

# Housing Opportunities for Persons With AIDS (HOPWA) Program

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

OMB Number 2506-0133 (Expiration Date: 11/30/2023)

The CAPER report for HOPWA formula grantees provides annual information on program accomplishments that supports program evaluation and the ability to measure program beneficiary outcomes as related to: maintain housing stability; prevent homelessness; and improve access to care and support. This information is also covered under the Consolidated Plan Management Process (CPMP) report and includes Narrative Responses and Performance Charts required under the Consolidated Planning regulations. Reporting is required for all HOPWA formula grantees. The public reporting burden for the collection of information is estimated to average 41 hours per manual response, or less if an automated data collection and retrieval system is in use, along with 60 hours for record keeping, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD's requirements for reports submitted by HOPWA formula grantees are supported by 42 U.S.C. § 12911 and HUD's regulations at 24 CFR § 574.520(a). Grantees are required to report on the activities undertaken only, thus there may be components of these reporting requirements that may not be applicable. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a valid OMB control number. While confidentiality is not assured, HUD generally only releases this information as required or permitted by law.

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

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

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

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

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

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

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

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

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

#### Definitions

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Live-In Aide:** A person who resides with the HOPWA Eligible Individual and who meets the following criteria: (1) is essential to the care and wellbeing of the person; (2) is not obligated for the support of the person; and (3) would not be living in the unit except to provide the necessary supportive services. See 124 CFR 5.403 and the HOPWA Grantee Oversight Resource Guide for additional reference.

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

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

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

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

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

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

requirements on program income at 2 CFR 200.307.

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

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

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

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

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

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

**Transgender:** Transgender is defined as a person who identifies with, or presents as, a gender that is different from the person's gender assigned at birth.

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

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

OMB Number 2506-0133 (Expiration Date: 11/30/2023)

### Part 1: Grantee Executive Summary

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

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

HUD Grant Number		Operating Year for this report					
MNH20-F999	From (mm	/dd/yy) 10/01/20	To (mm/c	<i>ld/yy</i> ) 09/30/21			
Grantee Name		<u> </u>					
Minnesota							
Business Address	400 Wabasha St. N						
City, County, State, Zip	St. Paul	Ramsey		MN	55102		
<b>Employer Identification Number (EIN) or</b>	41-1599130						
Tax Identification Number (TIN)							
DUN & Bradstreet Number (DUNs):	878895093		System for Award Management (SA Is the grantee's SAM status current				
Congressional District of Grantee's Business Address	District 4		·				
*Congressional District of Primary Service Area(s)	N/A						
*City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Cities:		Counties:				
Organization's Website Address www.mnhousing.gov		Is there a waiting list(s) for HOPWA Housing Subsidy Assistance Services in the Grantee Service Area? ☐ Yes ☐ No  If yes, explain in the narrative section what services maintain a waitilist and how this list is administered.			0		

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

# 2. Project Sponsor Information

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

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

Project Sponsor Agency Name		Parent Company Name, if applicable			
Rainbow Health MN		N/A			
Name and Title of Contact at Project Sponsor Agency	Ken Oltman, EPCEA and Transportation Manager				
Email Address	Ken.Oltman@rainbowhealth.org				
Business Address	2577 Territorial Rd				
City, County, State, Zip,	St.Pul, Ramsey, MN 55114				
Phone Number (with area code)	612-373-2429				
Employer Identification Number (EIN) or Tax Identification Number (TIN)	41-152-4746		Fax Number 612-341-38	er (with area code)	
DUN & Bradstreet Number (DUNs):	154461743		012 3 11 00		
Congressional District of Project Sponsor's Business Address	District 4				
Congressional District(s) of Primary Service Area(s)	District 1 District 2 Dis	strict 6 District 7 Distr	ict 8		
City(ies) <u>and</u> County(ies) of Primary Service Area(s)	Aitkin, Becker, Beltrami, Benton, Big S Brown, Carlton, Cass, Chippewa, Clay, Cook, Cottonwood, Crow Wing, Dodge Faribault, Fillmore, Freeborn, Goodhue Hubbard, Itasca, Jackson, Kanabec, Ka Koochiching, Lac qui Parle, Lake, Lake Sueur, Lincoln, Lyon, McLeod, Mahno Martin, Meeker, Mille Lacs, Morrison, Nicollet, Nobles, Norman, Olmsted, O Pennington, Pine, Pipestone, Polk, Pope Redwood, Renville, Rice, Rock, Roseat Louis, Stearns, Steele, Stevens, Swift, T		eker, Beltrami, Benton, Big Stone, Blue Earth, clton, Cass, Chippewa, Clay, Clearwater, onwood, Crow Wing, Dodge, Douglas, Fillmore, Freeborn, Goodhue, Grant, Houston, tasca, Jackson, Kanabec, Kandiyohi, Kittson, tag, Lac qui Parle, Lake, Lake of the Woods, Letoln, Lyon, McLeod, Mahnomen, Marshall, teker, Mille Lacs, Morrison, Mower, Murray, tobles, Norman, Olmsted, Otter Tail, Pine, Pipestone, Polk, Pope, Red Lake, Renville, Rice, Rock, Roseau, Sibley, St. rns, Steele, Stevens, Swift, Todd, Traverse, Wadena, Waseca, Watonwan, Wilkin, Winona,		
Total HOPWA contract amount for this Organization for the operating year	\$280,592		•		
Organization's Website Address  www.rainbowhealth.org					
	Yes □ No	Does your organization	on maintain	a waiting list? ☐ Yes ☐ No	
Please check if yes and a faith-based organization. □ Please check if yes and a grassroots organization. □		If yes, explain in the narrative section how this list is administered.			

#### 5. Grantee Narrative and Performance Assessment

a. Grantee and Community Overview The Greater MN Housing program staff have and are currently providing ongoing in depth training to Greater MN HIV Providers to ensure they have the knowledge and understanding of the program to increase the clients accessing the program which will increase the number of clients accessing the program and the financial spending of the program.

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

Since 1999, Minnesota Housing has received an annual allocation of HOPWA funds from HUD to provide housing assistance and support services to people outside the 13-county Twin Cities metro area (which is served through a grant to the City of Minneapolis). Minnesota Housing received the HOPWA 2020 allocation of \$252,520 and HOPWA-CV grant of \$36,749. Rainbow Health (formerly JustUs Health), the sole project sponsor, has administered HOPWA funds since 2001 to serve eligible households throughout Greater Minnesota with emergency short-term rent, mortgage and utility payments (STRMU). Rainbow Health works collaboratively with a variety of community organizations and receives referrals from the Rural AIDS Action Network (RAAN), Mayo HIV case management program and their own Duluth Case Management program, as well as local county social service providers. HOPWA STRMU assistance is administered as the Greater Minnesota Housing Assistance Program through Rainbow Health's Every Penny Counts<sup>TM</sup> Emergency Financial Assistance services. This past operating year, Rainbow Health served 178 households (exceeding their goal of 175), 323 individuals in 44 of the 76 counties in Greater Minnesota. HOPWA funds are used to assist people living with HIV and their families in Greater Minnesota to prevent homelessness through the provision of STRMU payments. Of the 178 households JustUs served in the past operating year, 52% of assisted households had income below 30 percent of area median income and 36% had incomes between 30-50% area median income. Median annual household income of \$20,568 (7% decrease from 2020).

Case managers or service providers refer most applicants for emergency housing assistance. As part of the application process, clients are asked to work with their case managers to strategize how they will be able to maintain their housing. 89% are temporarily stable but likely in need of additional STRMU to maintain their current housing. Of the 178 households assisted with HOPWA this year, 158 also received short-term assistance the prior year, and 132 the two prior years. This may include up to three months of rent or mortgage assistance, and/or utility assistance, particularly as home heating costs during the winter in Minnesota have risen and can put a low-income household at risk of experiencing homelessness. Given the precarious housing situations of the households served, the new barriers to health and stability brought on by the pandemic and additional funds received through the HOPWA 2020 and HOPWA-CV allocations, Rainbow Health revised their assistance caps up to three months of assistance. Funding through HOPWA plays a significant role in helping persons living with HIV/AIDS and their families living in Greater Minnesota maintain safe and affordable housing. When persons living with HIV/AIDS have safe and affordable housing they improve their access to health care and other support services.

Following priorities set by the Minnesota HIV Housing Coalition, which acts as an advisory group to make recommendations for HOPWA funding, renewals for ongoing programs receive funding priority.

The principles that guide the work of the Minnesota HIV Housing Coalition are to:

- Improve access to housing for people living with HIV/AIDS,
- Expand the range of housing options for people living with HIV/AIDS,
- Continue Quality Improvement provide housing and services based on promising best practices, and
- Provide advocacy and education.

Minnesota Housing will continue to administer HOPWA funds for Greater Minnesota in cooperation with the Minnesota HIV Housing Coalition. Rainbow Health will continue to provide emergency housing assistance through HOPWA in Greater Minnesota in the current grant term. Minnesota is experiencing an outbreak of HIV concentrated in the Twin Cities Metro area as well as in Duluth among those who use intravenous drugs and are living in encampments. Minnesota Housing is exploring expansion of HOPWA eligible activities to be responsive to the housing needs for persons living with HIV across the state. Minnesota Housing will issue a competitive RFP for HOPWA funds in summer 2022 for the 2022 allocation.

### b. Annual Performance under the Action Plan

Provide a narrative addressing each of the following four items:

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

From October 1, 2020 to September 30, 2021, the Rainbow Health Greater Minnesota Emergency Housing Assistance Program provided assistance to 178 individuals/households utilizing HOPWA funds. This program helped recipients in 44 of the 76 Greater Minnesota Counties. These funds were used to assist individuals with emergency mortgage, utilities and rent. We were on target for number of clients served and we utilized all of the contract funding for the Greater MN Emergency Grant. We have continued in our efforts to work with service providers throughout the state including Mayo Clinic, Rainbow Health Duluth office and the Rural AIDS Action Network (RAAN). The Emergency Assistance Manager provides training on how to access Greater Minnesota Emergency Financial program. These trainings were provided to both service providers and potential recipients.

In regards to the CARES Act funding we received, we have had 8 clients use these funds between April 1, 2021 and August 31, 2021. We are working with Minnesota Housing to redefine the guidelines for this funding to better meet the needs of clients in Greater MN and utilize these funds.

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

Medical case managers or social service providers refer the vast majority of clients for emergency assistance. As part of the application process, clients are asked to work with their case managers to strategize how they will be able to maintain their housing. Sometimes this is as simple as just getting through a temporary financial shortage, other times it might include strategies such as increasing income through employment, sharing a home, seeking more affordable housing or securing other available benefits. Funding through HOPWA plays a significant role in helping HIV positive recipients and their families living in Greater Minnesota maintain safe and affordable housing. Stable housing is a major factor in reducing new HIV infections, significantly improves physical and emotional health, often allowing individuals to reach viral suppression, which means they are no longer able to transmit HIV to another person. Affordable housing for HIV positive people is key in ending HIV. From 1/1/2020 to 12/31/20, Rainbow Health served 1,922 unduplicated clients during that timeframe and were at 96% Retained in Care and 93% Virally Suppressed. We are targeting those clients who are below these percentages to work with them to improve their retention in care and viral suppression rates. Since we have been underspending of our Greater MN Housing funds the past couple of years, we made adjustments as of Oct. 1, 2020 in hopes of better utilizing our funds we increased the number of accessed that a client could access from 2 to 3 for rent and mortgages and/or utilities. This change did increase our funding expenditure and allowed us to utilize all of the funding that we were awarded. When looking at the clients we served, 92 of 178 were at the 30% or below of AMI and 64 of the 178 were at 50% or below of AMI so we are serving definitely serving the target population of 50% or less for AMI.

Due to COVID-19 most HIV providers largely maintained working remotely. This allowed for continued contact cleints and services being provided to individuals living with HIV throughout MN. The Greater MN Housing Assistance program has continued to have all of their client forms and financial assistance program application materials available in text fillable form

thus allowing providers and clients to complete all of these forms online and email them to the HIV providers and Rainbow Health staff directly.

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

The Greater MN Housing program staff have and are currently providing ongoing in depth training to Greater MN HIV Providers to ensure they have the knowledge and understanding of the program to increase the clients accessing the program which will increase the number of clients accessing the program and the financial spending of the program.

The Greater Minnesota Housing Assistance Program works with the State's Ryan White Part B funder. Rainbow Health is also a member of the HIV Housing Coalition,

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

### c. Barriers and Trends Overview

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

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

The EPCEA program has continued to utilize a system to prioritize requests monthly to ensure that funds are available throughout the contract year. However, the number and amount of requests often did not exceed the monthly allotted funds so most eligible financial assistance requests were honored. The funding that we are awarded helps many individuals in Greater Minnesota however the need for financial assistance continues. On average about 20 to 30 individuals/households receive assistance each month. There continues to be an increase in the number of HIV+ people residing in Greater Minnesota. Households served continue to struggle with limited financial resources including fixed incomes, access to supportive services, lack of transportation, limited HIV medical care, medical expenses, and lack of affordable housing. Some of the clients that we work with have poor credit, rental or criminal histories, chemical and mental health issues, and face more discrimination based on their HIV status, race, sexual orientation, etc due to the rural areas they live in. All of these barriers hinder individuals from finding and/or maintaining their housing. Many of these barriers are across the board for this population whether they live in Greater MN or the Metropolitan area, however some of these barriers are more prominent in Greater MN. At times there may be more affordable housing or Section 8 openings, but they are generally located in small rural towns that have limited or no basic needs amenities, supportive resources, medical care, especially HIV medical care or transportation services, thus these available housing opportunities are not great options for a majority of the HIV positive clients that we serve.

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

☐ HOPWA/HUD Regulations	☐ Planning	□ Housing Availability	☐ Rent Determination and Fair Market Rents
☐ Discrimination/Confidentiality	Multiple Diagnoses	☐ Eligibility	☐ Technical Assistance or Training
	□ Credit History	⊠ Rental History	☑ Criminal Justice History
☐ Housing Affordability	☐ Geography/Rural Access	☐ Other, please explain further	

Currently Hennepin County Ryan White and the U of M are conducting a needs assessment with HIV providers to look at unmet needs in these areas: housing, food, emergency assistance and ADAP (drug assistance) and how additional funding could assist in overcoming some barriers and promote greater HIV health for those who receive assistance. This is just in its initial phase and it is unclear when the results will be released.

3. Identify any evaluations, studies, or other assessments of the HOPWA program that are available to the public.
The Minnesota Department of Health's HIV/AIDS 2020 Prevalence and Mortality Report indicates that there are 1,683 persons
or 18% of Minnesota's total population of persons living with HIV/AIDS outside of the seven-county metropolitan area. Almost
all persons living in Greater Minnesota with HIV/AIDS are currently housed. Thus the predominant need met by the Minnesota
HOPWA funds helps ensure that this population remains stably housed by providing emergency assistance for mortgage, rent
and utilities payments, aligned with appropriate support services.

# PART 2: Sources of Leveraging and Program Income

### 1. Sources of Leveraging

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

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

A. Source of Leveraging Chart

[1] Source of Leveraging	[2] Amount of Leveraged Funds	[3] Type of Contribution	[4] Housing Subsidy Assistance or Other Support
Public Funding			
Ryan White-Housing Assistance	\$73,057	Rental Assistance	<ul><li>☐ Housing Subsidy Assistance</li><li>☒ Other Support</li></ul>
Ryan White-Other	\$64,986	Utility, medical, insurance and food assistance	☐ Housing Subsidy Assistance ☐ Other Support
Housing Choice Voucher Program			<ul><li>☐ Housing Subsidy Assistance</li><li>☐ Other Support</li></ul>
Low Income Housing Tax Credit			<ul><li>☐ Housing Subsidy Assistance</li><li>☐ Other Support</li></ul>
НОМЕ			☐ Housing Subsidy Assistance ☐ Other Support
Continuum of Care			☐ Housing Subsidy Assistance ☐ Other Support
Emergency Solutions Grant			☐ Housing Subsidy Assistance ☐ Other Support
Other Public:			☐ Housing Subsidy Assistance ☐ Other Support
Other Public:			☐ Housing Subsidy Assistance ☐ Other Support
Other Public:			☐ Housing Subsidy Assistance ☐ Other Support
Other Public:			☐ Housing Subsidy Assistance ☐ Other Support
Other Public:			☐ Housing Subsidy Assistance ☐ Other Support
Private Funding			
Grants			☐ Housing Subsidy Assistance ☐ Other Support
In-kind Resources			☐ Housing Subsidy Assistance ☐ Other Support
Other Private:			☐ Housing Subsidy Assistance ☐ Other Support
Other Private:			☐ Housing Subsidy Assistance ☐ Other Support
Other Funding	1		
Grantee/Project Sponsor (Agency) Cash			☐ Housing Subsidy Assistance ☐ Other Support
Resident Rent Payments by Client to Private Landlord			
TOTAL (Sum of all Rows)	\$138,043.00		

### 2. Program Income and Resident Rent Payments

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

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

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

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

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

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

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

# PART 3: Accomplishment Data Planned Goal and Actual Outputs

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

1. HOPWA Performance Planned Goal and Actual Outputs

1. 1	IOPWA Performance Planned Goal and Actual Outputs						
		[1] Output: Households		[2] Outpu	t: Funding		
		НОН			everaged		
	HOPWA Performance	Assis	tance	Ho	useholds	HOPW	A Funds
			h		d.	0	f.
	Planned Goal	a.	b.	c.	u.	e.	
	and Actual	Goal	Actual	Goal	Actual	HOPWA	Budget HOPWA Actual
	HOPWA Housing Subsidy Assistance	[1	Outp	nt: Hon	seholds	[2] Outpu	it: Funding
	Tenant-Based Rental Assistance	L	Jourp	11. 1104	Scholas	[2] Outpu	ti. I unumg
2a.	Permanent Housing Facilities: Received Operating Subsidies/Leased units (Households Served)						
2b.	Transitional/Short-term Facilities: Received Operating Subsidies/Leased units (Households Served) (Households Served)						
	Permanent Housing Facilities: Capital Development Projects placed in service during the operating year (Households Served)						
	Transitional/Short-term Facilities: Capital Development Projects placed in service during the operating year (Households Served)						
4.	Short-Term Rent, Mortgage and Utility Assistance	175	178	100- 120	117	\$277,508	\$247,469.25
5.	Permanent Housing Placement Services						
6.	Adjustments for duplication (subtract)						
	Total HOPWA Housing Subsidy Assistance (Columns a – d equal the sum of Rows 1-5 minus Row 6; Columns e and f equal the sum of Rows 1-5)						
	Housing Development (Construction and Stewardship of facility based housing)	[1]	Output	: Housi	ing Units	[2] Outpu	t: Funding
	Facility-based units; Capital Development Projects not yet opened (Housing Units)						J
	Stewardship Units subject to 3- or 10- year use agreements						
	Total Housing Developed (Sum of Rows 8 & 9)						
	Supportive Services	[1	1] Outpi	ıt: Hous	seholds	[2] Outpu	t: Funding
	Supportive Services provided by project sponsors that also delivered <u>HOPWA</u> housing subsidy assistance						
	Supportive Services provided by project sponsors that only provided supportive services.						
12.	Adjustment for duplication (subtract)						
	Total Supportive Services (Columns a – d equals the sum of Rows 11 a & b minus Row 12; Columns e and f equal the sum of Rows 11a & 11b)						
	Housing Information Services	[	1] Outp	ut: Hou	seholds	[2] Outpu	it: Funding
14.	Housing Information Services						
15.	Total Housing Information Services						

	Grant Administration and Other Activities	[1] Output: Households		[2] Output: Funding		
16.	Resource Identification to establish, coordinate and develop housing assistance resources					
17.	Technical Assistance (if approved in grant agreement)					
18.	Grantee Administration (maximum 3% of total HOPWA grant)				\$8,677	\$8,677
19.	Project Sponsor Administration (maximum 7% of portion of HOPWA grant awarded)				\$3084	\$3187.05
20.	Total Grant Administration and Other Activities (Sum of Rows 16 – 19)				\$11,761	\$11864.05
	Total Expended					HOPWA Funds
					Budget	Actual
21.	Total Expenditures for operating year (Sum of Rows 7, 10, 13, 15, and 20)				\$289,269	\$259,333.30

# 2. Listing of Supportive Services

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

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

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

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

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

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

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

Н	ousing Subsidy Assistance Categories (STRMU)	[1] Output: Number of <u>Households</u> Served	[2] Output: Total HOPWA Funds Expended on STRMU during Operating Year
a.	Total Short-term mortgage, rent and/or utility (STRMU) assistance	178	\$231,073.76
b.	Of the total STRMU reported on Row a, total who received assistance with mortgage costs ONLY.	16	\$21,915.94
c.	Of the total STRMU reported on Row a, total who received assistance with mortgage and utility costs.	17	\$28,359.46
d.	Of the total STRMU reported on Row a, total who received assistance with rental costs ONLY.	76	\$103,888.00
e.	Of the total STRMU reported on Row a, total who received assistance with rental and utility costs.	42	\$68,404.54
f.	Of the total STRMU reported on Row a, total who received assistance with utility costs ONLY.	27	\$8505.82
g.	Direct program delivery costs (e.g., program operations staff time)		\$15,104.50

# Part 4: Summary of Performance Outcomes

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

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

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

A. Permanent Housing Subsidy Assistance

	[1] Output: Total Number of Households Served	[2] Assessment: Number of Households that Continued Receiving HOPWA Housing Subsidy Assistance into the Next Operating Year	[3] Assessment: Number of Households that exited this HOPWA Program; their Housing Status after Exiting	[4] HOPWA Client Outcomes
			1 Emergency Shelter/Streets	Unstable Arrangements
			2 Temporary Housing	Temporarily Stable, with Reduced Risk of Homelessness
			3 Private Housing	
Tenant-Based Rental			4 Other HOPWA	Stable/Permanent Housing (PH)
Assistance			5 Other Subsidy	Stable/Permanent Housing (PH)
			6 Institution	
			7 Jail/Prison	- Unstable Arrangements
			8 Disconnected/Unknown	Unstable Arrangements
			9 Death	Life Event
			1 Emergency Shelter/Streets	Unstable Arrangements
			2 Temporary Housing	Temporarily Stable, with Reduced Risk of Homelessness
ъ.			3 Private Housing	
Permanent Supportive			4 Other HOPWA	Ctable/Down an out Housing (DH)
Housing Facilities/ Units			5 Other Subsidy	Stable/Permanent Housing (PH)
Facilities/ Units			6 Institution	
			7 Jail/Prison	
			8 Disconnected/Unknown	Unstable Arrangements
			9 Death	Life Event

**B.** Transitional Housing Assistance

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

			9 Death	Life Event
B1: Total r	B1: Total number of households receiving transitional/short-term housing assistance whose tenure exceeded 24 months			

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

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

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

At the bottom of the chart:

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

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

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

#### Assessment of Households that Received STRMU Assistance

[1] Output: Total number of households	[2] Assessment of Housing Status		[3] HOPWA Client Outcomes	
	Maintain Private Housing without subsidy (e.g. Assistance provided/completed and client is stable, not likely to seek additional support)	5		
	Other Private Housing without subsidy (e.g. client switched housing units and is now stable, not likely to seek additional support)	3	Ctable/Down on out Housing	anent Housing (PH)
	Other HOPWA Housing Subsidy Assistance			enem 110 msm8 (1 11)
	Other Housing Subsidy (PH)	4		
	Institution (e.g. residential and long-term care)			
	Likely that additional STRMU is needed to maintain current housing arrangements	159	Temporarily Stable, with Reduced Risk of Homelessness	
	Transitional Facilities/Short-term (e.g. temporary or transitional arrangement)			
	Temporary/Non-Permanent Housing arrangement (e.g. gave up lease, and moved in with family or friends but expects to live there less than 90 days)	2		
	Emergency Shelter/street			
	Jail/Prison	1	Unstable Arrangements	
	Disconnected	2		
	Death 2			
	ouseholds that received STRMU Assistance in the operating year or ior operating year (e.g. households that received STRMU assistance)			158
	ouseholds that received STRMU Assistance in the operating year of wo prior operating years (e.g. households that received STRMU assistance).			132

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

### 1a. Total Number of Households

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

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

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

<b>Total Number</b>	Total Number of Households				
	<ol> <li>For Project Sponsors that provided HOPWA Housing Subsidy Assistance: Identify the total number of households that received the following HOPWA-funded services:</li> </ol>				
a.	Housing Subsidy Assistance (duplicated)-TBRA, STRMU, PHP, Facility-Based Housing, and Master Leasing	178			
b.	Case Management				
c.	Adjustment for duplication (subtraction)				
d.	Total Households Served by Project Sponsors with Housing Subsidy Assistance (Sum of Rows a and b minus Row c)	178			
2. For Pro	2. For Project Sponsors did NOT provide HOPWA Housing Subsidy Assistance: Identify the total number of households that received the				
following	g HOPWA-funded service:				
a.	HOPWA Case Management				
b.	Total Households Served by Project Sponsors without Housing Subsidy Assistance				

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

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

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

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

Categories of Services Accessed	[1] For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following:	[2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following:	Outcome Indicator
Has a housing plan for maintaining or establishing stable ongoing housing	176		Support for Stable Housing
Had contact with case manager/benefits counselor consistent with the schedule specified in client's individual service plan (may include leveraged services such as Ryan White Medical Case Management)	176		Access to Support
3. Had contact with a primary health care provider consistent with the schedule specified in client's individual service plan	174		Access to Health Care
4. Accessed and maintained medical insurance/assistance	171		Access to Health Care
5. Successfully accessed or maintained qualification for sources of income	173		Sources of Income

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

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

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

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

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

### 1c. Households that Obtained Employment

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

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

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

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

Categories of Services Accessed	[1 For project sponsors that provided HOPWA housing subsidy assistance, identify the households who demonstrated the following:	[2] For project sponsors that did NOT provide HOPWA housing subsidy assistance, identify the households who demonstrated the following:
Total number of households that obtained an income-producing job	4	

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

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

Permanent	Stable Housing	Temporary Housing	Unstable	Life Event
Housing Subsidy	(# of households	(2)	Arrangements	(9)
Assistance	remaining in program		(1+7+8)	
	plus 3+4+5+6)			
Tenant-Based				
Rental Assistance				
(TBRA)				
Permanent Facility-				
based Housing				
Assistance/Units				
Transitional/Short-				
Term Facility-based				
Housing				
Assistance/Units				
Total Permanent				
HOPWA Housing				
Subsidy Assistance				
D. I I D'. I C	C4.11./D	m	TT 4 - 1 - 1	I 'C E
Reduced Risk of	Stable/Permanent	Temporarily Stable, with Reduced Risk of	Unstable	Life Events
Homelessness:	Housing	Homelessness	Arrangements	
Short-Term				
Assistance				
Short-Term Rent,				
Mortgage, and				
Utility Assistance				
(STRMU)				
Total HOPWA				
Housing Subsidy				
Assistance				

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

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

#### **Temporary Housing**

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

### **Unstable Arrangements**

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

#### Life Event

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

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

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

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

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

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

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

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

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

Note: See definition of Stewardship Units.

1. General information					
HUD Grant Number(s)		Operating Year for this report From (mm/dd/yy) To (mm/dd/yy)	☐ Final Yr		
		□ Yr 7; □ Yr 8; □ Yr 9; □ Yr 10	l		
Grantee Name		Date Facility Began Operations (mm/dd/yy)			
2. Number of Units and Non-HOPWA	Expenditures				
Facility Name:  Number of Stewardship U Developed with HOPW funds		Amount of Non-HOPWA Funds Expended in Support of the Stewardship Units during the Operating Year			
Total Stewardship Units					
(subject to 3- or 10- year use periods)					
3. Details of Project Site					
Project Sites: Name of HOPWA-funded project					
Site Information: Project Zip Code(s)					
Site Information: Congressional District(s)					
Is the address of the project site confidential?					
T6.1 1.1	☐ Not confidential; information of	an be made available to the public			
If the site is not confidential: Please provide the contact information, phone, email address/location, if business address is different from facility address					

# Part 7: Summary Overview of Grant Activities

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

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

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

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

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

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

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

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

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

Total HOPWA

Eligible Individuals Category **Receiving Housing Subsidy Assistance** 158 Continuing to receive HOPWA support from the prior operating year New Individuals who received HOPWA Housing Subsidy Assistance support during Operating Year Place not meant for human habitation 2. (such as a vehicle, abandoned building, bus/train/subway station/airport, or outside) 3. Emergency shelter (including hotel, motel, or campground paid for with emergency shelter voucher) 4. Transitional housing for homeless persons Total number of new Eligible Individuals who received HOPWA Housing Subsidy Assistance with a Prior 5. Living Situation that meets HUD definition of homelessness (Sum of Rows 2 – 4) Permanent housing for formerly homeless persons (such as Shelter Plus Care, SHP, or SRO Mod 6. Psychiatric hospital or other psychiatric facility

/.	Psychiatric hospital of other psychiatric facility	
8.	Substance abuse treatment facility or detox center	
9.	Hospital (non-psychiatric facility)	
10.	Foster care home or foster care group home	
11.	Jail, prison or juvenile detention facility	
12.	Rented room, apartment, or house	10
13.	House you own	3
14.	Staying or living in someone else's (family and friends) room, apartment, or house	7
15.	Hotel or motel paid for without emergency shelter voucher	
16.	Other	
17.	Don't Know or Refused	
18.	TOTAL Number of HOPWA Eligible Individuals (sum of Rows 1 and 5-17)	178

# c. Homeless Individual Summary

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

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

### Section 2. Beneficiaries

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

Note: See definition of HOPWA Eligible Individual

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

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

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

Individuals and Families Served with HOPWA Housing Subsidy Assistance	<b>Total Number</b>
1. Number of individuals with HIV/AIDS who qualified the household to receive HOPWA housing subsidy assistance (equals the number of HOPWA Eligible Individuals reported in Part 7A, Section 1, Chart a)	178
2. Number of ALL other persons <b>diagnosed</b> as HIV positive who reside with the HOPWA eligible individuals identified in Row 1 and who benefitted from the HOPWA housing subsidy assistance	4
3. Number of ALL other persons <b>NOT diagnosed</b> as HIV positive who reside with the HOPWA eligible individual identified in Row 1 and who benefited from the HOPWA housing subsidy	141
4. TOTAL number of ALL <u>beneficiaries</u> served with Housing Subsidy Assistance (Sum of Rows 1, 2, & 3)	323

### b. Age and Gender

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

	HOPWA Eligible Individuals (Chart a, Row 1)						
		Α.	В.	C.	D.	E.	
	_	Male	Female	Transgender M to F	Transgender F to M	TOTAL (Sum of Columns A-D)	
1.	Under 18	1	1			2	
2.	18 to 30 years	8	2			10	
3.	31 to 50 years	42	41			83	
4.	51 years and Older	57	26			83	
5.	Subtotal (Sum of Rows 1-4)	108	70			178	
		A	ll Other Benefici	aries (Chart a, Rows 2	and 3)		
		Α.	В.	C.	D.	Е.	
		Male	Female	Transgender M to F	Transgender F to M	TOTAL (Sum of Columns A-D)	
6.	Under 18	52	52			104	
7.	18 to 30 years	5	6			11	
8.	31 to 50 years	10	12			22	
9.	51 years and Older	3	5			8	
10.	Subtotal (Sum of Rows 6-9)	70	75			145	
			Total Benefic	ciaries (Chart a, Row 4	)		
11.	TOTAL (Sum of Rows 5 & 10)	178	145			323	

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### c. Race and Ethnicity\*

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

		HOPWA Eligi	ble Individuals	All Other Beneficiaries		
	Category	[A] Race [all individuals reported in Section 2, Chart a, Row 1]	[B] Ethnicity [Also identified as Hispanic or Latino]	[C] Race [total of individuals reported in Section 2, Chart a, Rows 2 & 3]	[D] Ethnicity [Also identified as Hispanic or Latino]	
1.	American Indian/Alaskan Native	4				
2.	Asian	5		5		
3.	Black/African American	66		99		
4.	Native Hawaiian/Other Pacific Islander					
5.	White	94	15	34	10	
6.	American Indian/Alaskan Native & White	3				
7.	Asian & White	1				
8.	Black/African American & White	4		5		
9.	American Indian/Alaskan Native & Black/African American					
10.	Other Multi-Racial	1		2		
11.	Column Totals (Sum of Rows 1-10)	178	15	145	10	

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

### Section 3. Households

### Household Area Median Income

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

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

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

	Percentage of Area Median Income	Households Served with HOPWA Housing Subsidy Assistance
1.	0-30% of area median income (extremely low)	92
2.	31-50% of area median income (very low)	64
3.	51-80% of area median income (low)	22
4.	Total (Sum of Rows 1-3)	178

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

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

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

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

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

1.	Project Sponsor Agency Name (Required)
L	

# 2. Capital Development

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

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

De	Type of velopment s operating year	HOPWA Funds Expended this operating year (if applicable)	Non-HOPWA funds Expended (if applicable)	Name of	Facility:	
□ Ne	ew construction	\$	\$	Type of Facility [Check on Permanent housing	nly one box.]	
☐ Rehabilitation		\$	\$	☐ Short-term Shelter or Transitional housing		
□ Ac	equisition	\$	\$	☐ Supportive services only facility		
□ Op	perating	\$ \$				
a.	Purchase/lease of property:		Date (mm/dd/yy):			
b.	Rehabilitation/Construction Dates:		Date started:	Date Completed:		
c.	Operation dates:			Date residents began to occupy:  ☐ Not yet occupied		
d.	Date supportive	services began:		Date started: ☐ Not yet providing services		
e.	Number of units	in the facility:		HOPWA-funded units =	Total Units =	
f.	Is a waiting list maintained for the facility?		☐ Yes ☐ No  If yes, number of participants on the list at the end of operating year			
g.	What is the address of the facility (if different from business address)?					
h.	Is the address of the project site confidential?		☐ Yes, protect information; do not publish list ☐ No, can be made available to the public			

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

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

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

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

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

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

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

3a.	Check one only
[	Permanent Supportive Housing Facility/Units
[	☐ Short-term Shelter or Transitional Supportive Housing Facility/Units

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

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

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

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

### 4. Households and Housing Expenditures

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

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