



e-snaps
CoC APR Guidebook
For CoC Grant Funded Programs

Supportive Housing Programs
Shelter Plus Care Programs
SRO for the Homeless Programs
Continuum of Care Programs

March, 2015
Version 8

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Guidebook changes

APR Guidebooks are updated as enhancements are made to **e-snaps** or clarification is needed on particular APR questions. Always consult the appropriate APR Guidebook for your project prior to beginning the submission process in **e-snaps**.

| Date | Change |
|----------------|---|
| March, 2015 | Q25 corrected to allow income to be reported under head of household. |
| November, 2014 | The APR was updated to reflect the 2014 HMIS Data Standard changes. Q4 includes fields to determine if the grant funds services that are provided to a CoC Program funded housing grant(s). Financial Forms for CoC Programs have been changed. |
| April, 2014 | The APR was updated to meet the needs of the Continuum of Care Program reporting. APRs for Supportive Housing Program, Shelter Plus Care, and Single Room occupancy Program grants, funded prior to the FY2012 CoC Competition, access the APR using the old form and CoC Program grants, funded or renewed in the FY2012 CoC Competition or subsequent CoC Competitions access the APR in a new way. |
| October, 2013 | New income questions were added to the APR and guidebook was updated to reflect those changes. Also, error in guidebook related to error logic for Q29 was removed. |
| June, 2012 | E-snaps updated method to set up an APR and guidebook was updated to reflect those changes. |
| May, 2012 | Correction made on income measures Q36b and Q36d and guidebook was updated to reflect those changes. |
| November, 2011 | A clarification was made in the diagram on the APR split for VAWA providers. Performance Measurement screens were to be added in March, 2012 and the guidebook was updated to reflect this. Also, the CoC APR Template was updated to include the Performance Measurement questions. |
| June, 2011 | Guidance was provided for e-snaps changes that were implemented to improve processing time. Guidance was provided on completing an "Applicant Profile". Guidance provided on Q3, Q5, Q23, Q24, and Q 31. |

Introduction

The Annual Performance Report (APR) is used by HUD to track the progress and accomplishments of projects funded by the Department. All CoC Program recipients must complete a CoC APR in **e-snaps**. Recipients have 90 days from the end of their operating year to submit their APR to HUD through **e-snaps**.

This Guidebook provides information for recipients of CoC Program and HUD legacy programs (Supportive Housing Program, Shelter Plus Care Program and SRO for the Homeless program) grants to submit their Annual Performance Report (APR) in **e-snaps** to the U.S. Department of Housing and Urban Development. A separate guidebook is available for CoC Program dedicated HMIS Projects at [HUD Exchange](#).

You should refer to this guidebook after your data are extracted from HMIS or a comparable database¹ and you are ready to enter data into **e-snaps**. APRs are to be generated from the data collected in your HMIS. For monitoring purposes, the information you report in your APR must match the data saved within your HMIS. HMIS vendors have been provided information on how to program the APR. Some vendors may elect to program the APR directly into their software system, while others may elect to support the HUD HMIS-CSV export schema and the HUD-approved APR Generation Tool to generate the APR. HMIS System Administrators should be familiar with the reporting option(s) supported by their vendor and should be able to train recipients on how to produce the APR from the HMIS.

Special APR procedures have been established for recipients who either are VAWA providers² themselves or who have a VAWA provider as a sponsor or sub-recipient. Recipients are to submit their report data separately for clients served by VAWA providers. Specific instructions are found in this guidebook in the the [“Specific Guidance for VAWA Providers”](#) section.

Accessing HELP

Go to [HUD Exchange](#) to:

1. View or download the APR guidebook from the HUD Exchange each time you need to refer to it for direction. When necessary, HUD will update this guidebook to address a common issue, make clarifications and provide recipients additional guidance on a specific question.
Tip: The version number and date change each time a new guidebook is published.
2. Find basic information and training about **e-snaps**.

If you determine that the answer to your question has not been published in the guidebook or in the FAQs, or if you need clarification on something that has been published, submit a question to the [HUD](#)

¹ When the term “HMIS” is used throughout this guidebook, it is a general reference that could also refer to a “comparable database” for VAWA providers. Comparable database is used in the document to refer to instances when data must be generated from a comparable database rather than an HMIS.

² For purposes of this guidance, victim service providers will be referred to as VAWA providers, as defined in section 40002 of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (42 U.S.C. 13925).

[Exchange Ask A Question](#) (in step 2 select CoC – Continuum of Care Program as the issue the “question is related to”).

Understanding How Information Is Reported

The APR requires different information for different types of grants and components. To assist you in understanding which questions apply to each type of grant program, component and project type this guidebook will identify which non-HMIS project type is required to complete each question. The project types will be marked as:

- **Permanent Housing** – Permanent Housing includes all Permanent Supportive Housing (PSH) projects funded through the CoC Program or SHP; all Rapid Re-housing Projects funding through the CoC Program; all Shelter Plus Care PSH component types; and all SRO for the Homeless Programs.
- **Transitional Housing** – Transitional Housing includes all such projects funded through the CoC Program or SHP.
- **Supportive Services Only** – Supportive Services Only (SSO) include CoC Program and SHP projects funded to provide SSO’s with housing outcomes and SSO’s without housing outcomes.
- **Street Outreach** – Street Outreach is a specific type of an SSO funded project through either the CoC Program or SHP.
- **ALL** – ALL will be used when all project types are required to complete the question.

The APR collects information on the people served during your operating year and on the types of households those people were in when they were last served. Some common elements run through the APR questions and are important to understand to interpret the information reported on the APR.

Most persons served by the project during the reporting period probably only had one project stay, meaning one project entry and/or exit during the reporting period. If a person had more than one project stay during the reporting period, data reported in this APR about that person is based on the person’s most recent project stay (i.e., their last stay of the reporting period).

Many questions report results separately for people served in different household configurations: persons in households without children, persons in households with at least one adult and one child, persons in households with only children, and persons whose household type is unknown. Each person’s household type is determined based on the persons in their household during the reporting period, using the person’s most recent project stay if they had more than one stay during the reporting period. (See Q8 for more information.)

Other questions report results separately for adults and children. Adult and child status is reported based on the person’s age on the day the individual entered the project or on the first day of the reporting period, whichever is later. If the person’s date of birth is not recorded in the HMIS, the person is to be recorded in the age unknown column.

Finally, some questions report data separately for **leavers** and **stayers**. **Leavers** are persons who exited the project and are no longer enrolled in the project as of the last day of the reporting period. **Stayers** are persons who are still enrolled in the project as of the last day of the reporting period, even if the person exited and re-entered at some point during the reporting period.

Updates made to the APR to conform to the 2014 HMIS Data Standards

The HMIS Data Standards were updated in October, 2014 and released in the [HMIS Data Dictionary](#) and companion [HMIS Data Standards Manual](#). Along with those updates HUD provided HMIS vendors with updates to the [APR Programming Specifications](#). Changes that were made to the programming specifications included: updating for element name and number changes, mapping data from a new response category into the existing categories on the APR, and updating the specifications to accurately reflect the changes in the universe of clients which are being reported. The universe of clients effected Q7, Q12a and b, Q19 a and b, Q 20, Q22a2, Q22b2, Q25 (a1 through b2), and 26 (a1through b2).

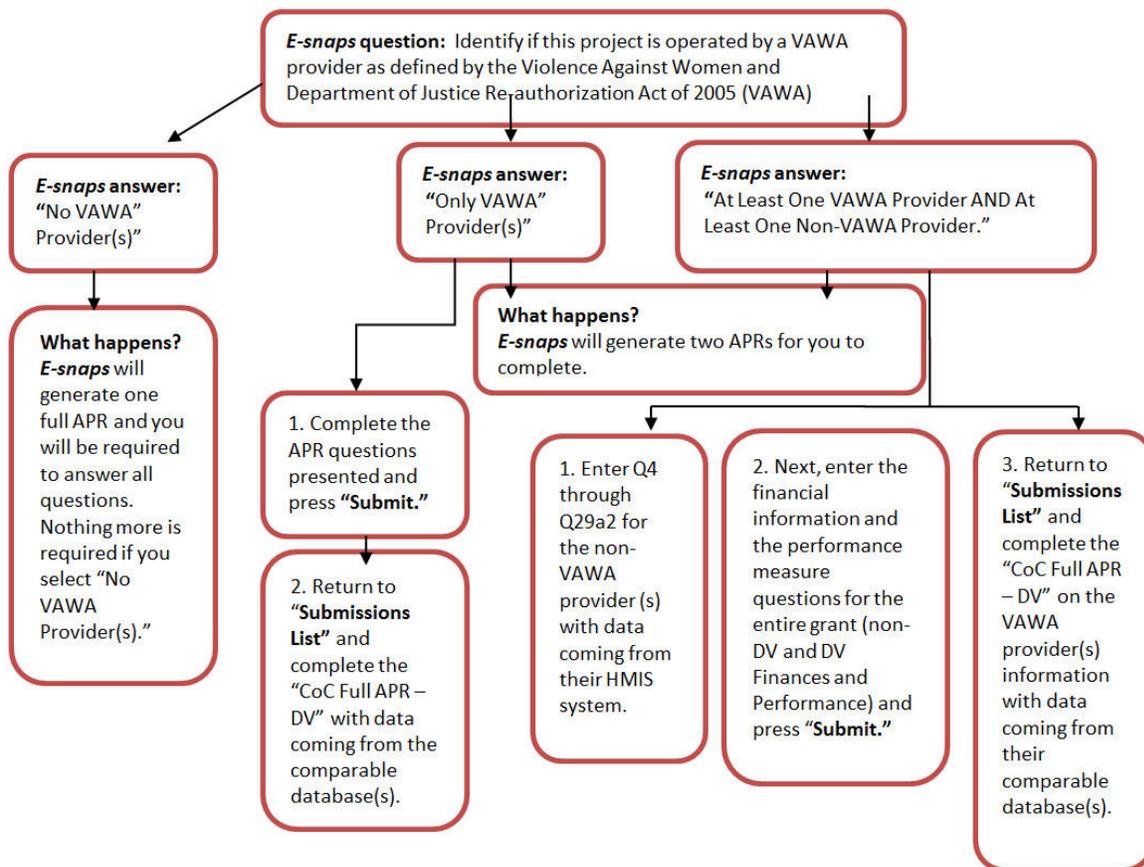
Though the HMIS Data Standards clarified when an Annual Assessment was to occur for clients who were in the program over a year, the APR Programming Specifications did not change the way “annual assessment” information was generated in order to enable end users to catch up with the new requirements without outcome implications. APR reporting will be updated in October, 2015 to account for the new definition of Annual Assessment and recipients should be collecting Annual Assessment information now in accordance with the following: “the annual assessment is to be recorded no more than 30 days before or after the anniversary of the client’s *Project Entry Date*, regardless of the date of the most recent ‘update’”. HUD anticipates further changes at the end of 2015 to fully implement changes that arise from the implementation of the 2014 HMIS Data Standards.

Specific Guidance for VAWA Providers

All recipients awarded Continuum of Care (CoC) Program funds must submit an Annual Performance Report (APR). Beginning with grants expiring July 1, 2010 or later, the APR must be submitted electronically by the recipient via *e-snaps*. However, when a VAWA provider is a project sponsor, producing a single APR with unduplicated data for the grant is problematic since the VAWA provider is prohibited from using the HMIS to collect and generate data for the APR. Therefore, effective February 1, 2011, each CoC grant with at least one VAWA provider project sponsor must submit an APR with two sections, one for the VAWA provider(s) and one for the others via *e-snaps* per the guidance below. Both APRs are due in *e-snaps* within 90 days of the end of the grant’s operating year.”

Procedure for the full CoC APR for VAWA recipients:

Thus, if your grant has at least one VAWA provider project sponsor and at least one non-VAWA provider project sponsor, the recipient must effectively submit two APRs. In practice, *e-snaps* will prompt the recipient to enter client information for the two APRs consecutively, starting with the questions for the non-VAWA provider project sponsor(s) and following with questions labeled “DV” for the VAWA provider project sponsor(s). The APR will be automatically configured for you based on the information you enter in Q3 about whether the project is operated by a VAWA provider.



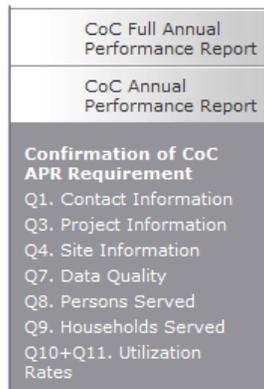
Recipient: The recipient generates an APR, using HMIS data, for all persons served directly by the recipient and any project sponsor that is not a VAWA provider for each grant. The APR data for persons served by the VAWA provider are entered separately. The financial information section of the APR must reflect all expenditures and information for the recipient and all project sponsors. This APR is entered into *e-snaps* using the grant number assigned by HUD in the executed grant agreement.

VAWA provider Project Sponsor: The VAWA provider generates an APR using the comparable database³ for all persons served by the VAWA provider for each grant. If a grant has more than one project sponsor that is a VAWA provider, the APR data must be aggregated into one VAWA provider APR, or “DV APR.” The DV APR is entered into *e-snaps* by the recipient.

Navigating the CoC APR in *e-snaps*

The APR has many forms that will need to be completed before submission. The forms are identified with a question number (e.g., Q1) and a question name. The questions are preselected for your specific grant component (HMIS) based on the information you complete in Q3.

³ A victim service provider’s comparable database must collect client-level data over time and generate unduplicated aggregate reports based on that data. It cannot be a database that only records aggregate information. The comparable database must be compliant with HMIS data standard fields in order to be able to generate the APR.



Moving between forms is easy. Simply click on the name of the form you want in the left-hand menu and **e-snaps** will link you to that form. The full list of APR questions you will need to complete for your particular grant type will not be visible until you have completed Q3 and saved the information.

Once you have entered data on a form, you must save your work. Buttons at the bottom of each page are designed to help you navigate the system and save your work. **Do not use your web browser's back button, except when you create a pdf report at the end of your APR.** Use of the web browser's back button will cause **e-snaps** to disable and incorrectly process the information you entered.



Save – saves the work you have done on that form, will not move you to a new form but will make visible any calculations that are done by **e-snaps** automatically (e.g. sum a column). If you leave a screen without saving the information, it will be lost.

Save & Back – saves the work you have done on that form and moves you back one form.

Save & Next – saves the work you have done on that form and moves you forward one form.

Back or Next – moves you backwards or forwards but does not save any of your work.

Check Spelling – will spell check the spelling of the entries made on that specific screen and will provide you with the opportunity to correct any mistakes. This will not, however, save your information.

- **e-snaps** will allow you to move between questions without answering the question. However, questions identified with an asterisk (*) are required to be completed prior to submission. If a question is not complete, then the Submission Summary, at the end, will indicate this with a “*please complete*” beside that question.
- For all questions that require a numeric answer, **e-snaps** will require you to enter “0” rather than leave cells blank. You will receive an error message reminding you to enter a “0” if you leave a cell blank.
- After entering information in a field, use the tab button on your keyboard to move between fields on the questions. Using the enter button will enable the calculations, but will not move your cursor to the next field.

- In order to make the forms in **e-snaps** as concise and user friendly as possible, some of the calculations have been hidden. All percentages are calculated behind the scenes. All questions with percentage calculations have: **Show/Hide Percentages**. Clicking the box will expand the question to show you the percentage calculations.
- **Tip:** if you leave the box checked, the percentages will show on the pdf export you create prior to submission.
- Most questions have an automatic validation check. If the system detects an error in your data, when you click “Save,” a message will appear in red font at the bottom of the screen, alerting you of the error. If you click “Save & Next,” you will not be alerted to any errors on the screen until the very last screen.

Log into e-snaps



E-snaps is to be used by authorized persons only. Go to the **e-snaps** welcome page at HUD.gov/esnaps. Enter your user name and the password. (If you applied for a grant through **e-snaps** your user name and password are the same as they were at grant application time.) Then select the **Login button**.



New users will need to **create a profile**. Once you have created a profile, another authorized **e-snaps** user associated with the applicant of the grant, can associate you with the applicant so you can access the APR and other documents associated with the applicant. If all previously authorized persons have left or if no one has access to **e-snaps**, you will need to create a profile and send a letter to HUD specifying the applicant with which you would like to be associated. For detailed support on adding a user, refer to the support information found at HUD Exchange [APR e-snaps Help: Instructions for Adding/Deleting Users](#).

Important note about new users: Setting up a new user cannot be completed quickly. Do not wait until the last minute to determine whether you have access to the APR and then to try to set it up.

If you cannot remember your password, you will need to submit a request for a password reset via the [HUD Exchange Ask A Question](#) (in step 2 select “*e-snaps*” under “reporting systems” as the issue the “question is related to”).

Steps Needed to Create the APR in *e-snaps* for CoC Projects

There are two different processes for accessing the APR in *e-snaps*, depending on the year the grant for which the APR is being submitted was funded.

- For APR’s for all CoC Program funds awarded in the FY2012 competition or later follow the instructions on this page.
- For APRs for all SHP, S+C, and SRO funded grants, funded before the FY2012 CoC Competition and not yet renewed under the CoC Program use the instructions in [Appendix 1](#)

For COC Project grants that were funded or renewed under the FY2012 CoC Competition or later.

1. To open an APR form in *e-snaps* go directly to the Submissions Tab.



2. If you have many projects on your screen, carefully select the Applicant Project Name – be sure that you are using the name you used in the Application for the project you are submitting an APR for.
3. Find the APR you are going to complete under the “Funding Opportunity Name – Step Name” column and click on the icon  in the same row as the APR. APRs for CoC Program funded projects which were awarded in FY2012 or later will have either a “New Project Application FY [year]” or a “Renewal Project Application FY [year]” with a “CoC Full APR FY [year]” as the Funding Opportunity – Step Name. For example, a recipient reporting an APR for a FY2012

Renewal Project Application FY2012
CoC Full APR FY2012 - General

renewal project will see:

Submissions Filters

Applicant Project Name:

Date Submitted: On

Project Status: Open Projects

Submission Version: Latest Version

Associate Type: All

Filter

| Project Name | | Funding Opportunity Name | Submissions | | | | |
|----------------|--------------|--------------------------|--------------|--------------|-------------------|---------|-------------------------|
| Project Number | Step Name | Step Name | Start Date | End Date | Associate Type | Version | Date Submitted |
| | Project Name | FIND YOUR APR HERE | Aug 30, 2011 | Oct 27, 2011 | Primary Applicant | 1 | Oct 20, 2011 6:25:34 PM |
| | | | Jul 19, 2010 | Jun 1, 2014 | Primary Applicant | 1 | Sep 12, 2013 5:42:18 PM |
| | | | Nov 22, 2013 | Feb 2, 2014 | Primary Applicant | 2 | Jan 21, 2014 4:12:09 PM |
| | | | Nov 9, 2012 | Sep 30, 2018 | Primary Applicant | 1 | |

Tips:

1. If you have followed these steps and are unable to locate your APR – check the fileters to ensure you have selected the correct applicant project name; the date submitted choice is “on”; the project status is “open projects” the submission version is “latest version” and the association type is “all.” Do not select any other filters.
2. If after following these steps you still do not see your APR, then this indicates there are steps still to be completed by your local HUD field office. Please contact your field office and ask them to complete all parts of your grant execution through the end of step C1.11. Next, the field office will have to open the Grant Agreement Amendment / APR Routing step and indicate that they want this project to go the APR. Once these steps are completed, you should be able to see the FY2012 APR that you created.

Confirmation of CoC APR Requirement

Confirmation of CoC APR Requirement

* Operating Year Start Date

* Operating Year End Date

To begin the APR process, you must enter your Operating Year Start and End Date on the Confirmation of CoC APR Requirement screen.

The operating year start and end dates entered into the APR must correspond with the operating start and end dates entered into LOCCS. Only grants with an operating year end date on or after June 1, 2011 will be prompted to complete the full APR format.

Step 1: Project Information

Q1 Contact Information

Project type: **ALL**

Project information is required. Much of the information on Q1 is imported from the Project Application. If you applied for your grant through *e-snaps* and this information is not pre-populated with at least the grant number, you did not set up your APR properly in *e-snaps*. Return to the instructions on the previous page of this Guidebook and begin the process again.

The screenshot shows a form titled "Q1. Contact Information" with the following fields:

- * Project Name: [text input]
- * Recipient: [text input]
- * Grant Number: [text input]
- * Prefix: [dropdown menu]
- * First Name: [text input]
- Middle Name: [text input]
- * Last Name: [text input]
- Suffix: [dropdown menu]
- Title: [text input]
- * Street Address 1: [text input]
- Street Address 2: [text input]
- * City: [text input]
- * State: [text input]
- * Zip Code: [text input] (Format: 12345 or 12345-1234)
- * E-mail Address: [text input]
- * Confirm E-mail Address: [text input]
- * Phone Number: [text input] (Format: 123-456-7890)
- Extension: [text input]
- Fax Number: [text input] (Format: 123-456-7890)

Project Name, Recipient, Grant Number - These must exactly match the grant information you submitted and received from HUD when your grant was awarded or amended through HUD. Refer to the technical submission you provided to HUD for this grant for your submission information.

The **project name** will be imported and should be the name you called your project when you applied for it. Refer to your Project Application if you cannot remember the project name you used at the time of application. The recipient is the entity that HUD awarded the grant. The **grant number** is the same number as shown on the notification of award from HUD.

Note: Grant numbers change from year to year as the projects renew.

The **contact information** identifies the person that the HUD Field Office or Headquarters should contact regarding your APR submission should there be any questions or issues. The contact person should be familiar with both the grant program and the APR submission.

Q3 Project Information

Project type: **ALL**

Carefully select the answers on this form as they determine what other forms you are required to answer for the APR. Selecting the incorrect answer will give you incorrect forms to complete.

Q3. Project Information

Carefully select the answers to the questions on this form as they determine what questions you are required to answer for the APR. Selecting the incorrect answer will give you incorrect questions to complete. Refer to the CoC APR Guidebook at www.hudhre.info for details on answering this and all questions in the APR.

Instructions: [show]

* Type of Grant -- select --

* Component Type
Content depends on "Type of Grant" selection
Click save to update form. -- select --

* Identify if this project is operated by a victim service provider as defined by the Violence Against Women and Department of Justice Re-authorization Act of 2005 (VAWA).
Click save to update form. -- select --

* Was this project funded under a special initiative? -- select --

Target Subpopulation -- select --

* CoC Number and Name -- select --

Amount of Contract or Award

* Operating Year Covered by this APR -- select --

* Is this an APR for a grant that received a HUD-approved grant extension?
Click save to update form. -- select --

* Is this a final APR for this grant?
Click save to update form. -- select --

* Is this a corrected APR? -- select --

* Is this APR fulfilling the reporting obligation associated with a 20-year use requirement?
Click save to update form. --select --

Type of Grant - will be prepopulated as CoC. Refer to [Appendix 2](#) for grants funded prior to FY2012

Component Type - will be prepopulated with the grant type identified in your application as either: TH, PH, or SSO, SH or HMIS. Refer to [Appendix 2](#) for grants funded prior to FY2012

If you answer you have a PH project type when you click **"Save"** you will then be asked "what kind of Permanent Housing project is this?" Select either PSH for a Permanent Supportive Sousing project or RRH for a Rapid Re-housing project.

If you answer you have an SSO project type when you click **"Save"** you will then be asked "what type of SSO is this project?" Select either Outreach Only, With Housing Goal, or Without a Housing Goal.

Identify if the project is operated by a victim service provider... - You will have three options to choose from: VAWA Provider(s); Only VAWA Provider(s); At Least One VAWA Provider AND At Least One Non-VAWA Provider. Select the appropriate one for your project.

Your victim service provider selction will determine the kind of forms you will need to complete:

1. If you select "No VAWA Provider(s)," **e-snaps** will generate one set of APR questions.
2. If you select "Only VAWA Providers(s)," **e-snaps** will generate essentially two APRs – one with general grant questions that are not specific about clients (i.e., project information, expenditure information) and one for questions about clients which are allowable under VAWA.
3. If you select "At Least One VAWA Provider AND At Least One Non-VAWA Provider" **e-snaps** will generate essentially two APRs -- one for the non-VAWA provider(s) and one for the VAWA provider(s). To distinguish between the two, the questions for the VAWA provider(s) are marked Q#DV.

Was this project funded under a special initiative - If applicable, choose the special initiatives through which your project was funded: Samaritan Housing Bonus, Permanent Housing Bonus, or Rapid Re-housing Demonstration. If no special initiative applies to your project, select “no.”

Target Subpopulation - If you identified a target subpopulation in your Project Application you must identify the same subpopulation here. You will only be allowed to select one target subpopulation. If you identified more than one subpopulation in your Project Application, please only select the subpopulation that you serve with the most frequency. If a subpopulation was not identified in your grant application, choose “none” even if you served one of the subpopulations listed.

Amount of Contract or Award - The amount entered must match your grant award letter from HUD.

CoC Number and Name - The CoC name will be populated from your Project Application if you applied for the grant you are reporting on through *e-snaps*.

Grant Operating Year Covered by this APR - Select which operating year you are reporting on. This question refers to which year of the project the current grant is reporting on. It DOES NOT mean how long the project has been operating in the community. All renewal grants will select “1.” Only new CoC grants with multi-year terms or old SHP, SRO, or S+C grants will select from more than 1 year. Projects that are reporting on grants subject to conditional use provisions of acquisition, renovation or rehabilitation will report on which year of the 20-year use requirement they are reporting on.

Is this an APR for a grant that received a HUD-approved grant extension? - An extension APR is for a project that applied for and received an extension of their grant term from the HUD Field Office. Recipients are not required to submit a separate APR for a grant that received a HUD-approved extension. If the APR you are currently completing was approved by HUD for an extension, indicate “yes” to this question, click save, and then complete the extension period dates that this APR covers.

Is this a final APR for this grant? - An APR is a final APR if it is covering the last operating year of your grant or your grant was for only a one-year term. If you answer “yes” that this is a final APR when you click “**Save**”, two additional questions will appear at the bottom of your screen that you must answer:

1. Have you completed your final draw in LOCCS? Indicate “yes” if all money expended on this grant has been drawn from LOCCS. Indicate “no” if you still have to make a final LOCCS draw.
2. Have you renewed this project? Indicate “yes” if the project has already been renewed through the CoC process OR “no” if you did not elect to renew the project or the CoC did not accept this project for renewal.

Is this a corrected APR? - If you are submitting a corrected or amended APR, check “yes.” To submit a corrected or amended APR, you must first submit a question requesting the ability to amend your APR via HUD Exchange [Ask A Question](#) (in step 2 select CoC – Continuum of Care Program as the issue the “question is related to”). If HUD approves this request, you will be able submit a corrected or amended APR.

Is this APR fulfilling the reporting obligation associated with a use requirement? - Projects that received funding for acquisition, new construction, and rehabilitation are required to maintain the facility as a homeless project for a certain period (20 years under SHP, S+C, and SRO Programs and 15 years under the CoC Program), which is documented by submitting an APR each year. Select “yes” if this APR is fulfilling the reporting obligation associated with the use requirement under either of these conditions:

1. The original grant was only for hard costs (acquisition, new construction, rehabilitation), or

2. The original grant was for hard costs and soft costs (leasing, operations or supportive services) and the recipient declined to renew the soft costs at some point.

Select “no” if this funding is being used to fund leasing, operations, or supportive services in this property, since the APR is not solely being submitted to fulfill the use requirement.

If you answer “Yes” that you are reporting on a use requirement when you click “**Save**” you will be asked to identify the year that the use period on the facility ends.

VALIDATION: EACH TIME YOU ENTER DATA IN A “CLICK SAVE TO UPDATE FORM” FIELD YOU MUST CLICK “SAVE.” ONCE YOU PRESS “SAVE” YOU MAY SEE ADDITIONAL QUESTIONS TO ANSWER. NEITHER “SAVE & NEXT” NOR “SAVE & BACK” WILL SHOW NEW QUESTIONS. REVIEW YOUR ANSWERS AND BE SURE TO ANSWER ANY ADDITIONAL QUESTIONS THAT BECOME VISIBLE.

Step 2: *E-snaps* will generate the correct APR for your project type

After you “**Save**” the information on Q3 one of four things will happen:

1. If **HMIS was identified as the component type** of the grant then continue to the subsequent screens regarding additional comments about your HMIS grant and the submission certification. Then proceed to the submission summary screen and review the submission information. Any errors or omissions marked with “please correct” in the “Last Updated” column of the Submission Summary screen will need to be corrected prior to submission. Once this section has been submitted ***e-snaps*** will automatically generate the second section of the HMIS APR titled “CoC Full APR – HMIS” in the submission list. You will need to exit the “CoC Full APR – General” form and, when you return to the Submission List screen, select the  icon next to the “CoC Full APR – HMIS” form to complete the APR questions associated with your HMIS grant. For detailed information on all HMIS (Dedicated Grant) questions, please refer to the [HMIS APR Guidebook](#).
2. If “**Only VAWA Providers**” was selected for the question “Is this project operated by a victim service provider as defined by the Violence Against Women and Department of Justice Reauthorization Act of 2005 (VAWA)?” then the financial information, performance accomplishments, and comment screens will be visible on your questions list. Complete each screen. Refer to the section on the question number in this guidebook for specific information on how to answer the questions on each screen. Once completed, review the submission information. Any errors or omissions marked with “please correct” in the “Last Updated” column of the Submission Summary screen will need to be corrected prior to submission. Then submit this section of your APR. ***E-snaps*** will then automatically generate the second section of your APR titled “CoC Full APR – DV” in your submission list. You will need to exit the “CoC Full APR – General” form and, when you return to the Submission List screen, select the  icon next to the “CoC Full APR – DV” form to complete the APR questions associated with your grant. Complete the “CoC Full APR – DV” section for the data associated with all VAWA Providers for your grant.
3. If “**At least one VAWA Provider and one non-VAWA provider**” was selected for the question “Is this project operated by a victim service provider as defined by the Violence Against Women and Department of Justice Reauthorization Act of 2005 (VAWA)?” then all of the questions required for the non-VAWA provider(s) will be visible. Complete these questions following the guidance in this Guidebook. Review the submission information. Any errors or omissions marked with “please correct” in the “Last Updated” column of the Submission Summary screen will need to be corrected prior to submission. Then submit this section of your APR. ***E-snaps*** will then automatically generate

the second section of your APR titled “CoC Full APR – DV” in your submission list. You will need to exit the “CoC Full APR – General” form and, when you return to the Submission List screen, select the  icon next to the “CoC Full APR – DV” form to complete the APR questions associated with the data related to the VAWA providers funded by this grant. Complete the “CoC Full APR – DV” section for the data associated with all VAWA Providers for your grant.

4. If any component types identified as other than HMIS and have no VAWA providers as project sponsors for your grant, then you will continue as outlined in this Guidebook, beginning with screen Q4.

Q4 Site Information

Project type: ALL except a VAWA provider who is completing the Q#DV question.

Address and site information - The answers to this question were identified in your grant application. The site information address is the address of the principal project service site. If this is a project with multiple sites (e.g. mobile outreach project, scattered-site housing project, etc.) enter the project’s administrative office address.

* **Street/PO Box:**

* **City:**

* **State:**

* **Zip Code:**

Format: 12345 or 12345-1234

* **Identify the program site configuration type:**

* **Identify the site type for the principal service site:**

* **Identify the housing type for the principal service site:**

Explain any changes made in this section from the information provided in the original application:
 Maximum Characters: 2000

* **Is this a grant that only funds the services that are provided to a CoC Program funded housing grant(s)?**
 Click save to update form.

Identify the program site configuration type – Select from “single site-single building”; “single site-multiple buildings”; or “multiple sites” to identify the type of site this project is operating in.

Identify the housing type for the principal service site - If you provide services within a housing project, identify which type of housing you are servicing. If you do not provide services in housing at all under this grant, select “not applicable: non-residential project.”

Identify the site type for the principal service site - If your project is a “services only” project with no residential component (i.e., child care), then select –“non residential: services only.” If your project is a residential project that houses homeless persons in a setting with non-homeless, non-disabled persons, then select –“residential: special needs and non-special needs.” If your project is a residential project that serves exclusively a special needs population, then select “residential: special needs only.”

Text box - If a change was made in your site between grant application and implementation, or at any time in your grant year, complete the text box explaining any changes made.

Is this a grant that only funds the services that are provided to a CoC Project funded housing grant(s)?

1. Select “Yes” if your grant ONLY provides services to a housing project(s) in your CoC that is funded by the CoC Program though a different grant. A recipient will answer "Yes" if the grant receives funding for supportive services (and possibly HMIS and administrative costs) to provide needed services for a CoC Program funded project that provides housing (i.e., leasing, operating, or rental assistance costs for units for clients). This is most common for former Supportive Housing Program (SHP) grants that funded services for a Shelter Plus Care (S+C) Program grant. The intent of this question is to help HUD understand the relationship of grants and where multiple grants may serve the same clients.

After you **“Save”** the form you will then be required to enter the grant number(s) for those other housing projects that the services provided by your grant supports.

* Is this a grant that only funds the services that are provided to a CoC Program funded housing grant(s)?
Click save to update form.

* Please identify the grant number(s) of the CoC Program funded housing grant(s) this project provides services to.

| |
|--|
| |
| |
| |
| |
| |

2. If your grant is not used to support a housing project, then select “No” and **“Save”** the form.

Is this a grant that only funds services that are provided to a non-CoC Program funded housing grant(s)?

1. Select “Yes” if your grant ONLY provides services to a housing project(s) in your CoC not funded through the CoC Program.
2. If your grant is not used to support a housing project, then select “No” and **“Save”** the form.

Text box - If you answered “Yes,” that the project ONLY provides services to a housing project(s) not funded by the CoC Program, you will need to complete the text box describing the type of housing (i.e., SH, TH, or PH) the project provides services for, the funding source, and who is served.

HUD has recently released guidance to CoCs and recipients who receive no funding for direct provision of housing assistance, but rather provide supportive services. This guidance helps clarify the scenarios that are directly applicable to the responses to Q4. This information can be found at HUDEXchange.info under [CoC Program SSO/Housing Component Decision Tool](#).

Q5 Bed and Unit Inventory

Project type: ALL

The Proposed Bed and Unit Inventory is the proposed number of bed and units submitted in your Project Application, and should match the information in your Project Application (or amendment). Projects that do not have a fixed number of units may record either the number of facilities operated (e.g. 1 facility = 1 unit) or may use the number of bedrooms (e.g. 5 bedrooms = 5 units) as is appropriate for the type of facility.

The Actual Bed and Unit Inventory is the number of beds and units reliably ready for occupancy starting on or before the last day of the project’s operating year.

- If some or all of the beds are not designated exclusively for one type of household, then report beds in each type based on the average use of those beds. (Be sure your total **beds and units = your actual total** – if not, adjust your averages.)
- Projects that only have units (no fixed number of beds – e.g. apartment units) must estimate the number of beds.

Chronically Homeless beds are those that were identified in your grant application as a subset of the total beds. The number of actual chronically homeless beds represents those that are set-aside for individuals or families who are chronically homeless. Though you may have served a chronic homeless person in a bed, you can only list the bed as a “Chronically Homeless Bed” if it was specifically designated in your grant application for “chronically homeless persons.”

Text box If there is a difference between the beds and units you proposed and what you actually have operational, you must explain the difference.

| Q5. Bed and Unit Inventory | | | |
|--|-------------|------------------------------------|--------------|
| Instructions: [show] | | | |
| * Proposed Bed and Unit Inventory | | | |
| Total Number of Year Round Beds/Units from Application | | | |
| | Beds | CH Beds <i>(PH Only)</i> | Units |
| Households Without Children | 0 | 0 | |
| Households With Children | | 0 | |
| Total | 0 | 0 | 0 |
| * Actual Bed and Unit Inventory | | | |
| Total Current Number of Year Round Beds/Units | | | |
| | Beds | CH Beds <i>(PH only)</i> | Units |
| Households Without Children | | 0 | |
| Households With Children | | 0 | |
| Total | 0 | 0 | 0 |

Q6 HMIS Bed Participation Rate

Project type: ALL except a VAWA provider who is completing the Q#DV question.

The total number of year-round beds in HMIS for households without children

The total number of year-round beds in HMIS for households with children

The total number of year-round beds in HMIS for households with only children

In Q5 you indicated how many beds you have operational in the program in the “Actual Bed and Unit Inventory”. This question is asking you how many of those beds are covered in your HMIS (i.e., Do you enter all required data on the persons in those beds into your HMIS?). A bed is considered covered in HMIS if: 1) the project is making all reasonable efforts to record all universal and applicable program-level data elements on all clients served in that bed, and 2) discloses these data elements through agreed upon means to the HMIS Lead Agency at least once annually.

The **bed coverage rate** is automatically calculated when you click “Save” based on the number of beds you showed in the top questions on this page divided by the total number of year round beds you reported as actual bed inventory in Q5.

| Q6. HMIS Bed Participation | |
|--|---------------------------------|
| Instructions: [show] | |
| HMIS Bed Participation | |
| * The total number of year-round beds in HMIS for households without children: | <input type="text"/> |
| * The total number of year-round beds in HMIS for households with children: | <input type="text"/> |
| * The total number of year-round beds in HMIS for households with only children: | <input type="text"/> |
| HMIS bed coverage rate for year-round beds for households without children: | <input type="text" value="0%"/> |
| HMIS bed coverage rate for year-round beds for households with children: | <input type="text" value="0%"/> |
| HMIS bed coverage rate for year-round beds for households with only children: | <input type="text" value="0%"/> |
| Total HMIS bed coverage rate for all year-round beds: | <input type="text" value="0%"/> |

VALIDATION: THE TOTAL NUMBER OF YEAR-ROUND BEDS IN HMIS SHOULD NOT BE GREATER THAN THE NUMBER OF ACTUAL BEDS YOU REPORTED IN YOUR INVENTORY ON Q5.

Q7 Data Quality

Project type: **ALL**

Total number of Clients - Enter the total number of persons served by this project in the period.

The term person (or client) served refers to all adults and children served by the project during the reporting period. This does not include caregivers who live with a disabled adult and children who are not in the care of a parent or guardian or not residing with them.

Street Outreach projects will only record the number of persons who have an “engagement date” recorded for their project stay.

Total number of Adults – Of the total number of persons served, enter the number of persons who are adults (i.e., age 18 or over). A person's age is based on the project *entry date closest to the end of the operating year*. If a person entered the project prior to the start of the reporting period, the person's age is based on the first day of the reporting period.

Total number of Unaccompanied Children - Of the total number of persons served, enter the number of persons who are unaccompanied children (i.e., age 17 or under in a household without anyone else).

Total number of Leavers - Of the total number of persons served, enter the number of Leavers (i.e., persons who exited the project during the reporting period and were not active in the project on the last day of the reporting period).

Q7. Data Quality

Instructions: [show]

Definitions: [show]

* Total number of Clients:

* Total number of Adults:

* Total number of Unaccompanied Children:

* Total number of Leavers:

Data Quality -

For each data element, specify the number of total persons in this project for whom the data element recorded in HMIS was “Client Doesn’t Know or Client Refused” and the number of persons with “Missing Data” (i.e., those for whom no information was recorded in the HMIS or was marked “Data Not Collected”).

Note that persons are not counted if the data element is not required to be collected. For example, children would not be counted in the veteran status data element. Data Standard changes in 2014 required that the following responses in Q7 were also changed:

- When either the “First name” or “Last name” are blank fields report them in the “Don’t know/Refused” column.
- The universe of clients for “Disabling condition”, “Cash income”, “Non-cash income” and “Destination” now reports on adult clients only.
- The universe of residence prior to entry and “Domestic Violence: was expanded to adults and all heads of household ((including those under age 18).
- Both the zip code of last permanent address and the housing status fields are no longer universal data elements and should be reported as “0” in both the “Don’t know/Refused” and “Missing Data” fields.

Data quality is to be reported based on the latest enrollment for each client in the reporting period. Thus, the “total number of Clients” reported in the first part of this question will equal the total clients who were served including data entered for a client who may have been entered prior to the start of the reporting period.

VAWA providers should report data quality based on data provided in their comparable non-HMIS database. If multiple databases are used across a grant, the data is to be aggregated for reporting purposes.

Street Outreach projects missing data should only be counted for clients who have been identified as engaged in the project.

Program Outputs

Q8 Persons Served

Project type: **ALL**

Enter the number of persons served by household type using the following rules:

1. Consider all members of the household that were served within the reporting period when determining household type, regardless of whether they overlapped with one another.
2. Calculate each person's age based on their most recent entry date within the reporting period or as of the first day of the reporting period, whichever is later.
3. Group all persons together who were in one household at any point in time in the reporting period.
4. Count as follows:
 - a. **Households without Children** – single adult persons or adults with adult companions that have never had a child in their household.
 - b. **Households with Children and Adults** – a person in any household with at least one adult and one child present regardless of whether the child(ren) is present for the full project stay. (Rule – If ever a child in the household, always a household with children).
 - c. **Households with only Children** – a person in any household in which all persons are younger than age 18.
 - d. **Unknown Household Type** – households that cannot be classified in cases when one or more persons are missing dates of birth. Note that in instances when the household already contains at least one known adult and one known child, the household type can be determined and categorized as a Household with Children and Adults.

| Q8. Persons Served | | | | | |
|--|-------|------------------|--------------------------|--------------------|------------------------|
| Instructions: [show] | | | | | |
| * Number of Persons in Households Served During the Operating Year | | | | | |
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Adults | | | | | |
| Children | | | | | |
| Don't Know/Refused | | | | | |
| Information Missing | | | | | |
| Total | | | | | |

| * Average Number of Persons Served Each Night | | | | | |
|---|-------|------------------|--------------------------|--------------------|------------------------|
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Average Number of Persons | | | | | |

| Point-in-Time Count of Persons Served on the Last Wednesday in | | | | | |
|--|-------|------------------|--------------------------|--------------------|------------------------|
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| January | | | | | |
| April | | | | | |
| July | | | | | |
| October | | | | | |

Point-in-Time - Enter the count of persons by their household types served on the last Wednesday of January, April, July and October.

VALIDATION:THE TOTAL NUMBER OF PERSONS IN HOUSEHOLDS MUST EQUAL THE TOTAL NUMBER OF CLIENTS REPORTED IN Q7. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

ALL FUTURE QUESTIONS IN THE APR MUST REFLECT THE SAME UNIVERSE OF CLIENTS AS ARE ENTERED HERE ON Q8. ERROR MESSAGES WILL BE GENERATED IN SUBSEQUENT QUESTIONS IF THE TOTALS IN THOSE QUESTIONS ARE NOT CONSISTENT WITH THE TOTALS REPORTED HERE. FOR EXAMPLE, IF YOU SAID YOU HAD 15 ADULTS SERVED IN THIS QUESTION – BUT LATER ON Q15A1 – YOU ONLY REPORTED GENDER ON 14 ADULTS, THEN YOU WILL RECEIVE AN ERROR MESSAGE. TO RECONCILE AN ERROR MESSAGE, YOU WILL NEED TO UPDATE THE TOTALS IN THIS QUESTION OR IN THE QUESTION(S) THAT FOLLOW TO ENSURE THAT THE RESULTS ARE CONSISTENT.

Q9 Households Served

Project type: **ALL**

Enter the total number of distinct households served during the full reporting period using the following rules:

1. For households in which each member has only one project stay during the reporting period, count one household and define the household type based on all members who were present during the reporting period.
2. For households in which one or more members have more than one project stay during the reporting period:
 - a. Consider all project stays in the reporting period chronologically.
 - b. If an identical group of people are served together on multiple project stays, count only one household.
 - c. If an adult who has been served previously in the reporting period re-enters the project later in the reporting period, then the adult and any persons served with him/her on both stays are counted as one household that may present in different configurations over time. Define the household type based on all members of the household who were served at any point during the reporting period.
 - d. If multiple adults were served earlier in the reporting period in two separate households in two separate stays, and subsequently are served together in a third stay, only two households are counted. Each of the two original households will be counted, because at the time of entry neither had adults who had been previously served. The third stay is not counted as a new household, because it contains adults who were previously served. To categorize the household type, join the household members from the later stay to the household that appeared earliest in the reporting period.

Unlike all other APR questions that are looking at the household configuration based on the person's last stay during the operating year, the method of counting is different because this question is counting the total number of households – not the number of persons.

Within the reporting period, a household must only be counted as new if none of the adults in the household have been served before. If the household does not have an adult member, the group is to be considered a new household if the membership of the household differs from any prior project stay.

Point-in-Time - Enter the count of households by types served on the last Wednesday of January, April, July and October

Q9. Households Served

Instructions: [show]

* Number of Households Served During the Operating Year

| | Total | <u>Without Children</u> | <u>With Children and Adults</u> | <u>With Only Children</u> | Unknown Household Type |
|------------|-------|-------------------------|---------------------------------|---------------------------|------------------------|
| Households | 0 | | | | |

Point-in-Time Count of Households Served on the Last Wednesday in

| | Total | <u>Without Children</u> | <u>With Children and Adults</u> | <u>With Only Children</u> | Unknown Household Type |
|---------|-------|-------------------------|---------------------------------|---------------------------|------------------------|
| January | 0 | | | | |
| April | 0 | | | | |
| July | 0 | | | | |
| October | 0 | | | | |

Q10 & Q11 Utilization Rates

Project type: **ALL**

The bed and unit utilization rate question is automatically calculated from the entries you made in Q5 for bed and unit capacity, the entries you made for the (Q8) persons served by household type, and (Q9) household type. You will not be able to enter data into this question.

Q10 and Q11. Utilization Rates

* Bed Utilization Rate

Average daily utilization rate during the operating year:

Point-in-Time bed utilization rate on the last Wednesday in:

| | |
|---------|----|
| January | 0% |
| April | 0% |
| July | 0% |
| October | 0% |

* Unit Utilization Rate

Point-in-Time unit utilization rate on the last Wednesday in:

| | |
|---------|----|
| January | 0% |
| April | 0% |
| July | 0% |
| October | 0% |

IF IN REVIEW OF THIS QUESTION YOU DETERMINE SOMETHING IS NOT CORRECT YOU MUST GO "BACK" TO Q5, Q8, AND Q9 TO MAKE SURE THERE IS NOT AN ERROR IN ONE OF THOSE TABLES. UPDATING AND SAVING CORRECTIONS IN ONE OF THOSE QUESTIONS WILL AUTOMATICALLY RECALCULATE THE RESULTS IN Q10 OR Q11.

Q12 Outreach Contacts and Engagements

Program Type: **Street Outreach**

Number of Persons Contacted During the Operating Year - Count the number of times, from the person's first contact, that all adults and heads of households active in the project are contacted up until (and including) the date of engagement or the end of the operating year, whichever is earlier. Contacts made by persons who have open records during the operating year and whose entry date was prior to the start of the operating year are counted.

Enter the number of adults and heads of households who were contacted within the number of times specified within each row, based on the location of person's first contact (place not meant for human habitation, non-housing service site, at a housing location, or first contact place was missing).

Number of Persons Engaged (by the number of contacts they had) During the Operating Year – Enter the total number of adults and heads of households engaged during the operating year (reporting period), recording people in the row associated with the number of contacts made prior to engagement and in the column of each person's first contact.

Rate of Engagement - The rate of engagement is an automatic calculation. It calculates how many contacts it took for all clients who were engaged during the reporting period to become engaged.

| Q12. Outreach Contacts and Engagements | | | | | |
|---|-----------------------|---|---|---|---------------------------------|
| Instructions: [show] | | | | | |
| * Number of Persons Contacted During the Operating Year | | | | | |
| | All Persons Contacted | First contact was at a place not meant for human habitation | First contact was at a non-housing service site | First contact was at a housing location | First contact place was missing |
| Once | 0 | | | | |
| 2-5 Times | 0 | | | | |
| 6-9 Times | 0 | | | | |
| 10+ Times | 0 | | | | |
| Total Persons Contacted | 0 | 0 | 0 | 0 | 0 |
| * Number of Persons Engaged by Number of Contacts During the Operating Year | | | | | |
| | All Persons Contacted | First contact was at a place not meant for human habitation | First contact was at a non-housing service site | First contact was at a housing location | First contact place was missing |
| 1 Contact | 0 | | | | |
| 2-5 Contacts | 0 | | | | |
| 6-9 Contacts | 0 | | | | |
| 10+ Contacts | 0 | | | | |
| Total Persons Engaged | 0 | 0 | 0 | 0 | 0 |
| Rate of Engagement | 0% | 0% | 0% | 0% | 0% |

VALIDATION: THE TOTAL NUMBER OF PERSONS ENGAGED CANNOT BE GREATER THAN THE TOTAL NUMBER OF PERSONS CONTACTED.

Client Characteristics

Q15 Gender

Project type: **ALL**

Gender tables in **e-snaps** have been separated onto three forms for ease of viewing and data entry. Persons are counted in only one form, recorded by gender under the type of household in which they were associated for their last project stay.

Q15a1 - reports on the gender of adults

Q15a2 - reports on the gender of children

Q15a3 - reports on the gender of persons whose age is unknown

| * Gender of Persons Missing Age Information Number of Persons in Households | | | | | |
|--|----------------------|----------------------------|------------------------------------|------------------------------|---------------------------|
| | | <u>Without</u> Children | <u>With</u> Children and Adults | <u>With Only</u> Children | Unknown Household Type |
| Male | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Female | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Transgender | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Other | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Don't Know/Refused | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Information Missing | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Subtotal | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

VALIDATION: Q15 SUBTOTALS MUST EACH EQUAL THE TOTALS REPORTED IN Q8. E-SNAPS WILL PREVENT SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

Q16 Age

Project type: **ALL**

The age question divides all persons served in the reporting period into age groups. Age must be reported based on the person's age at most recent project entry (the last project stay of the reporting period) or on the first day of the reporting period, whichever is later. Report the number of persons served within each age group based on each person's age and household type.

Q16. Age

Instructions: [show]

| | * Age | | | | |
|---------------------|---------------------------------|------------------|--------------------------|--------------------|------------------------|
| | Number of Persons in Households | | | | |
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Under 5 | 0 | | | | |
| 5 - 12 | 0 | | | | |
| 13 - 17 | 0 | | | | |
| 18 - 24 | 0 | | | | |
| 25 - 34 | 0 | | | | |
| 35 - 44 | 0 | | | | |
| 45 - 54 | 0 | | | | |
| 55 - 61 | 0 | | | | |
| 62+ | 0 | | | | |
| Don't Know/Refused | 0 | | | | |
| Information Missing | 0 | | | | |
| Total | 0 | 0 | 0 | 0 | 0 |

VALIDATION: Q16 TOTALS MUST EACH EQUAL THE TOTALS REPORTED IN Q8. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

Q17 Ethnicity and Race

Project type: **ALL**

The ethnicity and race questions in *e-snaps* have been separated onto two screens for ease of viewing and data entry.

Q17a reports the ethnicity of all persons served during the reporting period.

Q17a. Ethnicity/Race - Ethnicity

Instructions: [show]

| | * Ethnicity | | | | |
|-------------------------|---------------------------------|------------------|--------------------------|--------------------|------------------------|
| | Number of Persons in Households | | | | |
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Non-Hispanic/Non-Latino | 0 | | | | |
| Hispanic/Latino | 0 | | | | |
| Don't Know/Refused | 0 | | | | |
| Information Missing | 0 | | | | |
| Total | 0 | 0 | 0 | 0 | 0 |

Q17b reports the race of all persons served during the reporting period. Persons with multiple racial types recorded must be counted in the “multiple races” row.

Q17b. Ethnicity/Race - Race

Instructions: [show]

| | * Race | | | | |
|---|---------------------------------|------------------|--------------------------|--------------------|------------------------|
| | Number of Persons in Households | | | | |
| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| White | 0 | | | | |
| Black or African-American | 0 | | | | |
| Asian | 0 | | | | |
| American Indian or Alaska Native | 0 | | | | |
| Native Hawaiian or Other Pacific Islander | 0 | | | | |
| Multiple Races | 0 | | | | |
| Don't Know/Refused | 0 | | | | |
| Information Missing | 0 | | | | |
| Total | 0 | 0 | 0 | 0 | 0 |

VALIDATION: BOTH Q17A AND Q17B TOTALS MUST EACH EQUAL THE TOTALS REPORTED IN Q8. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

Q18 Physical and Mental Health Conditions

Project type: **ALL**

These questions identify the reported conditions/disabilities of all persons served by the project during the reporting period. These include: mental illness, alcohol abuse, drug abuse, chronic health condition, HIV/AIDS and related diseases, developmental disability, and physical disability. The information on conditions are to be based on latest project entry.

Q18a reports on the number of clients with each known disability condition. The rows are not totaled on this question, since one person may have more than one disabling condition and may be reported in one or more rows. For the purposes of this question, counts are based on the project-specific disability condition data elements in the HMIS.

Q18a. Physical and Mental Health Conditions at Entry

Instructions: [show]

| | * Known Physical and Mental Health Conditions at Entry | | | | |
|-------------------------------|--|------------------|--------------------------|--------------------|------------------------|
| | Number of Persons in Households | | | | |
| | Total Persons | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
| Mental Illness | 0 | | | | |
| Alcohol Abuse | 0 | | | | |
| Drug Abuse | 0 | | | | |
| Chronic Health Condition | 0 | | | | |
| HIV/AIDS and Related Diseases | 0 | | | | |
| Developmental Disability | 0 | | | | |
| Physical Disability | 0 | | | | |

Q18b reports on the number of physical and mental health conditions known at the time of project entry. This question must count every person served within the reporting period.

Answers are based on both the general disabling condition data element and on the specific conditions (e.g. Mental Illness, Chronic Health Condition, etc.). Count each specific condition identified as one condition. If disabling condition is identified but a specific condition is not noted, then count that as “Condition Unknown.”

Q18b. Number of Physical and Mental Health Known Conditions at Entry

Instructions: [show]

| | * Number of Known Conditions Number of Persons in Households | | | | |
|-------------------------|---|----------------------------|------------------------------------|------------------------------|------------------------------|
| | Total Persons | <u>Without</u> Children | <u>With</u> Children and Adults | <u>With Only</u> Children | Unknown Household Type |
| None | 0 | | | | |
| 1 Condition | 0 | | | | |
| 2 Conditions | 0 | | | | |
| 3+ Conditions | 0 | | | | |
| Condition Unknown | 0 | | | | |
| Don't Know / Refused | 0 | | | | |
| Information Missing | 0 | | | | |
| Total | 0 | 0 | 0 | 0 | 0 |

VALIDATION: Q18B TOTALS MUST EACH EQUAL THE TOTALS REPORTED IN Q8. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

Q19 Domestic Violence Experience

Project type: **ALL**

Q19a reports only on adults and head of households who indicated they were victims of domestic violence served by the project during the reporting period, as reported at the time of their last project entry of the year. Children in households of adult victims are not reported. If you have reported persons in the “Yes” row of 19a, then you must click **“Save”**, rather than “Save & Next,” to see the second half of the question. In 19b, record the number of persons who indicated that their past experience of domestic violence was within each of the specified timeframes.

Q19. Domestic Violence Experience

Instructions: [show]

**19a. Past Domestic Violence Experience
Number of Adults and Unaccompanied Children in Households**

[Click save to update form.](#)

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|---------------------|--------------|-------------------------|---------------------------------|---------------------------|-------------------------------|
| Yes | 1 | 1 | | | |
| No | 0 | | | | |
| Don't Know/Refused | 0 | | | | |
| Information Missing | 0 | | | | |
| Total | 1 | 1 | 0 | 0 | 0 |

**19b. When Past Domestic Violence Experience Occurred
Number of Adults and Unaccompanied Children in Households**

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--------------------------|--------------|-------------------------|---------------------------------|---------------------------|-------------------------------|
| Within the past 3 Months | 0 | | | | |
| 3 to 6 Months Ago | 0 | | | | |
| 6 to 12 Months Ago | 0 | | | | |
| More than a Year Ago | 0 | | | | |
| Don't Know/Refused | 0 | | | | |
| Information Missing | 0 | | | | |

VALIDATION: IF YOU RECORDED PERSONS IN 19A IN THE "YES" ROW, THE TOTAL PERSONS ENTERED IN 19B MUST MATCH THE TOTAL NUMBER OF PERSONS REPORTED IN THE "YES" ROW IN 19A. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

Q20 Prior Residence

Project type: **ALL**

Prior residence tables in *e-snaps* have been separated onto three forms (divided into homeless situation, institutional settings, and other locations) for ease of viewing and data entry. This question reports on the living situation of adults and head of households the night before they entered the project.

The 2014 Data Standards includes three new response categories for Residence Prior to Program Entry: Long-term care facility or nursing home, Rental by client with GBD TIP subsidy, and Residential project or halfway house with no homeless criteria. Until the APR form in e-snaps is updated to reflect these new categories they are to be mapped as follows

Long-term care facility or nursing home – maps to – Rental by client with other subsidy

Rental by client, with GPD TIP subsidy – maps to – Rental by client with other subsidy

Residential project or halfway house with no homeless criteria – maps to - Other

Q20a1 reports on adults and head of households with a prior residence in **homeless situations**.

Q20a1. Residence Prior to Program Entry - Homeless Situations

Instructions: [\[show\]](#)

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|---|-------|------------------|--------------------------|--------------------|------------------------|
| Emergency shelter | 0 | | | | |
| Transitional housing for homeless persons | 0 | | | | |
| Place not meant for human habitation | 0 | | | | |
| Safe Haven | 0 | | | | |
| Subtotal | 0 | 0 | 0 | 0 | 0 |

Q20a2 reports on adults and head of households with a prior residence in **institutional settings**.

Q20a2. Residence Prior to Program Entry - Institutional Settings

Instructions: [\[show\]](#)

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--|-------|------------------|--------------------------|--------------------|------------------------|
| Psychiatric facility | 0 | | | | |
| Substance abuse or detox center | 0 | | | | |
| Hospital (non-psychiatric) | 0 | | | | |
| Jail, prison, or juvenile detention | 0 | | | | |
| Foster care home or foster care group home | 0 | | | | |
| Subtotal | 0 | 0 | 0 | 0 | 0 |

Q20a3 reports on adults and head of households with a prior residence in **other locations**, including unsubsidized and subsidized permanent housing locations. Q20a3 also allows for an

“other” category for adults and head of households who came from a place not identified in any prior living option.

Q20a3. Residence Prior to Program Entry - Other Locations

Instructions: [show]

**Residence Prior to Program Entry - Other Locations
Number of Adults and Unaccompanied Children in Households**

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--------------------------------------|-------|------------------|--------------------------|--------------------|------------------------|
| PSH for homeless persons | | | | | |
| Owned by client, no subsidy | | | | | |
| Owned by client, with subsidy | | | | | |
| Rental by client, no subsidy | | | | | |
| Rental by client, with VASH subsidy | | | | | |
| Rental by client, with other subsidy | | | | | |
| Hotel/Motel, paid by client | | | | | |
| Staying or living with family | | | | | |
| Staying or living with friend(s) | | | | | |
| Other | | | | | |
| Don't Know/Refused | | | | | |
| Information Missing | | | | | |
| Subtotal | | | | | |
| *Total - 20a1, 20a2 and 20a3 | | | | | |

VALIDATION: THERE IS A SUBTOTAL ON EACH OF THE Q20 FORMS. THOSE SUBTOTALS ARE SUMMED TO CREATE THE “TOTAL – 20A1, 20A2 AND 20A3” ROW. IF THAT ROW IS NOT CONSISTENT WITH Q8 YOU NEED TO CHECK THE ENTRIES MADE ON EARLIER FORMS TO MAKE ADJUSTMENTS.

VALIDATION: THE TOTAL OF Q20A1, 20A2 AND 20A3 MUST BE CONSISTENT WITH THE TOTAL ADULTS AND UNACCOMPANIED CHILDREN REPORTED IN Q8. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT CONSISTENT.

Q21 Veteran Status

Project type: **ALL**

This question captures the Veteran status of all adults served by the project during the reporting period.

| | * Veteran Status Number of Adults in Household | | | |
|---------------------|---|------------------|--------------------------|------------------------|
| | Total | Without Children | With Children and Adults | Unknown Household Type |
| Veteran | 0 | | | |
| Not a Veteran | 0 | | | |
| Don't Know/Refused | 0 | | | |
| Information Missing | 0 | | | |
| Total | 0 | 0 | 0 | 0 |

VALIDATION: Q21 TOTALS MUST MATCH THE TOTALS REPORTED IN Q8 FOR ADULTS. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

Q22 Physical and Mental Health Conditions at Exit

Project type: **ALL**

These questions identify the reported physical and mental health conditions of all adults served by the project during the reporting period based on what was recorded on their last exit from the project during the reporting period. If an adult has not exited the project they are considered a stayer and their information must be taken from the assessment nearest to the end of the reporting period, even if that is the project entry data. Conditions to be reported include: mental illness, alcohol abuse, drug abuse, chronic health condition, HIV/AIDS and related diseases, developmental disability, and physical disability. If the data indicates that a “disabling condition” was present for an adult but does not specify which condition it is, then that adult is counted under “Condition Unknown.”

Q22a1 identifies specific conditions of all **leavers** and **Q22b1** identifies specific conditions of all **stayers**. Conditions are reported separately for adults (18 or over), children, and persons of unknown age. If an adult or child has more than one condition, they are reported under each condition they have and would be counted in more than one row.

*** Known Physical and Mental Health Conditions
Number of Leavers**

| | All Persons | Adults | Children | Age Unknown |
|-------------------------------|-------------|--------|----------|-------------|
| Mental Illness | 0 | | | |
| Alcohol Abuse | 0 | | | |
| Drug Abuse | 0 | | | |
| Chronic Health Condition | 0 | | | |
| HIV/AIDS and Related Diseases | 0 | | | |
| Developmental Disability | 0 | | | |
| Physical Disability | 0 | | | |

Q22a2 identifies the number of **leavers** and **Q22b2** identifies specific conditions of all **stayers**. Report the number of conditions each adult, child and person of unknown age has.

*** Number of Known Conditions
Number of Leavers**

| | All Persons | Adults | Children | Age Unknown |
|---------------------|-------------|--------|----------|-------------|
| None | 0 | | | |
| 1 Condition | 0 | | | |
| 2 Conditions | 0 | | | |
| 3+ Conditions | 0 | | | |
| Condition Unknown | 0 | | | |
| Don't Know/Refused | 0 | | | |
| Information Missing | 0 | | | |
| Total | 0 | 0 | 0 | 0 |

VALIDATION: THE SUM OF Q22A2 AND 22B2 MUST MATCH THE TOTALS REPORTED IN Q8. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

THE TOTAL ROWS IN Q22A2 AND Q22B2 ARE USED TO ERROR CHECK THE TOTAL NUMBER OF LEAVERS AND STAYERS IN SUBSEQUENT QUESTIONS. ALL FUTURE QUESTIONS ABOUT LEAVERS WILL BE REQUIRED TO BALANCE

BACK TO NUMBERS ENTERED IN THE TOTAL ROW OF Q22A2. ALL FUTURE QUESTIONS ABOUT STAYERS WILL BE REQUIRED TO BALANCE BACK TO THE NUMBERS ENTERED IN THE TOTAL ROW OF Q22B2.

Q23 Cash Income Range – Income Amount

Project type: **ALL**

Q23 reports on total cash income for all adults in the project by entry and either the latest follow-up for stayers or at exit for leavers. To be reported as having income the client record in HMIS must have a total monthly income reported at \$0.00 or more. Records that only recorded a source of income and did not include the total monthly income dollar value will be shown as “Information Missing.”

Clarification - income at follow-up for stayers:

- For stayers whose length of stay in the project at the end of the operating year was less than 365 days, the stayer’s income which was recorded at project entry may be used as “follow-up” if no change in income was recorded in the HMIS. Those persons are reported as having no change in income and you would see a person with \$500 per month of income reported in the \$251 - \$500 row in both the Income at Entry and Income at Latest Follow-up
- For stayers whose length of stay in the project at the end of the operating year is more than 365 days and for whom there is no follow-up or assessment reported in HMIS, the stayer’s income at latest follow-up is reported in the “Adults with Missing Income Information” row.

*** Client Cash Income Range – Income Amount
Number of Adults**

| | Income at Entry | Income at Latest Follow-up for Stayers | Income at Exit for Leavers |
|---------------------|-----------------|--|----------------------------|
| No income | | | |
| \$1 - \$150 | | | |
| \$151 - \$250 | | | |
| \$251 - \$500 | | | |
| \$501 - \$1000 | | | |
| \$1,001 - \$1,500 | | | |
| \$1,501 - \$2,000 | | | |
| \$2,001 + | | | |
| Don't Know/Refused | | | |
| Information Missing | | | |
| Total Adults | 0 | 0 | 0 |

Tip: To avoid having missing information reported on the APR, make sure that:

1. Every adult in the project staying longer than 1 year has an income assessment recorded in their HMIS record annually – even if the income did not change.
2. There is a dollar amount entered in HMIS for every adult’s monthly income from all sources- even if it is zero.

VALIDATION: THE TOTAL NUMBER OF ADULTS MUST EQUAL THE TOTAL NUMBER OF ADULTS ON Q7.

VALIDATION: THE TOTAL NUMBER OF ADULTS AT LATEST FOLLOW UP FOR STAYERS MUST EQUAL THE TOTAL NUMBER OF ADULT STAYERS IN Q22B2.

VALIDATION: THE TOTAL NUMBER OF ADULT LEAVERS MUST EQUAL THE NUMBER OF ADULT LEAVERS IN Q22A2.

VALIDATION: THE TOTAL NUMBER OF ADULTS AT ENTRY MUST EQUAL THE SUM OF THE TOTAL STAYERS PLUS THE TOTAL LEAVERS. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT CORRECT.

Q24a Client Cash Income Category – Income Category – by Entry and Follow-up/Exit Status

Project type: ALL

Differentiating earned (i.e., employment) income from other income is important for HUD's required reporting to Congress. Q24a reports on the number of adults the project had at project entry, at the time of their annual assessment or follow-up for stayers, and at the time of exit for leavers based on income type. The categories are:

- Earned Income = all adults with income over \$0.00 from earned (employment) income.
- Other Income = all adults with income over \$0.00 from all sources, except earned income, including: Unemployment Insurance, SSI, SSDI, Veteran's Disability, Private Disability Insurance, Worker's Compensation, TANF (or the equivalent of), General Assistance, Retirement (Social Security), Veteran's Pension, Pension from a Former Job, Child Support, Alimony/Spousal Support, and Other.
- Both Earned and Other Income = all adults with income over \$0.00 in both earned income and another source of income. (Note: adults counted in this category are NOT counted in the categories above.)
- No Income = all adults with \$0.00 recorded for income.
- Don't Know/Refused Income = adults with either Client doesn't know or Client refused as the response to Income from any source and no dollar amount recorded in income.
- Missing Income = all adults without a response to Income from any source and no dollar amount in income recorded in HMIS; for stayers, all adults whose length of stay in the project was greater than 365 days and had no income assessment recorded in HMIS subsequent to project entry.
- Total Adults = all adults in the project during the operating year with either earned income, other income, both earned and other income, no income, don't know their income, refused to tell the provider their income or missing income.
- Adults with Income Information at Entry and Follow-Up or Exit = this row reports adults who have a definite known income (equal to or more than \$0.00) at both project entry and either follow-up (for stayers) or exit (for leavers).

*** Client Cash Income Category - Income Category - by Entry and Follow-up/Exit Status**

Number of Adults

| Number of Adults By Income Category | Number of Adults at Entry | Number of Adults at Follow-Up (Stayers) | Number of Adults at Exit (Leavers) |
|---|----------------------------------|--|---|
| Adults with Only Earned income (i.e., Employment Income) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Adults with Only Other income | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Adults with Both Earned and Other Income | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Adults with No Income | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Adults with Don't Know/Refused Income Information | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Adults with Missing Income Information | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total Adults | 0 | 0 | 0 |
| Adults with Income Information at Entry and Follow-Up/Exit | <input type="text"/> | <input type="text"/> | <input type="text"/> |

VALIDATION: THE TOTAL NUMBER OF ADULTS AT ENTRY MUST EQUAL THE TOTAL NUMBER OF ADULTS AT ENTRY ON Q23.

VALIDATION: THE TOTAL NUMBER OF ADULT STAYERS AT FOLLOW-UP MUST EQUAL THE TOTAL NUMBER OF ADULT STAYERS IN Q23.

VALIDATION: THE TOTAL NUMBER OF ADULT LEAVERS AT EXIT MUST EQUAL THE TOTAL NUMBER OF ADULT LEAVERS IN Q23.

VALIDATION: THE TOTAL NUMBER OF ADULTS AT ENTRY MUST EQUAL THE SUM OF THE TOTAL STAYERS PLUS THE TOTAL LEAVERS. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT CORRECT.

THE ADULTS WITH INCOME INFORMATION AT ENTRY AND FOLLOW-UP/EXIT ROW IS USED TO ERROR CHECK THE DATA IN Q24B.

Q24b Client Cash Income Change

Project type: ALL

Q24b builds off of the information reported on Q24a. The Q24b series of questions reports in greater detail across income categories on the change of income for those adults with recorded income (including \$0.00) at entry and at either follow-up (stayers), at exit (leavers) or both. Clients with Don't know, Client refused, or Missing income information are not included. Q24b has three tables:

- Q24b1 – Income Sources by Entry and Latest Status – reports on adult stayers
- Q24b2 – Income Sources by Entry and Exit – reports on adult leavers
- Q24b3 – Income Sources by Entry and Latest Status or Exit – reports on adult stayers and leavers

This time the question categorizes the adults in the project by:

- Earned income
 - Counting the number of adults with recorded earned income
 - Reporting the average dollar amount change in the earned income
- Other Income
 - Counting the number of adults with recorded other income
 - Reporting the average dollar amount change in other income
- Any income (i.e., the income could have been from employment or other or both)
 - Counting the number of adults with any recorded income
 - Reporting the average dollar amount change in total income

Q24b uses this same table structure for all three tables, but table b1 is only for stayers, table b2 is only for leavers, and table b3 looks at both leavers and stayers. Below is a screen shot of table b1:

* Client Cash Income Change - Income Source - by Entry and Latest Status
Number of Adult Stayers

| Income Change by Income Category (Universe: Adult Stayers with Income Information at Entry and Follow-up) | Had Income Category at Entry and Did Not Have It at Follow-up | Retained Income Category But Had Less \$ at Follow-up Than at Entry | Retained Income Category and Same \$ at Follow-up as at Entry | Retained Income Category and Increased \$ at Follow-up | Did Not Have the Income Category at Entry and Gained the Income Category at Follow-up | Did Not Have the Income Category at Entry or at Follow-up | Total Adults (including those with No Income) |
|--|---|---|---|--|---|---|---|
| Number of Adults with Earned Income (i.e., Employment Income) | | | | | | | 0 |
| Average Change in Earned Income | | | | | | | |
| Number of Adults with Other Income | | | | | | | 0 |
| Average Change in Other Income | | | | | | | |
| Number of Adults Any Income (i.e., Total Income) | | | | | | | 0 |
| Average Change in Overall Income | | | | | | | |

Income decreases

Income stays the same

Income increases

E-snaps automatically calculates performance measure information at the end of each question. These columns measure the gain or increase of income in terms of number of person with increased income (Column 8), percentage of persons in the project with increased income and average dollar amounts gained (Column 9).

| Performance Measures: Adults who Gained or Increased Income from Entry to Follow-up/Exit | Performance Measures: Adults who Gained or Increased Income from Entry to Follow-up/Exit, Average Gain |
|--|--|
| 0 | 0% |
| | \$0 |
| 0 | 0% |
| | \$0 |
| 0 | 0% |
| | \$0 |

Validation for Table Q24b1 – Income Sources by Entry and Latest Status – reports on adult stayers

VALIDATION: THE “NUMBER OF ADULTS ANY INCOME” IN THE “TOTAL ADULTS” BOX MUST EQUAL THE NUMBER OF STAYERS WITH INCOME AT FOLLOW-UP ON Q24A. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT CORRECT.

Validation for Table Q24b2 – Income Sources by Entry and Exit – reports on adult leavers

VALIDATION: THE “NUMBER OF ADULTS ANY INCOME” IN THE “TOTAL ADULTS” BOX MUST EQUAL THE NUMBER OF LEAVERS WITH INCOME AT EXIT ON Q24A. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT CORRECT.

Q25 Cash Income (Sources and Number of Sources)

Project type: **ALL**

Q25 reports income sources separately for adults, children, or persons of unknown age. The HMIS Data Standards instruct that income must be collected for adults and all heads of household served by a project. Income received by or on behalf of a minor child should be recorded as part of household income under the Head of Household, unless the federal funder in the HMIS Program Specific Manual instructs otherwise. This does not mean the “Children” and “Age Unknown” columns will be all zeroes/blank, as some heads of household may be children or of unknown age.

Q25a1 reports how many **leavers** had each of the identified cash income sources recorded at exit for each adult or head of household.

Q25b1 reports how many **stayers** had each of the identified cash income sources recorded in the last assessment for each adult or head of household.

The rows are not totaled since persons may be recorded with more than one income source.

*** Type of Cash-Income Sources
Number of Leavers**

| | Total | Adults | Children | Age Unknown |
|------------------------------|--------------|---------------|-----------------|--------------------|
| Earned Income | 0 | | | |
| Unemployment Insurance | 0 | | | |
| SSI | 0 | | | |
| SSDI | 0 | | | |
| Veteran's Disability | 0 | | | |
| Private Disability Insurance | 0 | | | |
| Worker's Compensation | 0 | | | |
| TANF or Equivalent | 0 | | | |
| General Assistance | 0 | | | |
| Retirement (Social Security) | 0 | | | |
| Veteran's Pension | 0 | | | |
| Pension from Former Job | 0 | | | |
| Child Support | 0 | | | |
| Alimony (Spousal Support) | 0 | | | |
| Other Source | 0 | | | |

Q25a2 reports the number of **leavers** with no income, at least one income source, and missing income information recorded at exit.

Q25b2 reports the number of **stayers** with no income, at least one income source, and missing income information recorded in the last assessment recorded for each person.

*** Number of Cash-Income Sources
Number of Leavers**

| | Total | Adults | Children | Age Unknown |
|---------------------|--------------|---------------|-----------------|--------------------|
| No Sources | 0 | | | |
| 1 + Source(s) | 0 | | | |
| Don't Know/Refused | 0 | | | |
| Information Missing | 0 | | | |
| Total | 0 | 0 | 0 | 0 |

VALIDATION: FOR Q25A2 - THE TOTAL NUMBER OF LEAVERS WITH INCOME AT ENTRY AND EXIT MUST NOT EXCEED THE TOTAL NUMBER OF LEAVERS IDENTIFIED IN Q22A2.

VALIDATION: FOR Q25B2 - THE TOTAL NUMBER OF STAYERS WITH INCOME AT ENTRY AND FOLLOW UP MUST NOT EXCEED THE TOTAL NUMBER OF STAYERS IDENTIFIED IN Q22B2.

Q26 Non-cash Benefits (Sources and Number of Sources)

Project type: **ALL**

Q26 reports information on the type and number of non-cash benefit sources reported for adults, children, and persons with unknown age. Responses are reported separately for **leavers** and **stayers**. The HMIS Data Standards instruct that non-cash benefits must be collected for adults and all heads of household served by a project. This does not mean the “Children” and “Age Unknown” columns will be all zeroes/blank, as some heads of household may be children or of unknown age.

Q26a1 reports how many **leavers** had each of the identified non-cash benefit sources recorded at exit.

Q26b1 reports how many **stayers** had each of the identified non-cash benefit sources recorded in the last assessment for each person.

The rows are not totaled since persons may be reported in more than one non-cash benefit source.

| * Non-Cash Benefits Number of Leavers | | | | |
|--|--------------|---------------|-----------------|--------------------|
| | Total | Adults | Children | Age Unknown |
| Supplemental Nutritional Assistance Program | 0 | | | |
| MEDICAID Health Insurance | 0 | | | |
| MEDICARE Health Insurance | 0 | | | |
| State Children’s Health Insurance | 0 | | | |
| WIC | 0 | | | |
| VA Medical Services | 0 | | | |
| TANF Child Care Services | 0 | | | |
| TANF Transportation Services | 0 | | | |
| Other TANF-Funded Services | 0 | | | |
| Temporary Rental Assistance | 0 | | | |
| Section 8, Public Housing, Rental Assistance | 0 | | | |
| Other Source | 0 | | | |

Q26a2 reports the number of **leavers** with no non-cash benefits, at least one non-cash benefit source, or missing information recorded at exit for each adult or head of household.

Q26b2 reports the number of **stayers** with no non-cash benefits, at least one non-cash benefit source, and missing information recorded in the last assessment for each adult or head of household.

*** Number of Non-Cash Benefit Sources
Number of Leavers**

| | Total | Adults | Children | Age Unknown |
|---------------------|--------------|---------------|-----------------|--------------------|
| No Sources | 0 | | | |
| 1 + Source(s) | 0 | | | |
| Don't Know/Refused | 0 | | | |
| Information Missing | 0 | | | |
| Total | 0 | 0 | 0 | 0 |

VALIDATION:FOR Q26A2 - THE TOTAL NUMBER OF LEAVERS WITH NON-CASH BENEFITS AT ENTRY AND EXIT MUST NOT EXCEED THE TOTAL NUMBER OF LEAVERS IDENTIFIED IN Q22A2.

VALIDATION:FOR Q26B2 - THE TOTAL NUMBER OF STAYERS WITH NON-CASH BENEFITS AT ENTRY AND FOLLOW UP MUST NOT EXCEED THE TOTAL NUMBER OF STAYERS IDENTIFIED IN Q22B2.

Q27 Length of Participation

Project type: ALL

This question identifies the length of participation of persons served in the project based on their last episode of service/housing in the project. Participation accounts for all the days a person was in the project – even if some of those days occurred prior to the reporting period. For **leavers**, count the days from intake to the date of exit. For **stayers**, count the days from intake until the last day of the reporting period. The average and median days for both leavers and stayers is also reported.

Q27. Length of Participation

Instructions: [show]

*** Length of Participation by Exit status
Number of Persons**

| | Total | Leavers | Stayers |
|-------------------------------|----------------------|----------------------|----------------------|
| 30 days or less | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 31 to 60 days | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 61 to 180 days | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 181 to 365 Days | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 366 to 730 Days (1-2 Yrs) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 731 to 1,095 Days (2-3 Yrs) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 1,096 to 1,460 Days (3-4 Yrs) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 1,461 to 1,825 Days (4-5 Yrs) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| More than 1,825 Days (>5 Yrs) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Information Missing | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Total | <input type="text"/> | <input type="text"/> | <input type="text"/> |

*** Average and Median Length of Participation
in Days**

| | Average Length | Median Length |
|---------|-----------------------|----------------------|
| Leavers | <input type="text"/> | <input type="text"/> |
| Stayers | <input type="text"/> | <input type="text"/> |

VALIDATION: THE TOTAL NUMBER OF PERSONS MUST EQUAL THE TOTAL NUMBER OF PERSONS IN Q8. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

VALIDATION: THE TOTAL NUMBER OF LEAVERS WITH MUST EQUAL THE TOTAL NUMBER OF LEAVERS IDENTIFIED IN Q22A2. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

VALIDATION: THE TOTAL NUMBER OF STAYERS MUST EQUAL THE TOTAL NUMBER OF STAYERS IDENTIFIED IN Q22B2. E-SNAPS WILL PREVENT THE SUBMISSION OF YOUR APR IF THESE NUMBERS ARE NOT THE SAME.

Q29 Destination by Household

Project type: **ALL**

Q29 looks at the exit destinations recorded for each **leaver**. In each screen, record the number of leavers who exited to each type of destination, reported separately for persons in each household type.

Q29a1 reports leavers whose participation in the project was more than 90 days.

Q29a2 reports leavers whose participation in the project was 90 days or less.

| | Total | Without Children | With Children and Adults | With Only Children | Unknown Household Type |
|--|-------|------------------|--------------------------|--------------------|------------------------|
| Permanent Destinations | | | | | |
| Owned by client, no ongoing subsidy | 0 | | | | |
| Owned by client, with ongoing subsidy | 0 | | | | |
| Rental by client, no ongoing subsidy | 0 | | | | |
| Rental by client, VASH subsidy | 0 | | | | |
| Rental by client, other ongoing subsidy | 0 | | | | |
| PSH for homeless persons | 0 | | | | |
| Living with family, permanent tenure | 0 | | | | |
| Living with friends, permanent tenure | 0 | | | | |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Temporary Destinations | | | | | |
| Emergency shelter | 0 | | | | |
| Transitional housing for homeless persons | 0 | | | | |
| Staying with family, temporary tenure | 0 | | | | |
| Staying with friends, temporary tenure | 0 | | | | |
| Place not meant for human habitation | 0 | | | | |
| Safe Haven | 0 | | | | |
| Hotel or motel, paid by client | 0 | | | | |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Institutional Settings | | | | | |
| Foster care home or group foster care home | 0 | | | | |
| Psychiatric facility | 0 | | | | |
| Substance abuse or detox facility | 0 | | | | |
| Hospital (non-psychiatric) | 0 | | | | |
| Jail, prison, or juvenile detention facility | 0 | | | | |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Other Destinations | | | | | |
| Deceased | 0 | | | | |
| Other | 0 | | | | |
| Don't Know/Refused | 0 | | | | |
| Information Missing | 0 | | | | |
| Subtotal | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 0 | 0 |

Financial Information for CoC Programs

Go to Appendix 3 for information on reporting Financial Information on [SHP](#), [S+C](#), or [SRO](#) Programs

Q31a1 CoC Financial – Development

Report on all CoC Program funds expended during the operating year from this project award on the acquisition, rehabilitation, and new construction. If you had no expenses for these items or these items were not included in your grant application enter “0” in each field on the question.

Q31a1. Expenditures – Development Costs

Instructions: [show]

* CoC Program Funds Expended During the Operating Year – Development Costs

| <u>Expenditure Type</u> | <u>CoC Program Funds Expenditures</u> |
|-------------------------------|---------------------------------------|
| Acquisition | <input type="text"/> |
| Rehabilitation | <input type="text"/> |
| New Construction | <input type="text"/> |
| Development – Subtotal | <input type="text"/> |

Q31a2 CoC Financial – Services

Report on all CoC Program funds expended during the operating year from this project award on supportive services. If you had no expenses for these items or these items were not included in your grant application enter “0” in each field on the question.

Q31a2. CoC Expenditures – Supportive Services

Instructions: [show]

* CoC Program Funds Expended During the Operating Year – Supportive Services

| <u>Expenditure Type</u> | <u>CoC Program Funds Expenditures</u> |
|------------------------------------|---------------------------------------|
| Assessment of Service Needs | <input type="text"/> |
| Assistance with Moving Costs | <input type="text"/> |
| Case Management | <input type="text"/> |
| Child Care | <input type="text"/> |
| Education Services | <input type="text"/> |
| Employment Assistance | <input type="text"/> |
| Food | <input type="text"/> |
| Housing/Counseling Services | <input type="text"/> |
| Legal Services | <input type="text"/> |
| Life Skills | <input type="text"/> |
| Mental Health Services | <input type="text"/> |
| Outpatient Health Services | <input type="text"/> |
| Outreach Services | <input type="text"/> |
| Substance Abuse Treatment Services | <input type="text"/> |
| Transportation | <input type="text"/> |
| Utility Deposits | <input type="text"/> |
| Services – Subtotal | <input type="text"/> |

Q31a3 CoC Financial – HMIS

Report on all CoC Program funds expended during the operating year from this project award on HMIS. If you had no expenses for these items or these items were not included in your grant application enter “0” in each field on the question.

| Q31a3. CoC Expenditures – HMIS | |
|---|--------------------------------|
| Instructions: [show] | |
| * CoC Program Funds Expended During the Operating Year – HMIS | |
| Expenditure Type | CoC Program Funds Expenditures |
| Equipment (server, computers, printers) | <input type="text"/> |
| Software (software fees, user licenses, software support) | <input type="text"/> |
| Services (training, hosting, programming) | <input type="text"/> |
| Personnel (costs associated with staff) | <input type="text"/> |
| Space and operations | <input type="text"/> |
| HMIS - Subtotal | <input type="text"/> |

Q31a4 CoC Financial – Leasing, Rental Assistance, Operating, and Administration

Program Funds Expended - In the first part of Q31a4 report on all CoC funds expended during the operating year from this project award on leasing, rental assistance, operating, and administration costs listed on this form. If you had no expenses for an items or these items were not included in your grant application enter “0” in each field on the question.

| Q31a4. CoC Expenditures – Leasing, Rental Assistance, Operating, and Administration | |
|--|--------------------------------|
| Instructions: [show] | |
| * CoC Program Funds Expended During the Operating Year – Leasing, Rental Assistance Operating, & Admin | |
| Expenditure Type | CoC Program Funds Expenditures |
| Real Property Leasing | <input type="text"/> |
| Short-/Medium-term Rental Assistance | <input type="text"/> |
| Long-term Rental Assistance | <input type="text"/> |
| Operating Costs | <input type="text"/> |
| Administration | <input type="text"/> |
| Leasing, Rental Assistance, Operating, Admin – Subtotal | <input type="text"/> |

“Save” the information on Q31a4 and the grayed boxes in the second section of this question will populate with the information on CoC funds expended in the project as you reported on Q31a1, Q31a2 Q31a3. and Q31a4. (Note: The only way to correct information in the grayed boxes is to go back and correct it in the original response.)

Program Funds and Match Applicable - The second part of the question reports on the match funds expended for this project during the operating year. Complete the Cash Match and In-Kind Match lines. Match means the cash or in-kind support used to provide the required match level under HUD regulations as was indicated in your project application, technical submission, or amended budget. You must record all cash and in-kind match expended on this project. Under the CoC Program, HUD calculates match by summing the cash and in-kind match and dividing that by the “Total Expenses plus Admin” line item.

Note: Real property leasing does not require match. The amount expended on real property leasing will be calculated in the Subtotal, Total Expenses plus Admin and Total Expenditures and Match lines but WILL not be included in the Match % calculation. If you had match funds for leasing that were not required but were expended you may enter it.

*** CoC Program Funds and Match Applicable During the Operating Year – Totals**

| Total Expenses | CoC Funds |
|--------------------------------------|----------------------|
| Development | <input type="text"/> |
| Supportive Services | <input type="text"/> |
| Real Property Leasing | <input type="text"/> |
| Short-/Medium-term Rental Assistance | <input type="text"/> |
| Long-term Rental Assistance | <input type="text"/> |
| Operating Costs | <input type="text"/> |
| HMIS | <input type="text"/> |
| Subtotal | <input type="text"/> |
| Administration | <input type="text"/> |
| Total Expenses plus Admin | <input type="text"/> |
| Cash Match | <input type="text"/> |
| In-Kind Match | <input type="text"/> |
| Total Match | <input type="text"/> |
| Match % | <input type="text"/> |
| Total Expenditures and Match | <input type="text"/> |

“Save” the information on Q31a4 again and the Total Match, Match Percent and Total Expenditures and Match will automatically calculate.

Q34 Percent HUD McKinney-Vento Funding

Report the percentage that HUD McKinney-Vento funding (SHP, S+C and/or SRO) represents relative to your total project’s annual budget. Please note – this is not asking for a percentage of HUD funds to your total agency budget, but rather just the project budget that this grant is supporting. For example, if this project has a \$300,000 budget, and this grant provides \$100,000 annually, then the response to this question must be 33 percent.

Note: Q34 is not included in the APR for grants funded in FY2012 and beyond.

Q34. Percent HUD McKinney-Vento Funding

Instructions: [show]

* What percentage of this project’s annual budget (services, leasing, operation, HMIS, administration) is represented by HUD McKinney-Vento funding?

Performance

The recipients identified the performance measures appropriate for their type of grant in their Project Application beginning in grant year 2010. Beginning in March 2012 recipients will be required to report on the project’s performance in the APR. There are two screens that relate to performance, Q36 and Q37. On screen Q36 recipients report, by project type, their performance on HUD-defined standard performance measures. During the 2010 application process, recipients set performance goals for themselves in their Project Application. It is required that recipients complete the questions on Q36, and this data must come from your HMIS (or comparable database if you are a victim service provider).

Screen Q37 (Additional Performance Measures), is optional for most recipients. Screen Q37 is mandatory for recipients that meet one of the following criteria:

1. If the grant is a SHP Supportive Services Only (SSO) project that is neither a street outreach project nor a project with a housing-related goal. Recipients with these projects were required to establish at least one additional performance measure in their Project Application.
2. If the recipient opted to select an additional performance measure for its grant in the Project Application.

Q36: Standard Performance Measures

Each performance question will consist of a performance measure table. For recipients reporting on grants that contained performance measures in their Project Application, the APR questions will be pre-populated with the “targets” submitted on that application. However, if you are reporting on a grant that was awarded prior to the 2010 competition, you are only required to complete the performance measure table with zeroes but you must still complete the narrative section at the bottom of the screen.

| Performance Measure | Exhibit 2 Target # of persons who were expected to accomplish this measure | Exhibit 2 Target % of persons who were expected to accomplish this measure | Actual # of persons served by the project, as applicable to this measure | Actual # of persons who accomplished this measure | Actual % of persons who accomplished this measure | % Difference between Exhibit 2 Target and Actual Performance |
|---------------------|--|--|---|--|--|---|
| Measure | Populated from Exhibit 2 data | Populated from Exhibit 2 data | Recipient Completes | Recipient Completes | e-snaps Calculates | e-snaps Calculates |

Complete the table with the actual number of persons served by the project for which the measure is applicable, and the actual number of persons who accomplished the measure. These numbers are calculated as part of the APR generation, either as: 1) programmed in your HMIS system, 2) exported to the APR Generation Tool, or 3) from a comparable database for victim service providers. The performance numbers are to be consistent with the performance measured in earlier questions on the APR. For example, when reporting on the number of persons who exited to permanent housing, the numbers reported in the performance section must match the number of leavers reported in Q29 exiting to permanent destinations.

Performance Measures programmed into the HMIS system or generated from the APR Generation Tool are calculated as follows:

| Measure/Project Type | Performance Measure | Actual # of persons served by the project, as applicable to this measure | Actual # of persons who accomplished this measure |
|---|---|--|---|
| Measure 1 Housing Stability Project Type: Permanent Housing | The % of persons who remained in the permanent housing project as of the end of the operating year or exited to permanent housing (subsidized or unsubsidized). | All <u>persons</u> served by the project during the operating year. | The number of Stayers in the project PLUS the number of Leavers who exited to a <u>permanent housing</u> destination as indicated in Q29a1 plus Q29a2. |
| Measure 1 Housing Stability Project Type: Transitional Housing SSO – with housing goal | The % of persons who exited to permanent housing (subsidized or un-subsidized) during the operating year. | All <u>leavers</u> of the project during the operating year. | The number of leavers who exited to a <u>permanent housing destination</u> as indicated in Q29a1 plus Q29a2. |
| Measure 1 Housing Stability Project Type: SSO – Street Outreach | The % of persons placed into housing (ES, TH, SH, or PSH) as a result of the street outreach project during the operating year. | All <u>leavers</u> of the project during the operating year. | The number of leavers who exited to <u>emergency shelter, transitional housing for homeless persons, or permanent housing destinations</u> as indicated in Q29a1 plus Q29a2. |
| Measure 1 Housing Stability Project Type: Safe Haven | The % of persons who remained in the safe haven project as of the end of the operating year or exited to permanent housing (subsidized or unsubsidized). | All <u>persons</u> served by the project during the operating year. | The number of stayers in the project PLUS the number of persons who exited to a <u>permanent housing</u> destination as indicated in Q29a1 plus Q29a2. |
| Measure 2a Increased Income Project Type: Permanent Housing Safe Haven | The % of persons age 18 and older who maintained or increased their total income (from all sources) as of the end of the operating year or project exit. | All <u>adults</u> served by the project during the operating year. | The number of adults whose amount (\$) of <u>cash income from any source</u> remained the same or increased based on the persons income at intake and then at exit or if they remained housed at their most recent assessment. A reporting modification was made in October 2013, to allow adults who did not have a follow-up assessment in HMIS to be counted as “maintained income” for this measure. |

| Measure/Project Type | Performance Measure | Actual # of persons served by the project, as applicable to this measure | Actual # of persons who accomplished this measure |
|---|--|---|---|
| Measure 2a Increased Income Project Type: Transitional Housing SSO – with housing goal | The % of persons age 18 and older who increased their total income (from all sources) as of the end of the operating year or project exit. | All <u>adults</u> served by the project during the operating year. | The number of adults whose amount (\$) of <u>cash income from any source</u> increased based on the persons income at intake and then at exit or if they remained housed at their most recent assessment. |
| Measure 2b Increased Income Project Type: Permanent Housing | The % of persons age 18 through 61 who maintained or increased their earned income as of the end of the operating year or project exit. | All <u>persons ages 18 through 61</u> served by the project during the operating year. | The number of persons (ages 18-61) whose amount (\$) of <u>earned income</u> remained the same or increased based on the persons income at intake and then at exit or if they remained housed at their most recent assessment. A reporting modification was made in October 2013, to allow for adults without a follow-up assessment in HMIS to be counted also as “maintained income” for this measure. |
| Measure 2b Increased Income Project Type: Transitional Housing SSO – with housing goal | The % of persons age 18 through 61 who increased their earned income as of the end of the operating year or project exit. | All <u>persons ages 18 through 61</u> served by the project during the operating year. | The number of persons (ages 18-61) whose amount (\$) of <u>earned income</u> increased based on the persons income at intake and then at exit or if they remained housed at their most recent assessment. |
| Measure Service Linkage SSO- Street Outreach | Street outreach projects have the option of selecting multiple service linkage measures. The total persons from whom each measure is appropriate are leavers who entered the project with a specific physical or mental health condition, who were not receiving services for that condition at time of project entry. The persons who accomplished the outcome are to be those who had received services for the condition by the time they exited. | All <u>leavers</u> of the project during the operating year who entered the project with the disability/special need and indicated they were not receiving services at project entry. | The number of persons at exit who had the specific disability/special need and did not have services for that disability at intake but did at any later assessment or exit. |

HUD recognizes that the performance measurement questions on the APR are not structured in exactly the same way as the 2010 and 2011 Project Application questions, and that there may be other reasons

for changes between the expected performance levels and the actual levels. Therefore, for each performance question there is a short narrative section that enables recipients to account for any discrepancies between their planned and actual performance. For recipients that are reporting on a grant applied for prior to the 2010 competition, the narrative must reflect the extent to which the project performance is consistent with local expectations. While local expectations were not necessarily written down, HUD expects that communities have a general understanding of how well the recipient is connecting its project participants with housing and income sources and has developed expectations about the projects for which it is requesting funding. Recipients should report in this narrative section how their project is performing relative to past years and relative to unique expectations due to specific circumstances in communities (i.e., if a community was implementing a new service model, the recipient should report on the impact that this new service model had on project participants, relative to these performance measures).

*** Describe how your project performed relative to your expectations for its performance. For projects funded in the 2010 competition or a subsequent competition, describe the project’s performance relative to the target you set and provide an explanation for any discrepancies.**

Maximum Characters: 2000

Q36a Performance Measures – Permanent Housing Projects

Project type: **Permanent Housing**

Measure 1 – Housing Stability measures the number of persons who maintained housing within the project or obtained other permanent housing upon exit. Those persons who maintained housing are those who were housed on the last day of the operating year. Those persons who obtained other permanent housing upon exit are those persons who exited to permanent housing destinations.

| Performance Measure | Exhibit 2 Target # of persons who were expected to accomplish this measure | Exhibit 2 Target % of persons who were expected to accomplish this measure | Actual # of persons served by the program, as applicable to this measure | Actual # of persons who accomplished this measure | Actual % of persons who accomplished this measure | % Difference between Exhibit 2 Target and Actual Performance |
|-----------------------------|--|--|--|---|---|--|
| 1-Housing Stability Measure | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| 2a-Total Income Measure | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| 2b-Earned Income Measure | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |

In the Project Applications, recipients had the option of selecting the income measure most appropriate to the population they were proposing to serve. In the APR, report on the income measure selected at the time of application.

Measure 2a –Total Income measures the cash income, from all sources, that persons age 18 and over received as of the end of the operating year. The accomplishment percentage column measures the number of persons who maintained their income and those with an increase in actual dollar income

amount. For stayers the information comes from the persons' assessment closest to the end of the operating year and for leavers it is based on the assessment done at project exit. Report the number of persons served in the project through the end of the operating year and the number of persons who maintained or had an increase in income. Note that if someone entered with zero (0) income and maintained a zero (0) income these persons should not be included in the "actual number of persons who accomplished this measure." **OR**

Measure 2b – Increase Earned Income measures the cash income recorded as "earned income" (i.e., income from employment) for persons age 18 through age 61 as of the end of the operating year. The accomplishment column measures the number of persons who maintained their earned income and those with an increase in their earned income. For stayers the information comes from the persons' assessment closest to the end of the operating year and for leavers it is based on the assessment done at project exit. Report the number of persons served in the project through the end of the operating year and the number of persons who maintained or increased their earned income.

VALIDATION: ENTER "0" IN THE ROW IN E-SNAPS THAT YOU DID NOT SELECT TO REPORT ON FOR MEASURE 2.

VALIDATION: IF YOU ARE REPORTING ON A GRANT APPLIED FOR PRIOR TO 2010 ENTER "0" IN BOTH THE "TARGET #" AND "TARGET %" COLUMNS.

Q36b Performance Measures – Transitional Housing

Project type: **Transitional Housing**

Transitional Housing projects report on the same measures as Permanent Housing but in a slightly different way.

- The Housing Stability measure is based solely on persons who exit the project (i.e., leavers) to permanent housing destinations. Persons who are in residence as "stayers" are not measured in the performance measure until the point that they exit. Refer to Q36a on the prior page of this Guidebook for additional instructions.
- Both income performance measures are based solely on persons increasing their income. Maintaining income is not counted in the performance measure for Transitional Housing. Refer to Q36a on the prior page of this Guidebook for additional instructions.

Q36c Performance Measures – Supportive Services Only (Street Outreach)

Project type: **Street Outreach**

Measure 1a – Housing Stability measures the number of persons who obtained housing as a result of the street outreach project during the operating year. Report the number of persons served in the project through the end of the operating year and the number of persons who exited to Emergency Shelter, Transitional Housing, Permanent Housing, or a Safe Haven.

Measure 2a – Physical Disability

- Measure 2b – Developmental Disability
- Measure 2c – Chronic Health Condition
- Measure 2d – HIV/AIDS
- Measure 2e – Mental Health Condition
- Measure 2f – Substance Abuse

In the Project Application, recipients had the option of selecting the service linkage measurement(s) most appropriate to the population they were proposing to serve. In the APR, recipients report on the service linkage measure(s) selected at the time of application (not all recipients selected all service linkage measures for their grant). Each service linkage measurement records the number of persons who entered the street outreach project with an unmet service need associated with the specific condition (i.e., those who said “no” at project entry to receiving services or treatment for this condition) and those who received services for that specific condition by the time they exited the project. Complete all the service linkage measures that correspond to those selected in the Project Application.

| Performance Measure | Exhibit 2 Target # of persons who were expected to accomplish this measure | Exhibit 2 Target % of persons who were expected to accomplish this measure | Actual # of persons served by the program, as applicable to this measure | Actual # of persons who accomplished this measure | Actual % of persons who accomplished this measure | % Difference between Exhibit 2 Target and Actual Performance |
|---------------------|--|--|--|---|---|--|
| Measure 1 | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| Measure 2a | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| Measure 2b | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| Measure 2c | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| Measure 2d | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| Measure 2e | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |
| Measure 2f | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | 0% | 0% |

Q36d Performance Measures – Supportive Services Only (With Housing Outcomes)

Project type: Supportive Services Only – With Housing Outcomes

The Supportive Services Only projects which have housing outcomes as part of their project report on exactly the same measures as Transitional Housing. Refer to [Q36b](#) on the prior pages of this Guidebook for complete instructions.

Supportive Services Only projects which do not have street outreach or housing outcomes as part of their project will not report on Q36 and it will not be visible on the APR.

Q36e Performance Measures – Safe Haven

Project type: Safe Haven

Measure 1a – Housing Stability measures the number persons who maintained housing within the Safe Haven or obtained permanent housing upon exit. Report the number of persons served in the project through the end of the operating year and the number of persons who were housed on the last day of the operating year plus those who exited to permanent housing destinations.

Measure 1b – Increase Total Income measures the cash income, from all sources, that the resident received. The accomplishment percentage column measures the number of persons who maintained their income and those with an increase in actual dollar income amount. For stayers the information comes from the persons’ assessment closest to the end of the operating year and for leavers it is based on the assessment done at project exit. Report the number of persons served in the project through the end of the operating year and the number of persons who maintained or had an increase in income. Note that if someone entered with zero (0) income and maintained a zero (0) income these persons should not be included in the “actual number of persons who accomplished this measure.”

Q37 Additional Performance Measures

Project type: Supportive Services Only – With Housing Outcomes and recipients that identified an additional performance measure on their Project Application

SHP Services Only Projects that are neither a street outreach project nor a project with a housing-related goal were to select at least one performance measure appropriate to their project in their Project Application.

Additionally, recipients that identified an additional performance measure on their Project Application must report their progress on their additional performance measure in Q37.

Q40 Significant Program Accomplishments

Project type: ALL

Describe in a brief narrative form (no more than 2,000 characters) any significant accomplishments achieved by your project during the reporting period.

Q42 Additional Comments

Project type: ALL

Q42 is an optional question. Recipients may describe in a brief narrative (no more than 2,000 characters) any additional comments that they would like to describe or explain to HUD. For example if a recipient had a difference in the number of persons projected to be served and the number of persons actually served, use this box to explain the difference.

Submission Certification

Project type: **ALL**

Checking the certification button notifies HUD that the person named on this form has certified that all the information in the form is true and accurate. The Authorized Recipient Official must fill-in their name and title/position. Each authorizing official is electronically signing the APR after completion of all of the questions and prior to submission in *e-snaps* by checking the certification button. The Authorized Recipient Official is saying to HUD, by checking this certification, that all information reported in all questions of the APR is true and accurate.

Submission Certification

Instructions: [\[show\]](#)

* Name of Authorized Grantee Official:

* Title/Position:

I hereby certify that all the information stated herein is true and accurate. I understand that HUD will prosecute false claims and statements and that conviction may result in criminal and/or civil penalties (pursuant to 18 USC 1001, 1010, 1012; 31 USC 3729, 3802).

* Check for Certification:

Submission Summary

Project type: **ALL**

Submission Summary

| Part | Last Updated |
|-------------------------------------|-----------------|
| Confirmation of CoC APR Requirement | 06/02/2011 |
| Q1. Contact Information | Please Complete |

Review your submission summary information. When the “Last Updated” field shows a date, then the form was completed on that date and all required fields have been entered. If the words “Please Complete” appear it means that you have not completed one or more mandatory fields for that question. Click on the question name and you will be returned to the page to complete or correct information. An error message on the page requiring correction should appear to help guide you to the information that is missing or wrong. The error alert will also show in the “notes” at the end of the Submission Summary chart. If the “Last Updated” indicates “No Input Required” then either that question was not required for your APR or you do not have to update it, and you can move forward to submission without returning to that question.

| | |
|----------------|------|
| Back | Next |
| Export to PDF | |
| Get PDF Viewer | |
| Submit | |

Export your information to a PDF file for your review and for your records. [Tip: If you want percentages to show on the PDF report for your future use, make sure you have checked the “show percentage” box on each question you want to have percentages printed for.]

Press Submit (*e-snaps* will not allow you to submit unless all of the forms labeled “Please Complete” have been corrected.)

You have completed your APR!

Appendix – For SHP, S+C and SRO Programs funded prior to FY2012

Appendix 1: Pre FY2012 Grants – Steps Needed to Create an APR in *E-snaps*

1. To open an APR form in *e-snaps*, you will need to select “Funding Opportunity Registrations.”



2. Then select the “CoC Full Annual Performance Report” in the Funding Opportunity Name column by clicking on the icon 

| Funding Opportunity Registrations | | | | | | | | | | | | | | | | | | | | | | |
|---|------|------------------------------------|-----------------------|--------------|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| All | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V |
| Register | View | Funding Opportunity Name | Applicants Registered | Start Date | End Date | | | | | | | | | | | | | | | | | |
|  | | CoC Full Annual Performance Report | 1 | Jul 19, 2010 | Jun 20, 2015 | | | | | | | | | | | | | | | | | |

3. The registration screen will open. Click on “Back.”



4. Click on the “**Projects**” link. The “**Project**” screen will open.



5. Select the “**CoC Full Annual Performance Report**” as the “**Funding Opportunity Name**” and the screen will filter to only show APR choices.

Project Status:

Funding Opportunity Name:

6. Click on the  symbol and the “**Create a Project**” screen will open.



7. Complete your project name in the “**Applicant Project Name**” text box using the same name used for the project in the Exhibit 2 Project Application.

Create a Project

Funding Opportunity Name: CoC Full Annual Performance Report

*** Applicant:**

*** Applicant Project Name:**

Import Data From:

8. Click on the “**Import Data From**” drop down menu and all of the projects assigned to the applicant (the recipient) will appear. It is important you select the correct name and grant number for your submission.
- a. Select the grant name and grant number for the grant you are reporting on, which will enable basic information from the Project Application to be brought forward to the APR; OR
 - b. If you did not apply for the project you are creating an APR for in **e-snaps** select “none” from import data.

9. Click on **“Save.”** If you do not receive an error message, then continue by clicking on “Save & Back” to the next step (Step 10) below. If you do receive an error message indicating that the “selected Applicant has not completed their Application Profile,” then you must complete an Applicant Profile prior to accessing the APR in **e-snaps**. For instructions on how to complete your Applicant Profile, please refer to the [Project Applicant Profile Instructional Guide](#).
10. Click on the **“Submissions”** tab to open the submission filter screen.
11. Then click on the icon  next to the Project Name that you created in the step above.

Submissions Filters

Applicant Project Name: XYZ Community Housing

Date Submitted: On

Project Status: All Projects

Submission Version: Latest Version

Associate Type: Primary Applicant

| Submissions | | | | | | |
|---|--|--------------|--------------|-------------------|---------|----------------|
| Project Name Project Number | Funding Opportunity Name Step Name | Start Date | End Date | Associate Type | Version | Date Submitted |
|  XYZ Community Housing 104015 | CoC Full Annual Performance Report CoC Full APR - General | Jul 19, 2010 | Jun 20, 2015 | Primary Applicant | 1 | |

Appendix 2: Pre 2012 - Q3 Instructions

Program type and Component Type

For SHP Program Funding E-snaps will automatically populate the *Type of Grant* as SHP (Supportive Housing Program) if you applied for your grant in **e-snaps**. If you did not apply for the grant you are reporting on in **e-snaps** (i.e., it is an older grant) you will need to select SHP as the *Type of Grant*

E-snaps will automatically populate the *Component Type* as the same type of component the grant was applied for and awarded under of you applied for the grant through **e-snaps**. If you did not select the correct component type for your project. The *Component Type* is either:

- Homeless Management Information System (HMIS)
- Permanent Housing (PH)
- Safe Haven (SH)
- Supportive Services Only (SSO)
- Transitional Housing (TH)

If you are reporting on an HMIS grant you will complete Q3 and a few other screens in the APR-General form. When you have submitted the APR-General step **e-snaps** will generate an APR-HMIS step for you to complete in **e-snaps**.

If you are reporting on an SSO grant, once you save the form, you will be required to identify if your SSO grant is for street outreach, services with a housing related goal, or services only.

For S+C Program Funding *E-snaps* will automatically populate the *Type of Grant* as S+C (Shelter Plus Care) if you applied for your grant in *e-snaps*. If you did not apply for the grant you are reporting on in *e-snaps* (i.e., it is an older grant) you will need to select S+C as the *Type of Grant*

E-snaps will automatically populate the *Component Type* as the same type of component the grant was applied for and awarded under of you applied for the grant through *e-snaps*. If you did not select the correct component type for your project. The *Component Type* is:

- Project-based Rental Assistance (PRA)
- Project-based Rental Assistance with Rehabilitation (PRAR)
- Sponsor-based Rental Assistance (SRA)
- Single Room Occupancy (SRO)
- Tenant-based Rental Assistance (TRA)

For SRO Program Funding *E-snaps* will automatically populate the *Type of Grant* as SRO (Single Room Occupancy) if you applied for your grant in *e-snaps*. If you did not apply for the grant you are reporting on in *e-snaps* (i.e., it is an older grant) you will need to select SRO as the *Type of Grant*.

E-snaps will automatically populate the *Component Type* as the same type of component the grant was applied for and awarded under of you applied for the grant through *e-snaps*. If you did not select the correct component type for your project. The *Component Type* is:

- Single Room Occupancy (SRO)

Appendix 3: Financial Information – SHP, S+C and SRO

Q30 SHP Expenditures

Program SHP – Project type PH, TH, SSO, SH

Q30 is for SHP recipients only to report on cash match and SHP expenses for the operating year.

Match means the cash used to provide the required match level under HUD regulations as was indicated in your Project Application, Technical Submission, or amended budget. If your grant application exceeded the amount of match required for the project, you must record all cash match expended that is at least equal to the amount you indicated in your Project Application or your amendment.

The question is divided into four sections for ease of entry: development costs; supportive services costs; HMIS costs; and leasing/operating/administration. Each of your SHP expense section subtotals must tie back to the funds drawn during the reporting period from LOCCS.

Development Expenses:

Q30a1. In the first column, report on all SHP funds expended during the reporting period on the acquisition, rehabilitation, and new construction. In the second column, report all cash matching funds expended during the reporting period in these same line items. If you had no expenses enter “0” in each field on the question.

SHP and Cash Match Expenditures During the Operating Year - Development Costs

| Expenditure Type | SHP Funds | Cash Match | Match % | Total Expenditures |
|-------------------------------|-----------|------------|---------|--------------------|
| Acquisition | | | 0% | \$0.00 |
| Rehabilitation | | | 0% | \$0.00 |
| New Construction | | | 0% | \$0.00 |
| Development - Subtotal | \$0.00 | \$0.00 | 0% | \$0.00 |

Supportive Services Expenses:

Q30a2. Report all SHP funds expended during the reporting period on supportive services. Cash match does not require a row by row itemization. In the row titled “Cash Match Expended,” report all matching funds expended on supportive services during the reporting period.

SHP and Cash Match Expenditures During the Operating Year - Supportive Services

| Expenditure Type | SHP Funds | Cash Match | Match % | Total Expenditures |
|-----------------------------------|-----------|------------|---------|--------------------|
| Outreach | | | | |
| Case management | | | | |
| Life skills (not case management) | | | | |
| Alcohol and drug abuse services | | | | |
| Mental health services | | | | |
| AIDS-related services | | | | |
| Other health care services | | | | |
| Education | | | | |
| Housing placement | | | | |
| Employment assistance | | | | |
| Child care | | | | |
| Transportation | | | | |
| Legal | | | | |
| Other | | | | |
| Services - Subtotal | \$0.00 | | | |
| Cash Match Expended | | | 0% | \$0.00 |

HMIS Expenses:

Q30a3. Report all SHP funds expended during the reporting period on HMIS. Cash match does not require a row by row itemization. In the row titled “Cash Match Expended” report all matching funds expended on HMIS during the reporting period.

*** SHP and Cash Match Expenditures During the Operating Year – HMIS**

| Expenditure Type | SHP Funds | Cash Match | Match % | Total Expenditures |
|---|----------------------|----------------------|---------|--------------------|
| Equipment (server, computers, printers) | <input type="text"/> | <input type="text"/> | | |
| Software (software fees, user licenses, software support) | <input type="text"/> | <input type="text"/> | | |
| Services (training, hosting, programming) | <input type="text"/> | <input type="text"/> | | |
| Personnel (costs associated with staff) | <input type="text"/> | <input type="text"/> | | |
| Space and operations | <input type="text"/> | <input type="text"/> | | |
| Stipends to agencies | <input type="text"/> | <input type="text"/> | | |
| Other (please specify below) | <input type="text"/> | <input type="text"/> | | |
| | <input type="text"/> | <input type="text"/> | | |
| HMIS - Subtotal | \$0.00 | | | |
| Cash Match Expended | | <input type="text"/> | 0% | \$0.00 |

Leasing, Operating and Administration Expenses

Q30a4. Report all SHP funds expended during the reporting period on real property leasing. No match is required for leasing. However, if you generated other funding for leasing HUD is interested in the amount expended; please show that amount in the “cash match” column.

Report all SHP funds expended during the reporting period on operations. In the second column, report all matching funds expended on operations during the reporting period.

Report all SHP funds expended during the reporting period on administration. No match is required for administration. However, if you generated other funding for administration HUD is interested in the amount expended, please show that amount in the “cash match” column.

Q30a4. SHP Expenditures – Leasing, Operating, and Administration

Instructions: [show]

SHP and Cash Match Expenditures During the Operating Year - Leasing, Operating, & Admin

| Expenditure Type | SHP Funds | Cash Match | Match % | Total Expenditures |
|---|----------------------|----------------------|---------|--------------------|
| Real Property Leasing | <input type="text"/> | <input type="text"/> | 0% | \$0.00 |
| Operating Costs | <input type="text"/> | <input type="text"/> | 0% | \$0.00 |
| Administration | <input type="text"/> | <input type="text"/> | 0% | \$0.00 |
| Leasing, Operating, Admin - Subtotal | \$0.00 | \$0.00 | | \$0.00 |

After entering expenditure data in Q30a4, click “**Save.**” The subtotals from each of the previously completed budget components in 30a1-30a4 will then be reflected in the “Totals” table provided below the “Leasing, Operating, and Administration” data entry table.

SHP and Cash Match Expenditures During the Operating Year - Totals

| Total SHP Expenses | SHP Funds | Cash Match | Match % | Total Expenditures |
|--------------------------------|------------------|-------------------|----------------|---------------------------|
| Development | \$0.00 | \$0.00 | 0% | \$0.00 |
| Supportive Services | \$0.00 | | 0% | \$0.00 |
| Real Property Leasing | | | 0% | \$0.00 |
| Operating Expenses | | | 0% | \$0.00 |
| HMIS | \$0.00 | | 0% | \$0.00 |
| SHP Expenses - Subtotal | \$0.00 | \$0.00 | | \$0.00 |
| Administration | | | 0% | \$0.00 |
| Total Expenses | \$0.00 | \$0.00 | | \$0.00 |

Q31 Shelter Plus Care Expenditures and Match

Program S+C – Project type PH

Indicate if the grant is completing its initial (first) grant term and **“Save”** the screen. (The first grant term for a S+C Grant is generally 5 years.) If **“yes”** was selected then an additional reporting question will show on the bottom of the screen asking for the total dollar amount of match for the entire grant term (cumulative over the life of the grant).

Report all of the Shelter Plus Care funds expended during the reporting period.

- Under Rental Assistance, report all S+C funds expended on rental assistance including: rent, deposits, and damage payments, as is allowed under S+C regulation.
- Under Administration, report all S+C funds expended on administration that was drawn during the reporting period.

Supportive Services Match is reported in the same format as was in the exhibit of your grant application. Report the value of all services that can be counted as match that you received for the S+C program residents associated with this grant and for which you have documented match value during the reporting period.

Every box on these forms is a required field. If you do not have a line item in your grant, record a **“0”** in each box associated with that expense.

If **“yes”** is selected for the question **“Is this grant completing its initial grant term?”** then the **“Total match for the grant”** field will appear and be a required field.

Q31. S+C Expenditures and Value of Services

Instructions: [show]

* Is this grant completing its initial grant term?
Click save to update form.

S+C and Documented Services Match During the Operating Year

| | Expenditure Amount |
|-------------------------------|---------------------------|
| Rental Assistance | <input type="text"/> |
| Administration | <input type="text"/> |
| Total S+C Expenditures | \$0.00 |

Value of Supportive Services Received by S+C Clients During the Operating Year

| Documented Services Match | Value (\$) |
|--|----------------------|
| Outreach | <input type="text"/> |
| Case management | <input type="text"/> |
| Life skills (outside of case management) | <input type="text"/> |
| Alcohol and drug abuse services | <input type="text"/> |
| Mental health services | <input type="text"/> |
| AIDS-related services | <input type="text"/> |
| Other health care services | <input type="text"/> |
| Education | <input type="text"/> |
| Housing placement | <input type="text"/> |
| Employment assistance | <input type="text"/> |
| Child care | <input type="text"/> |
| Transportation | <input type="text"/> |
| Legal | <input type="text"/> |
| Other | <input type="text"/> |
| Total documented services match | \$0.00 |

*

Total match for the grant

Q33 SRO Value of Services Received

Program SRO – Project type SRO

In this question, SRO recipients must document the value of supportive services received by homeless persons residing in the SRO during the reporting period.

Every box on this form is a required field. If you do not have a line item in your grant, record a “0” in each box associated with that expense.

Value of Supportive Services Received by SRO Clients During the Operating Year

| Supportive Service Match | Value (\$) |
|--|----------------------|
| Outreach | <input type="text"/> |
| Case management | <input type="text"/> |
| Life skills (outside of case management) | <input type="text"/> |
| Alcohol and drug abuse services | <input type="text"/> |
| Mental health services | <input type="text"/> |
| AIDS-related services | <input type="text"/> |
| Other health care services | <input type="text"/> |
| Education | <input type="text"/> |
| Housing placement | <input type="text"/> |
| Employment assistance | <input type="text"/> |
| Child care | <input type="text"/> |
| Transportation | <input type="text"/> |
| Legal | <input type="text"/> |
| Other | <input type="text"/> |
| Total | \$0.00 |