr 6; <input type="checkbox"/> Yr 7; <input type="checkbox"/> Yr 8; <input type="checkbox"/> Yr 9; <input type="checkbox"/> Yr 10; |
| Grantee Name | Date Facility Began Operations (<i>mm/dd/yy</i>) |

2. Number of Units and Leveraging

| Housing Assistance | Number of Units Receiving Housing Assistance with HOPWA funds | Amount of Leveraging from Other Sources Used during the Operating Year |
|---|---|--|
| Stewardship units (developed with HOPWA funds but no current operations or other HOPWA costs) subject to 3 or 10 year use periods | | |

3. Details of Project Site

| | |
|---|--|
| Name of HOPWA-funded project site | |
| Project Zip Code(s) and Congressional District(s) | |
| Is the address of the project site confidential? | <input type="checkbox"/> <i>Yes, protect information; do not list.</i> <input type="checkbox"/> <i>Not confidential; information can be made available to the public.</i> |
| If the site address is not confidential, please provide the contact name, phone, email, and physical address, if different from business address. | |

I certify that the facility that received assistance for acquisition, rehabilitation, or new construction from the Housing Opportunities for Persons with AIDS Program has operated as a facility to assist HOPWA-eligible persons from the date shown above. I also certify that the grant is still serving the planned number of HOPWA-eligible households at this facility through leveraged resources and all other requirements of the grant agreement are being satisfied.

| | |
|--|--|
| <i>I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.</i> | |
| Name & Title of Authorized Official | Signature & Date (mm/dd/yy) |
| Name & Title of Contact at Grantee Agency <i>(person who can answer questions about the report and program)</i> | Contact Phone (with area code) |

End of PART 6