2023 GAP ANALYSIS

Created by

Kansas Statewide
Homeless Coalition

Table of Contents

EXECUTIVE SUMMARY

KS-507

Kansas Statewide Homeless Coalition (KSHC) conducted a Gap Analysis of the Kansas Balance of State Continuum of Care (KS BoS CoC), at the direction of the KS BoS CoC Steering Committee.

The primary goal of this Gap Analysis is to help the KS BoS CoC become more outcome-focused and data-informed. This report is centered on performance analysis and identifying contributing factors. Additionally, this Gap Analysis will evaluate the system-wide, year-over-year impact on serving individuals who are experiencing or at risk of experiencing homelessness. KSHC, as the KS BoS CoC's Collaborative Applicant, leads this Performance Analysis and Improvement Process. In reviewing previous Gap Analysis publications, KSHC has decided to include only 2023 data for the 2023 Gap Analysis. This has resulted in a repetition of HIC/PIT data in the 2022 and 2023 Gap Analysis reports. We appreciate the cooperation and patience during this transition. Future Gap analysis reports will only include data for the year in which the report is designated and will be released at the beginning of the following calendar year.

As part of this analysis, all available data for 2023, including the Homeless Management Information System (HMIS), Coordinated Entry System (CES), System Performance Measures (SPM), Point-In-Time count (PIT), Housing Inventory Count (HIC), and the Grant Inventory Worksheet (GIW) were reviewed.

This Gap Analysis aims to evaluate the following:

Assess the current operation of the KS BoS CoC homelessness service system.
Determine if the CoC is accessible to all individuals experiencing homelessness.
Ensure that services are being provided equitably.
Identify areas for improvement.
Establish funding priorities.
Demonstrate the need for new resources.

Utilizing these performance measures will enable the KS BoS CoC to design improvement strategies, revise CoC Written Standards, track and update the CoC Strategic Plan Goals, align with HUD CoC NOFO priorities and processes, and update HMIS/CES policies and procedures.

KS BoS-507
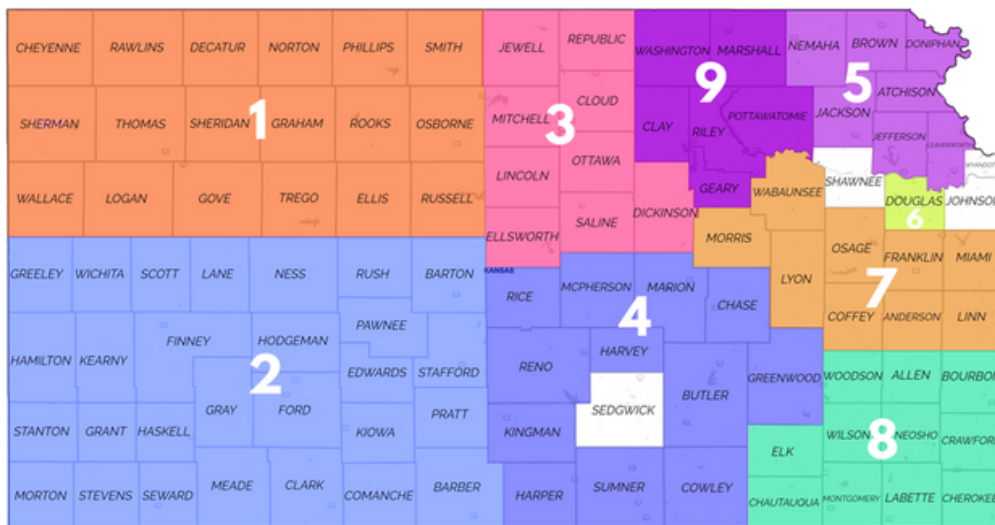
The Kansas Balance of State Continuum of Care (KS BoS CoC) is a community of individuals and providers that organize and deliver housing and services to individuals and families experiencing homelessness as they move to stable housing and self-sufficiency. The KS BoS CoC covers 101 counties out of 105 Kansas counties excluding Shawnee, Johnson, Wyandotte, and Sedgwick. The KS BoS CoC is split into nine (9) regions.

HOMELESSNESS IN KANSAS

KS-507 Point in Time Count and Housing Inventory County Comparison

The Point-in-Time (PIT) count is an annual effort to tally the number of people experiencing homelessness, both sheltered and unsheltered, on a single night in January. This count is mandated by HUD and requires Continuums of Care to document unsheltered individuals and individuals in emergency shelters, transitional housing, and Safe Havens during that specified night.
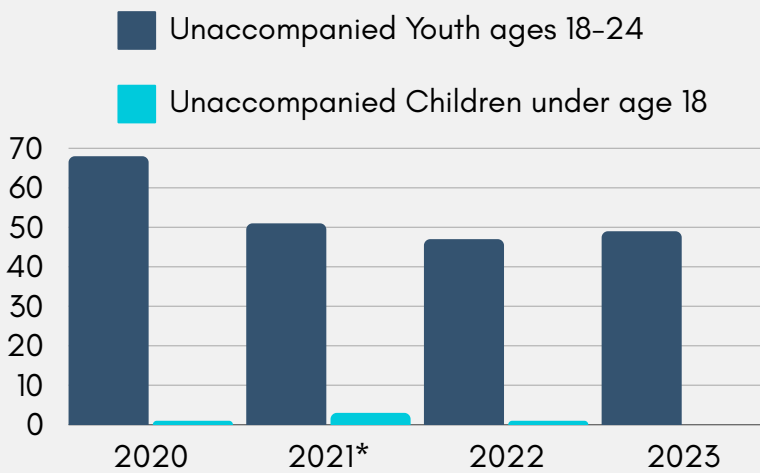
Unsheltered ■ **Sheltered** ■

(Bar chart: years 2020, 2021*, 2022, 2023; vertical axis 0–1000)
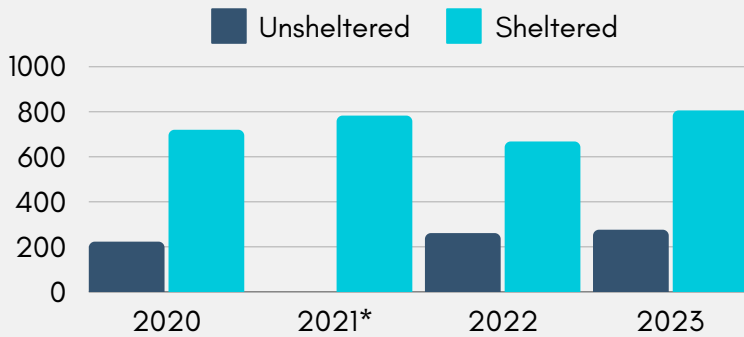
2023 KS BoS CoC PIT Count

Sheltered

806 individuals

Unsheltered

276 individuals

■ Unaccompanied Youth ages 18-24

■ Unaccompanied Children under age 18

(Bar chart: years 2020, 2021*, 2022, 2023; vertical axis 0–70)

Youth Numbers
2023 KS BoS CoC PIT Count

Unaccompanied Youth Ages 18-24

49 Youth

Unaccompanied Children Under age 18

0 Children

■ Emergency Shelter ■ PSH ■ RRH ■ TH

(Bar chart: years 2022, 2023; vertical axis 0–1200)
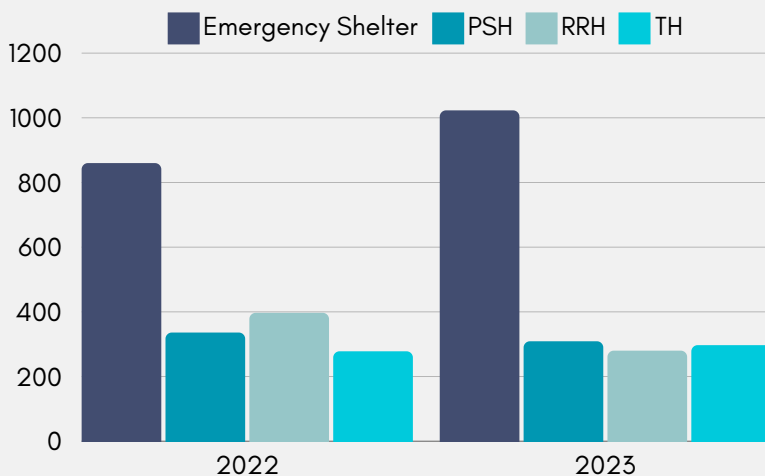
2023 KS BoS CoC Housing Inventory Count (HIC)

Emergency Shelter Beds

1,023

Transitional Housing Beds

297

RRH Beds

280

PSH Beds

309

Data Source: KS BoS CoC Point-In-Time Reports from 2020 to 2023 and 2023 KS BoS CoC HIC
*2021 does not have an Unsheltered PIT Count due to COVID.

HOMELESSNESS IN KANSAS

KS-507 PIT and CES Counts by County

This data-set illustrates the counties that identified the number of individual persons who were experiencing homelessness per county in accordance with the Point-In-Time Count and the number of households who completed Coordinated Entry Assessments which were added to Regional CES Lists.

County	PIT	CES
Allen	17	13
Anderson	0	1
Atchison	2	66
Barber	0	0
Barton	8	40
Bourbon	0	13
Brown	4	21
Butler	27	39
Chase	0	0
Chautauqua	0	0
Cherokee	0	20
Cheyenne	0	0
Clark	0	0
Clay	0	0
Cloud	0	0
Coffey	0	0
Comanche	0	0
Cowley	0	6
Crawford	62	243
Decatur	0	0
Dickinson	0	1
Doniphan	7	3
Douglas	351	393
Edwards	0	0
Elk	0	1
Ellis	12	9
Ellsworth	0	0

County	PIT	CES
Finney	54	59
Ford	5	36
Franklin	0	2
Geary	1	2
Gove	0	0
Graham	0	0
Grant	0	0
Gray	0	0
Greeley	0	0
Greenwood	0	0
Hamilton	0	1
Harper	0	0
Harvey	40	45
Haskell	0	0
Hodgeman	0	0
Jackson	0	2
Jefferson	0	3
Jewell	0	0
Kearny	0	0
Kingman	0	0
Kiowa	0	0
Labette	1	6
Lane	0	0
Leavenworth	84	153
Lincoln	0	0
Linn	0	0
Logan	0	0

County	PIT	CES
Lyon	40	12
Marion	0	2
Marshall	0	0
McPherson	53	0
Meade	0	1
Miami	20	46
Mitchell	0	0
Montgomery	31	9
Morris	0	2
Morton	0	0
Nemaha	0	3
Neosho	1	7
Ness	0	0
Norton	0	0
Osage	0	1
Osborne	0	0
Ottawa	0	0
Pawnee	0	2
Phillips	0	0
Pottawatomie	0	1
Pratt	0	1
Rawlins	0	1
Reno	38	39
Republic	0	0
Rice	0	0
Riley	61	138
Rooks	0	1

County	PIT	CES
Rush	0	0
Russell	0	0
Saline	152	20
Scott	0	0
Seward	11	4
Sheridan	0	0
Sherman	0	0
Smith	0	0

Counties Outside of CoC		
County	PIT	CES
Johnson	N/A	3
Sedgwick	N/A	1
Shawnee	N/A	0
Wyandotte	N/A	3
Out of State	N/A	1

*Data Source: 2023 KS BoS CoC Point-In-Time Report (# of Households) and Looker Homeless CES Counties Assessments (# of households, including reassessed households) from 10/1/2022 to 9/30/2023

PROGRESS IN ENDING HOMELESSNESS

HMIS-Integrated Homeless Programs Kansas - 507

From October 1, 2022, to September 30, 2023, key metrics from the Homeless Management Information System (HMIS) were analyzed, excluding data from non-HMIS participating agencies. Reviewed by HUD, these metrics help assess progress in ending homelessness and guide funding decisions.

The analysis includes measures such as the average length of stay in housing programs, exits to permanent housing, and returns to homelessness within 12 months. By reviewing these trends, policymakers and service providers can better address the needs of individuals and families experiencing homelessness.

Ultimately, these data points are crucial for monitoring the effectiveness of homeless services and informing strategies to improve the overall homeless response system in Kansas.

## From October 1, 2022 to September 30, 2023

3,765 Individuals Identified through CES

2,571 Households Identified through CES
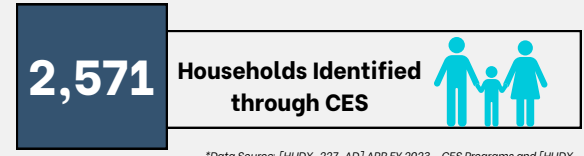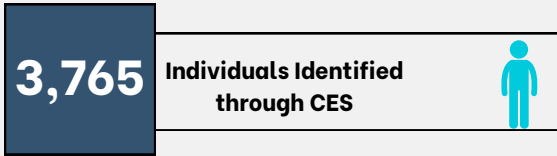
Data Source: [HUDX-227-AD] APR FY 2023 - CES Programs and [HUDX-227-AD] APR FY 2023 - All Housing and Prevention Programs

### Length of Stay-
Day from Entry to Move In
Q22C

This metric tracks the days a person experiencing homelessness spends from system entry to permanent housing. A shorter length indicates a more effective system, quickly connecting individuals and families to stable housing, reducing time in shelters or on the streets, and alleviating stress.

2022 / 2023

RRH Only	PSH Only
40 / 29	55 / 61
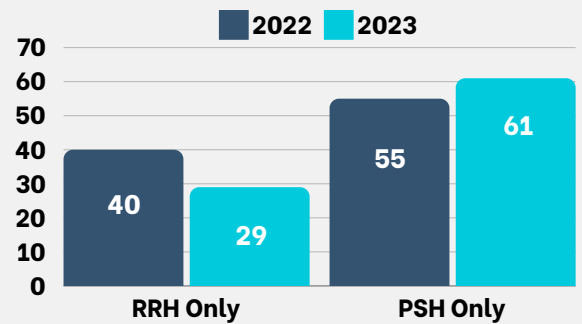
### Exits to Permanent Housing
Q23C

This metric tracks the number of individuals and families moving from homelessness into permanent housing. Higher exit rates indicate a successful system, effectively transitioning people into stable living situations.

2022 / 2023

RRH	PSH	TH
908 / 567	21 / 8	43 / 36
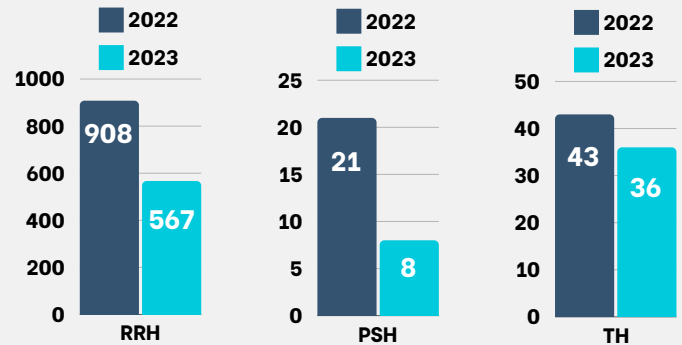
Returns to Homelessness within 12 months
SPM

This metric tracks the percentage of individuals and families who become homeless again within a year after exiting to permanent housing. Lower rates indicate a more effective system.
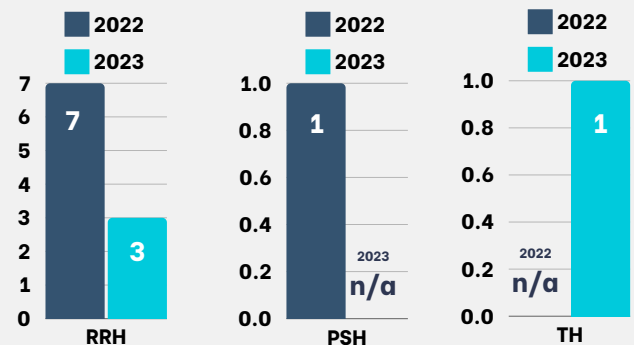
2022 / 2023

RRH	PSH	TH
7 / 3	1 / 2023 n/a	2022 n/a / 1

Data Source: [HUD 227-AD] Annual Performance Reports for RRH programs, PSH programs and TH programs (10/1/2022 to 9/30/2023). Systems Performance Measures.

PROGRESS IN ENDING HOMELESSNESS

HMIS-Integrated Homeless Programs Kansas - 507

This chart compares income sources for individuals in housing programs between 2022 and 2023, focusing on non-employment and employment income for both stayers and leavers across Rapid Re-Housing (RRH) and Permanent Supportive Housing (PSH).

Non-employment income for stayers in PSH increased from 64% in 2022 to 75% in 2023, while RRH remained at 27%. Among leavers, RRH rose slightly from 32% to 33%, and PSH decreased from 68% to 42% and TH increased from 16% to 20%.

Employment income for stayers was predominantly from RRH with only a slight increase and a 12% decrease in PSH. For leavers, RRH employment income increased from 37% to 38%, and PSH fell from 26% to 11% while TH increased from 44% to 57%.
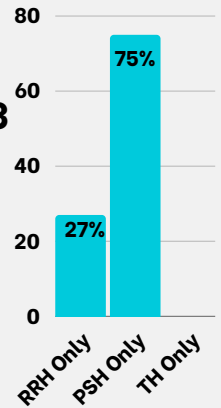
Non-Employment Income for Stayers
Q19A1

This metric tracks the income from non-employment sources for individuals remaining in housing programs. Higher levels indicate better support in accessing benefits and financial resources.
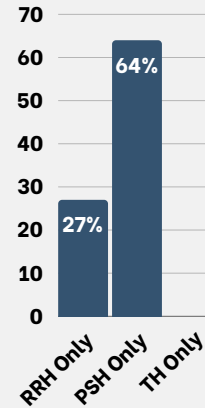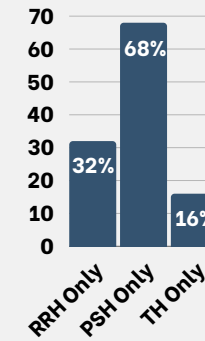
2022

RRH Only 27%, PSH Only 64%, TH Only

2023

RRH Only 27%, PSH Only 75%, TH Only

Non-Employment Income for Leavers
Q19A2

This metric tracks the income from non-employment sources for individuals exiting housing programs. Higher levels indicate effective support in securing benefits and financial resources before leaving the program.
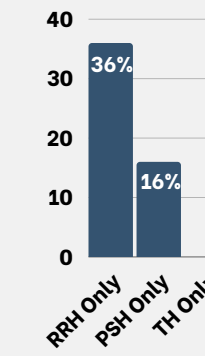
2022

RRH Only 32%, PSH Only 68%, TH Only 16%

2023

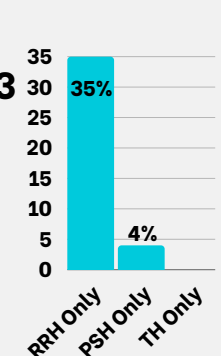RRH Only 33%, PSH Only 42%, TH Only 20%
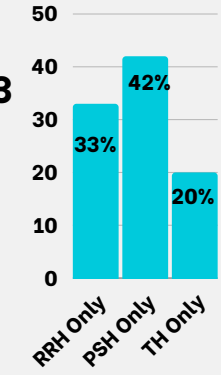
Employment Income for Stayers
Q19A1

This metric tracks the employment income for individuals remaining in housing programs. Higher levels indicate successful support in securing and maintaining jobs.
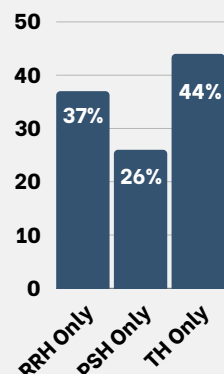
2022

RRH Only 36%, PSH Only 16%, TH Only

2023

RRH Only 35%, PSH Only 4%, TH Only

Employment Income for Leavers
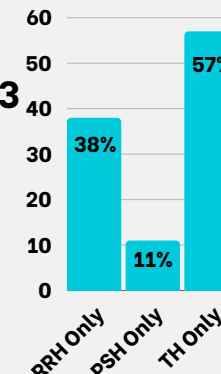Q19A2

This metric tracks the employment income of individuals in housing programs. Higher levels indicate effective support in securing and maintaining jobs.

2022

RRH Only 37%, PSH Only 26%, TH Only 44%

2023

RRH Only 38%, PSH Only 11%, TH Only 57%

Data Source: [HUD 227-AD] Annual Performance Reports for RRH programs, PSH programs and TH programs (10/1/2022 to 9/30/2023).

PROGRESS IN ENDING HOMELESSNESS

HMIS-Integrated Homeless Programs Kansas - 507

How This Information is Collected: This data is gathered from programs that utilize the Homeless Management Information System (HMIS). HMIS is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

The chart compares the distribution of persons served with more than one disability across Rapid Re-Housing (RRH), Permanent Supportive Housing (PSH), and Transitional Housing (TH) for the years 2022 and 2023.
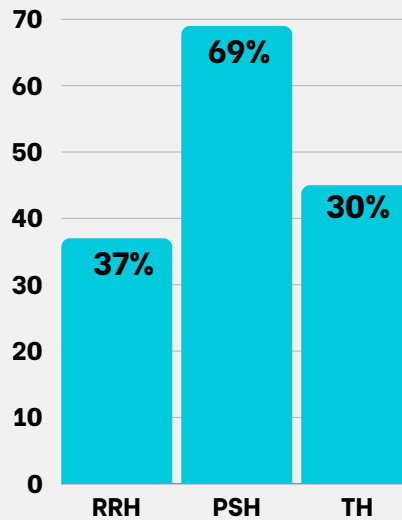
In 2022, 37% of persons were served through RRH, 69% through PSH, and 30% through TH. In 2023, the distribution shifted significantly, with RRH increasing to 45%, PSH rising to 78%, and TH decreasing to 25%.

This data indicates a notable increase in the proportion of individuals with multiple disabilities being served by RRH and PSH programs, while those served by TH have decreased.

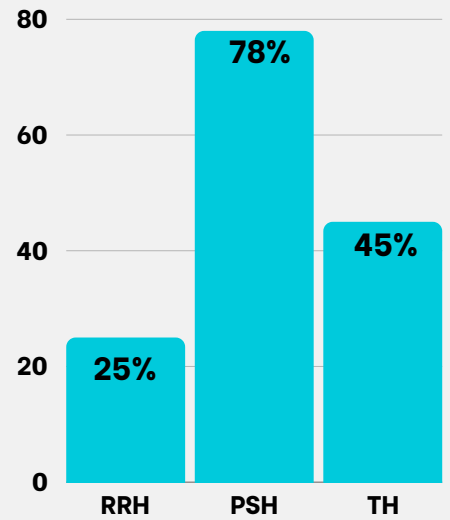**2022 Persons Served with More than One Disability**

Q13A2

RRH	37%
PSH	69%
TH	30%

2023 Persons Served with More than One Disability

Q13A2

RRH	25%
PSH	78%
TH	45%

Persons from Places Not Meant for Human Habitation

Q15

Legend: 2022, 2023

|	2022	2023
RRH	47%	46%
PSH	23%	27%
TH	34%	26%

The chart to the right shows changes in housing placements from 2022 to 2023 for persons from places not meant for human habitation.

Rapid Re-Housing (RRH) slightly decreased from 47% to 46%, while Permanent Supportive Housing (PSH) increased from 23% to 27%, indicating more access to long-term housing. Transitional Housing (TH) dropped significantly from 34% to 26%.

The data highlights the need to address declines in RRH and TH while supporting the gains in PSH placements.
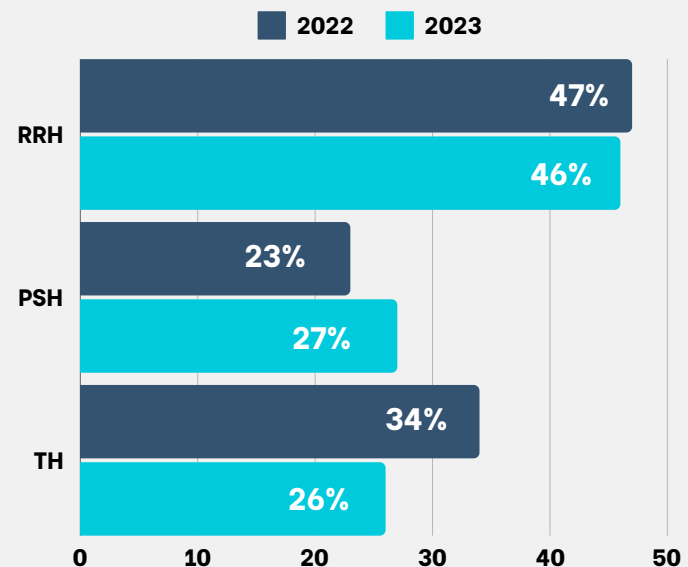
MULTI-REGIONAL

Optimizing Homeless Services through HMIS Integration: Bed Capacity for Agencies Serving Multiple Regions
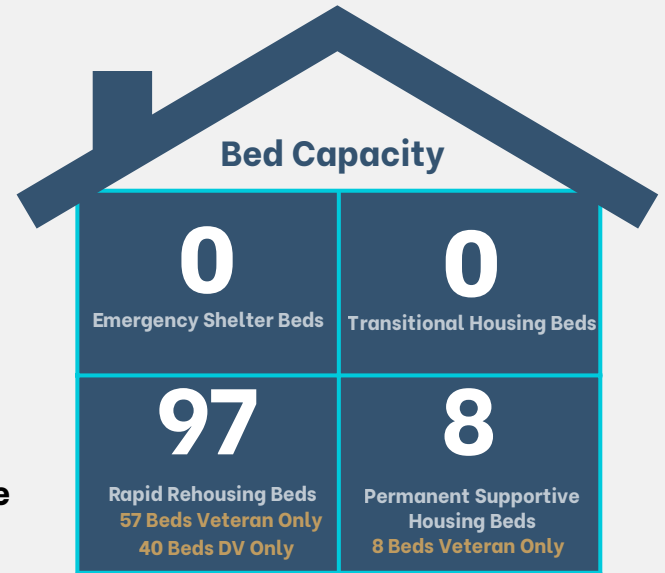
The Salvation Army
Veterans

Rapid Rehousing	57 Beds in HMIS

Robert J. Dole VA Medical Center
Veterans

Permanent Supportive Housing	8 Beds in HMIS

Kansas Coalition Against Sexual and Domestic Violence
Victim Service Provider

Rapid Rehousing	40 Bed in HMIS

Bed Capacity

0	0
Emergency Shelter Beds	Transitional Housing Beds
97	**8**
Rapid Rehousing Beds	Permanent Supportive Housing Beds
57 Beds Veteran Only 40 Beds DV Only	8 Beds Veteran Only

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

This Statewide page showcases the collective efforts of multiple agencies serving various regions across Kansas to enhance homeless services through HMIS integration. This page details the bed capacities provided by three significant agencies:

The Salvation Army Veterans: 57 beds available for rapid rehousing.
Robert J. Dole VA Medical Center Veterans: 8 beds dedicated to permanent supportive housing.
Kansas Coalition Against Sexual and Domestic Violence Victim Service Provider: 40 beds allocated for rapid rehousing.

In total, these agencies offer 97 beds for rapid rehousing and 8 beds for permanent supportive housing. This approach ensures that services are effectively and efficiently delivered to individuals and families experiencing homelessness across the state.

By integrating these services within the HMIS framework, Kansas achieves better data management, resource distribution, and service coordination, addressing the diverse needs of the homeless population in various regions.

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

NORTHWEST

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in Northwest Kansas
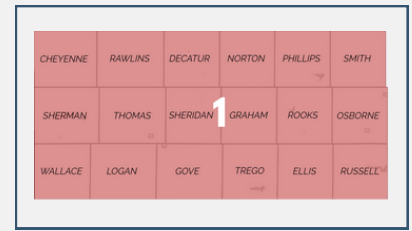
Harvest America

Rapid Rehousing	26 Beds in HMIS

Options DV & SV Services, Inc. - Victim Service Provider

Emergency Shelter	14 Bed in HMIS

The data from the Housing Inventory Count (HIC), Point-In-Time (PIT) survey, and HMIS-integrated programs for Northwest Kansas identifies critical gaps in services for the homeless population.
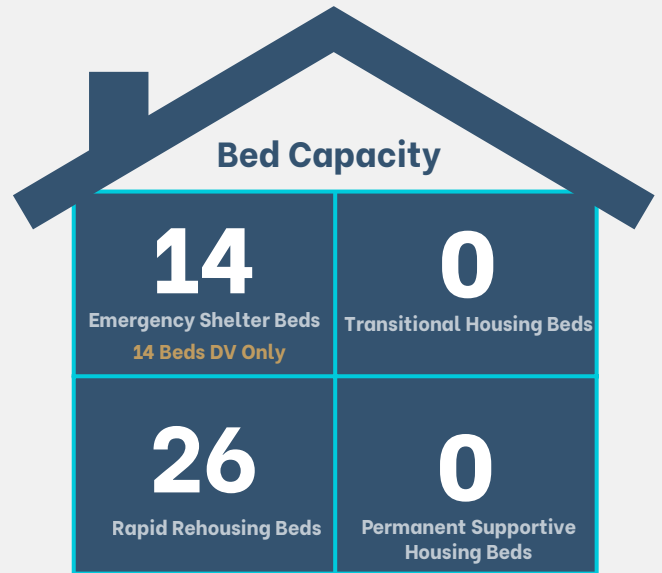
One major issue is the lack of PIT count data for both sheltered and unsheltered individuals. Without this data, it is difficult to accurately assess the extent of homelessness and allocate resources effectively.

Ensuring participation in the PIT count next year by engaging local agencies and volunteers is essential. Additionally, the region faces a severe shortage of beds, with only 14 emergency shelter beds, 26 rapid rehousing beds and none for transitional housing, or permanent supportive housing. During 2023, Harvest America has 26 rapid rehousing beds in HMIS, and Options DV & SV Services, Inc. provides 14 emergency shelter beds.

To address these issues, it is crucial to increase PIT count participation through better outreach and training, expand bed capacity by securing additional funding and partnerships, and encourage more agencies to participate in HMIS with enhanced support and training. Increasing community engagement through public education and partnerships with local businesses and organizations can also help create a supportive network for homeless services.

Addressing these gaps will improve service effectiveness, ensure better data collection, and expand resources to reduce homelessness in Northwest Kansas.
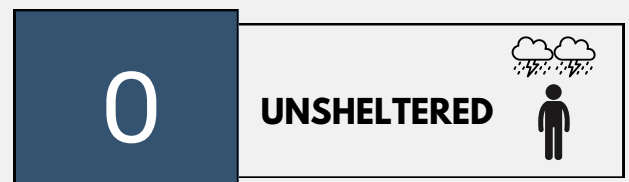
Bed Capacity

14 Emergency Shelter Beds **14 Beds DV Only**	**0** Transitional Housing Beds
26 Rapid Rehousing Beds	**0** Permanent Supportive Housing Beds

*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 1 PIT Count

The Point-In-Time (PIT) count is a count of unsheltered and sheltered people experiencing homelessness in a shelter, transitional housing, and safe havens on a single night in January of 2023. While required by HUD, the PIT count does not capture an accurate number of people experiencing homelessness, as it only provides a snapshot of a single night and may miss individuals not visible during the count. Furthermore, it does not account for those who are temporarily doubled up or in other unstable housing situations.

0 UNSHELTERED

12 SHELTERED

*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

NORTHWEST

Populations and Prior Living Situations Identified through Northwest Regional CES List and HMIS Programs
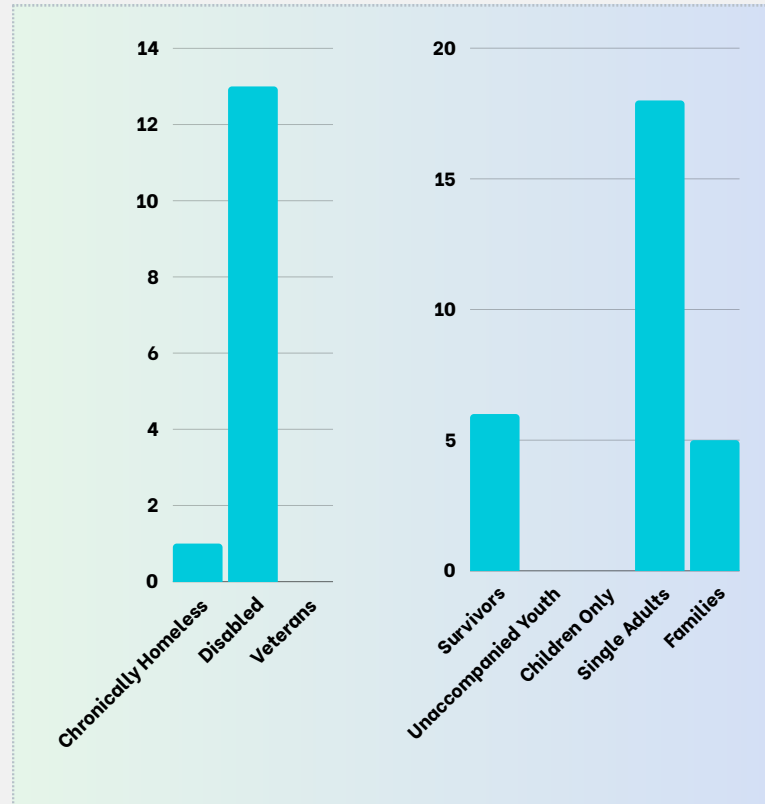

The Annual Performance Report (APR) provides a comprehensive overview of the Homeless Management Information System (HMIS) program data. This report specifically excludes data from the Coordinated Entry System (CES) to focus on the performance and outcomes of individual HMIS-participating programs.

The accompanying data table highlights key metrics, including the number and characteristics of individuals served, categorized by various populations and conditions of homelessness. This includes detailed demographic information and identifies specific subpopulations such as veterans, disabled individuals, and families.

Additionally, the table reflects various populations such as single adults, families, children only, and unaccompanied youth. By examining these metrics, the report and the data table together provide a clear picture of service utilization rates and outcomes achieved, helping to identify areas of success and areas needing further support for future program development and resource allocation.
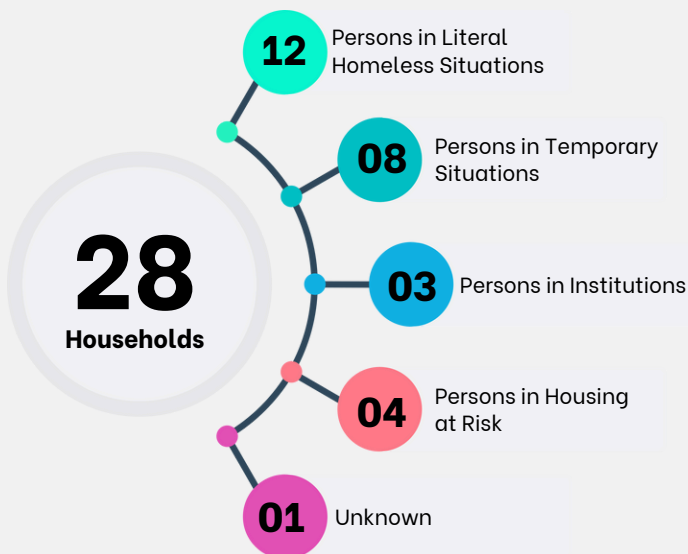
1
In the HMIS Annual Performance Report, 1 individual was identified as chronically homeless. The previous page reveals a gap in permanent supportive housing beds specifically dedicated to homeless individuals experiencing chronic homelessness.

Identified Homeless in Participating HMIS Programs
Excluding CES

*Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

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28 Households

- **12** Persons in Literal Homeless Situations
- **08** Persons in Temporary Situations
- **03** Persons in Institutions
- **04** Persons in Housing at Risk
- **01** Unknown

*Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

The Regional CE List details the number of households added to the Regional Coordinated Entry System (CES) List from 10/1/2022 to 9/30/2023.

Additionally, this CES Count provides information on the prior living situations of those households before they were entered onto the Regional CES List during the same period. This data helps us understand the diverse backgrounds and circumstances from which households experiencing homelessness come.

By analyzing these prior living situations, we can better tailor our support services and interventions to address the specific needs of these households, ultimately enhancing the effectiveness of our efforts to end homelessness in our community.

SOUTHWEST

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in Southwest Kansas
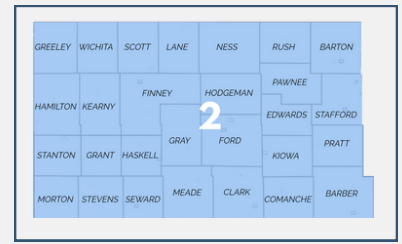
Catholic Charities of Southwest Kansas

Rapid Rehousing	79 Beds in HMIS

Compass Behavioral Health

Rapid Rehousing	15 Beds in HMIS

Crisis Center of Dodge City
Victim Service Provider

Emergency Shelter	16 Beds in HMIS

Liberal Area Rape Crisis and Domestic Violence Services
Victim Service Provider

Emergency Shelter	18 Beds in HMIS

Family Crisis Center
Victim Service Provider

Emergency Shelter	16 Beds in HMIS

Family Crisis Services
Victim Service Provider

Emergency Shelter	12 Beds in HMIS

The Stepping Stone, Inc.

Emergency Shelter	13 Beds not Integrated in HMIS

Emmaus House

Emergency Shelter	14 Beds not Integrated in HMIS

Manna House

Emergency Shelter	10 Beds not Integrated in HMIS

*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Bed Capacity

86	0
Emergency Shelter Beds **46 Beds DV Only**	Transitional Housing Beds
107	0
Rapid Rehousing Beds	Permanent Supportive Housing Beds
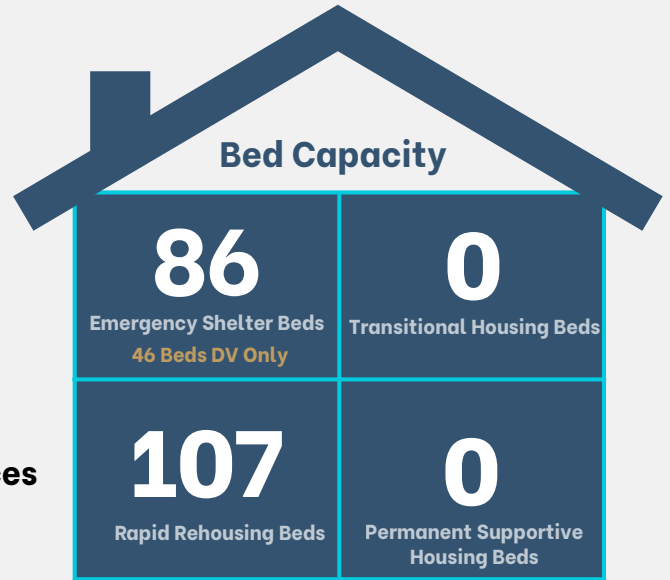
*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 2 PIT Count

The Point-In-Time (PIT) count is a count of unsheltered and sheltered people experiencing homelessness in a shelter, transitional housing, and safe havens on a single night in January of 2023. While required by HUD, the PIT count does not capture an accurate number of people experiencing homelessness, as it only provides a snapshot of a single night and may miss individuals not visible during the count. Furthermore, it does not account for those who are temporarily doubled up or in other unstable housing situations.

52	UNSHELTERED

26	SHELTERED

*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

*The data presented is reported by individual agencies and may not encompass all aspects or reflect the complete picture. Variations in data collection and reporting practices can result in discrepancies.

SOUTHWEST

Populations and Prior Living Situations Identified through Southwest Regional CES List and HMIS Programs

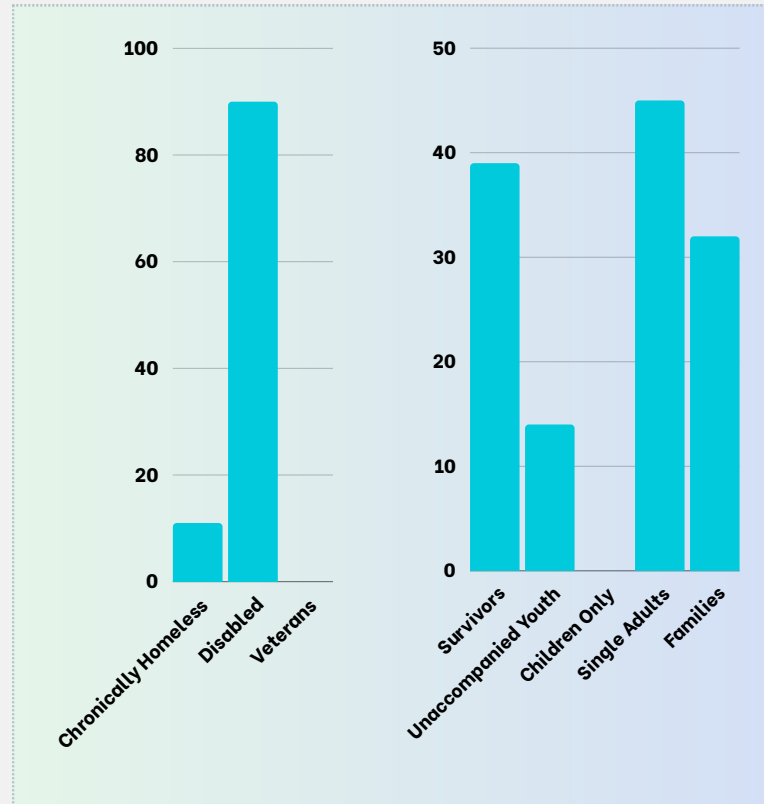| GREELEY | WICHITA | SCOTT | LANE | NESS | | RUSH | BARTON |
HAMILTON	KEARNY		FINNEY	HODGEMAN		PAWNEE	
						EDWARDS	STAFFORD
STANTON	GRANT	HASKELL	GRAY	FORD	KIOWA		PRATT
MORTON	STEVENS	SEWARD	MEADE	CLARK	COMANCHE		BARBER

2

The Annual Performance Report (APR) provides a comprehensive overview of the Homeless Management Information System (HMIS) program data. This report specifically excludes data from the Coordinated Entry System (CES) to focus on the performance and outcomes of individual HMIS-participating programs.

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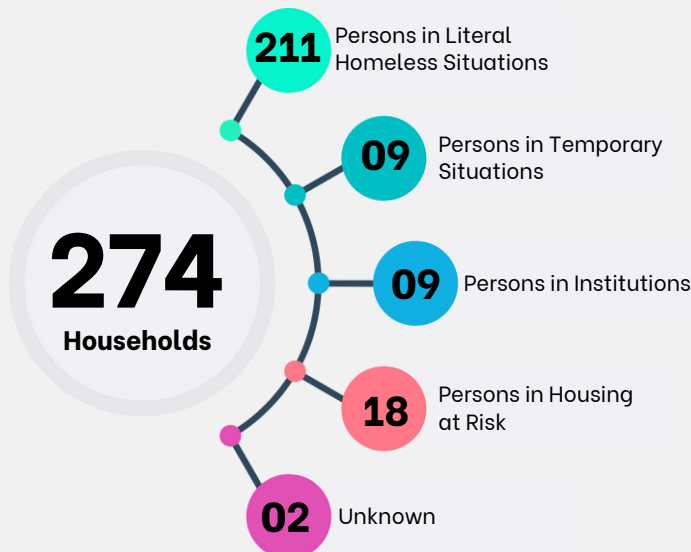
11

In the HMIS Annual Performance Report, 11 individuals were identified as chronically homeless. The previous page reveals a gap in permanent supportive housing beds specifically dedicated to homeless individuals experiencing chronic homelessness.

Identified Homeless in Participating HMIS Programs
Excluding CES

*Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

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274 Households

- **211** Persons in Literal Homeless Situations
- **09** Persons in Temporary Situations
- **09** Persons in Institutions
- **18** Persons in Housing at Risk
- **02** Unknown

*Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

The Regional CE List details the number of households added to the Regional Coordinated Entry System (CES) List from 10/1/2022 to 9/30/2023.

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NORTH CENTRAL

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in North Central Kansas
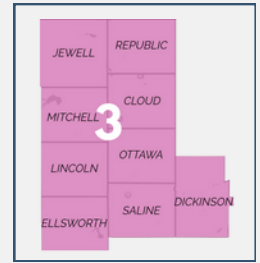
Ashby House, Ltd.

Emergency Shelter	32 Beds in HMIS
Transitional Housing	36 Beds in HMIS

Catholic Charities of Northern Kansas

Rapid Rehousing	55 Beds in HMIS

Salina Grace

Emergency Shelter	40 Beds in HMIS

Domestic Violence Association of Central Kansas
Victim Service Provider

Emergency Shelter	36 Beds in HMIS
Rapid Rehousing	11 Beds in HMIS

Salina Public Housing Authority
Veterans

Permanent Supportive Housing	30 Beds not Integrated into HMIS

Salina Rescue Mission
Victim Service Provider

Emergency Shelter	116 Beds not Integrated into HMIS

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Bed Capacity

244 Emergency Shelter Beds
152 Beds DV Only
40 Beds Winter Only

36 Transitional Housing Beds

66 Rapid Rehousing Beds
11 Beds DV Only

30 Permanent Supportive Housing Beds
30 Beds Veterans Only
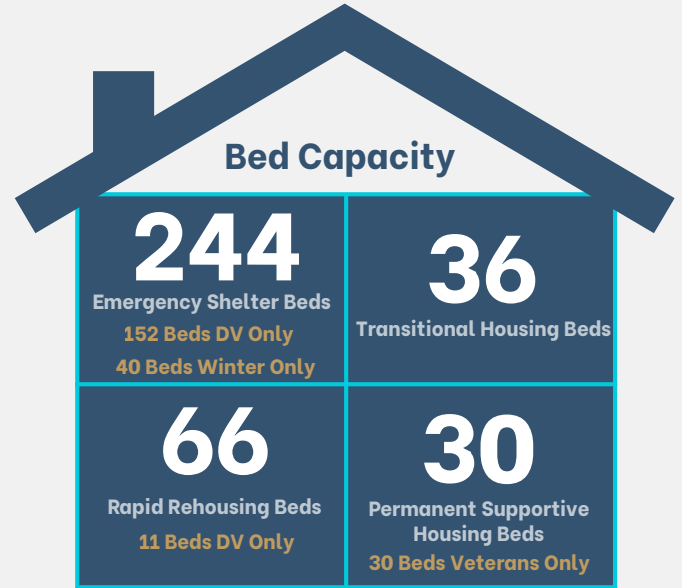
Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 3 PIT Count

The Point-In-Time (PIT) count is a count of unsheltered and sheltered people experiencing homelessness in a shelter, transitional housing, and safe havens on a single night in January of 2023. While required by HUD, the PIT count does not capture an accurate number of people experiencing homelessness, as it only provides a snapshot of a single night and may miss individuals not visible during the count. Furthermore, it does not account for those who are temporarily doubled up or in other unstable housing situations.

15 UNSHELTERED

137 SHELTERED

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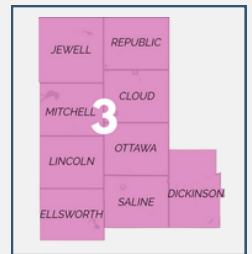
Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

NORTH CENTRAL

Populations and Prior Living Situations Identified through North Central Regional CES List and HMIS Programs
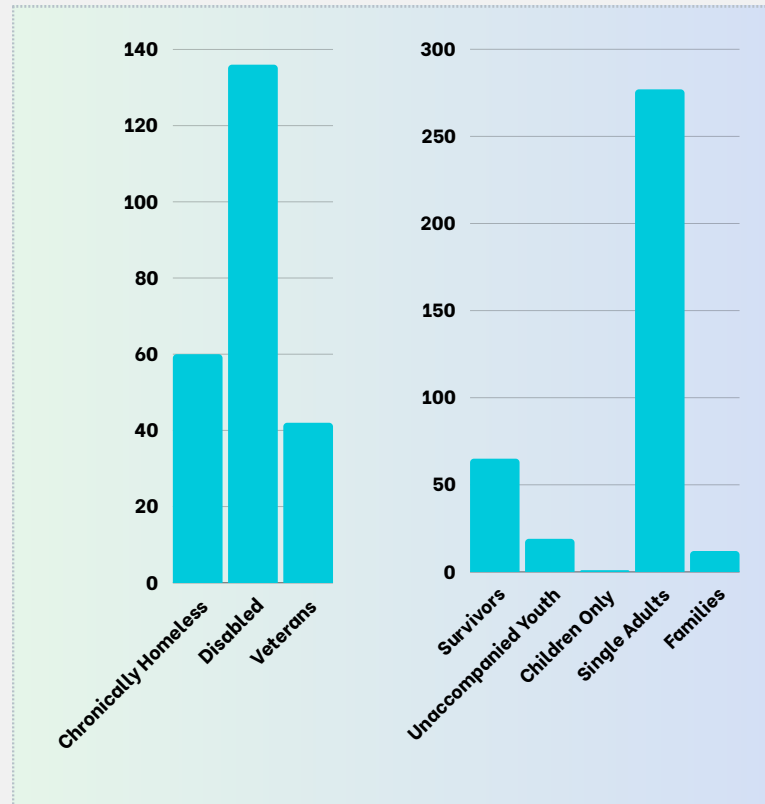
3

The Annual Performance Report (APR) provides a comprehensive overview of the Homeless Management Information System (HMIS) program data. This report specifically excludes data from the Coordinated Entry System (CES) to focus on the performance and outcomes of individual HMIS-participating programs.

The accompanying data table highlights key metrics, including the number and characteristics of individuals served, categorized by various populations and conditions of homelessness. This includes detailed demographic information and identifies specific subpopulations such as veterans, disabled individuals, and families.

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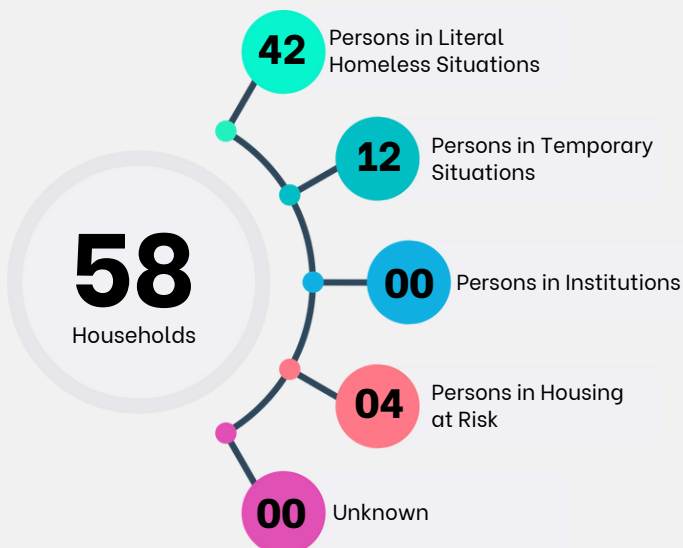
60 In the HMIS Annual Performance Report, 60 individuals were identified as chronically homeless. The previous page reveals a gap in permanent supportive housing beds specifically dedicated to homeless individuals experiencing chronic homelessness.

Identified Homeless in Participating HMIS Programs
Excluding CES

Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

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58 Households

- **42** Persons in Literal Homeless Situations
- **12** Persons in Temporary Situations
- **00** Persons in Institutions
- **04** Persons in Housing at Risk
- **00** Unknown

Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

The Regional CE List details the number of households added to the Regional Coordinated Entry System (CES) List from 10/1/2022 to 9/30/2023.

Additionally, this CES Count provides information on the prior living situations of those households before they were entered onto the Regional CES List during the same period. This data helps us understand the diverse backgrounds and circumstances from which households experiencing homelessness come.

By analyzing these prior living situations, we can better tailor our support services and interventions to address the specific needs of these households, ultimately enhancing the effectiveness of our efforts to end homelessness in our community.

SOUTH CENTRAL

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in South Central Kansas
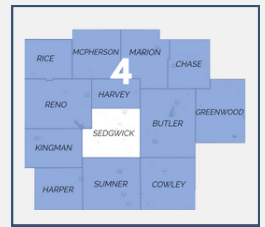
Butler Homeless Initative

Emergency Shelter	18 Beds in HMIS

McPherson Housing Coalition

Emergency Shelter	15 Beds in HMIS
Rapid Rehousing	19 Beds in HMIS

Mid-Kansas Community Action Program

Rapid Rehousing	36 Beds in HMIS

Prairie View

Permanent Supportive Housing	10 Beds in HMIS

Bright House
Victim Service Provider

Emergency Shelter	17 Beds in HMIS

Family Life Center of Butler County
Victim Service Provider

Emergency Shelter	12 Beds in HMIS
Rapid Rehousing	2 Beds in HMIS

New Hope Shelter
Victim Service Provider

Emergency Shelter	30 Beds in HMIS

Safehope Shelter
Victim Service Provider

Emergency Shelter	9 Beds in HMIS

Live Free Ministries

Transitional Housing	51 Beds not Integrated in HMIS

New Beginnings

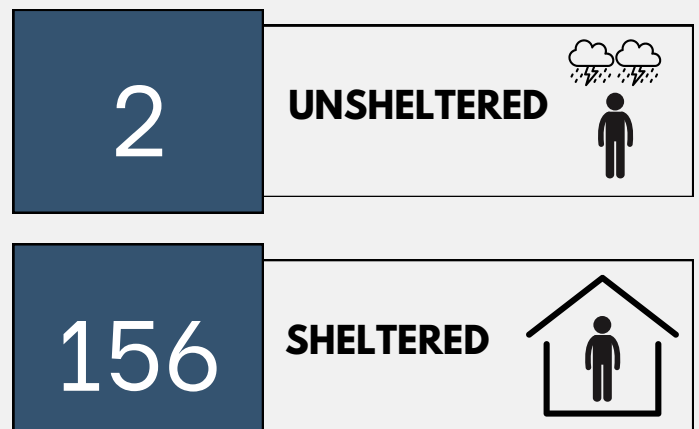|	
Emergency Shelter	25 Beds not Integrated in HMIS
Transitional Housing	40 Beds not Integrated in HMIS

New Jerusalem Missions

Transitional Housing	14 Beds not Integrated in HMIS
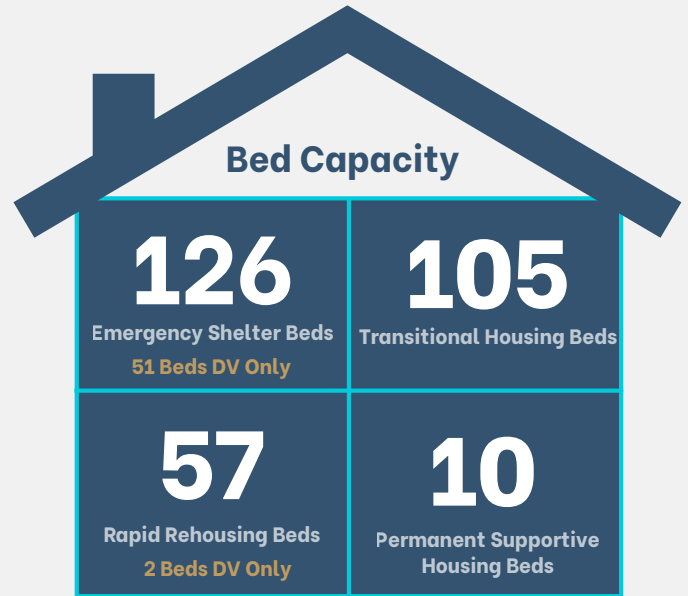
Bed Capacity

126 Emergency Shelter Beds — 51 Beds DV Only	**105** Transitional Housing Beds
57 Rapid Rehousing Beds — 2 Beds DV Only	**10** Permanent Supportive Housing Beds

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 4 PIT Count

The Point-In-Time (PIT) count is a count of unsheltered and sheltered people experiencing homelessness in a shelter, transitional housing, and safe havens on a single night in January of 2023. While required by HUD, the PIT count does not capture an accurate number of people experiencing homelessness, as it only provides a snapshot of a single night and may miss individuals not visible during the count. Furthermore, it does not account for those who are temporarily doubled up or in other unstable housing situations.

2 UNSHELTERED

156 SHELTERED

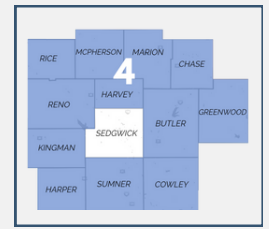*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs*

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs
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SOUTH CENTRAL

Populations and Prior Living Situations Identified through South Central Regional CES List and HMIS Programs
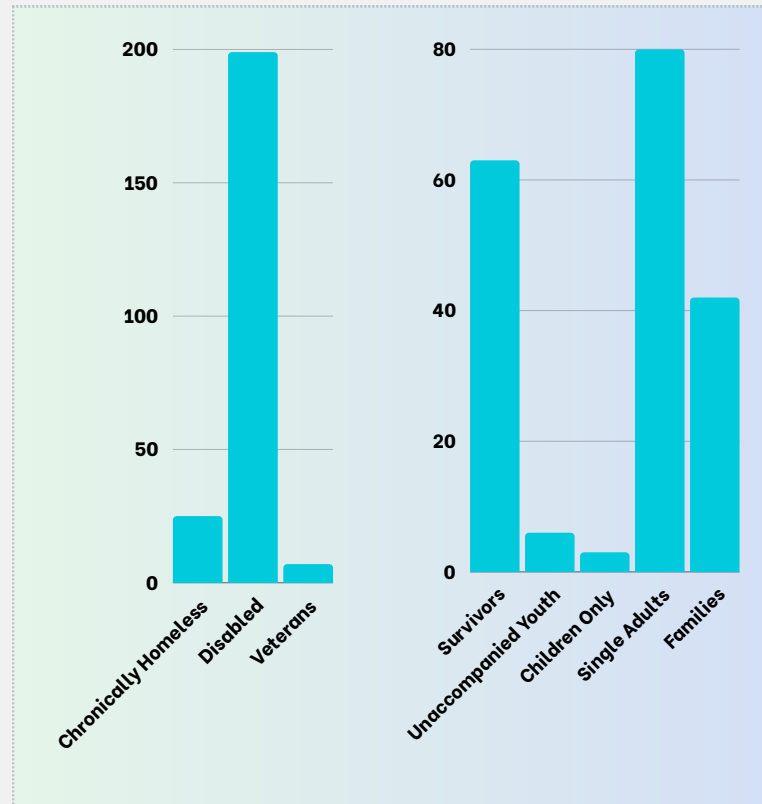
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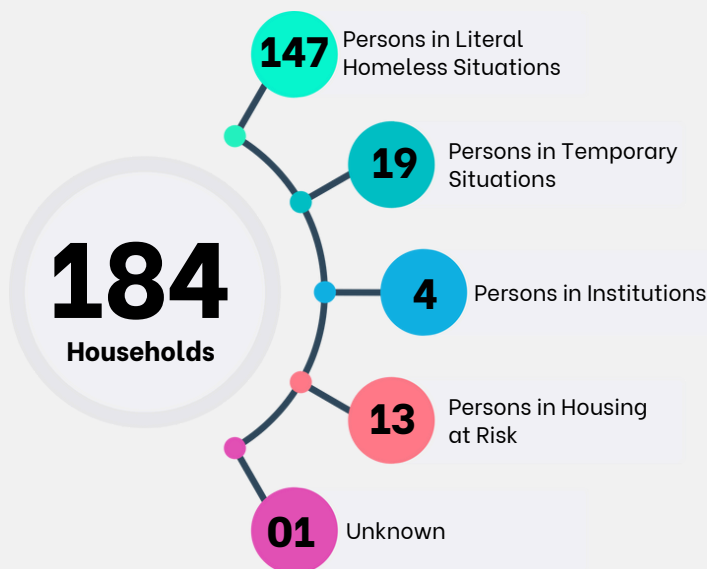
25

In the HMIS Annual Performance Report, 25 individuals were identified as chronically homeless. The previous page reveals a gap in permanent supportive housing beds specifically dedicated to homeless individuals experiencing chronic homelessness.

Identified Homeless in Participating HMIS Programs
Excluding CES

Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

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184 Households

- **147** Persons in Literal Homeless Situations
- **19** Persons in Temporary Situations
- **4** Persons in Institutions
- **13** Persons in Housing at Risk
- **01** Unknown

Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

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NORTHEAST

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in North East Kansas
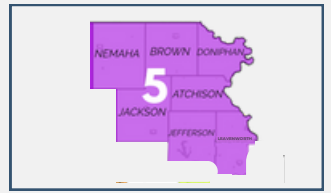
Catholic Charities of Northeast Kansas
Atchinson

Rapid Rehousing	5 Beds in HMIS

Catholic Charities of Northeast Kansas
Leavenworth

Rapid Rehousing	41 Beds in HMIS

Mental Health America of the Heartland

Permanent Supportive Housing	21 Beds in HMIS

Northeast Kansas Community Action Program

Rapid Rehousing	38 Beds in HMIS

Alliance Against Family Violence
Victim Service Provider

Emergency Shelter	19 Beds in HMIS

Rosevilla
Victim Service Provider

Emergency Shelter	17 Beds in HMIS
Safe Haven	11 Beds in HMIS

Leavenworth Housing Authority
Veterans

Permanent Supportive Housing	130 Beds not Integrated in HMIS

Leavenworth Interfaith Community of Hope

Emergency Shelter	43 Beds not Integrated in HMIS

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Bed Capacity

79 Emergency Shelter Beds **47 Beds DV Only**	**0** Transitional Housing Beds
84 Rapid Rehousing Beds	**151** Permanent Supportive Housing Beds **130 Beds Veterans Only**
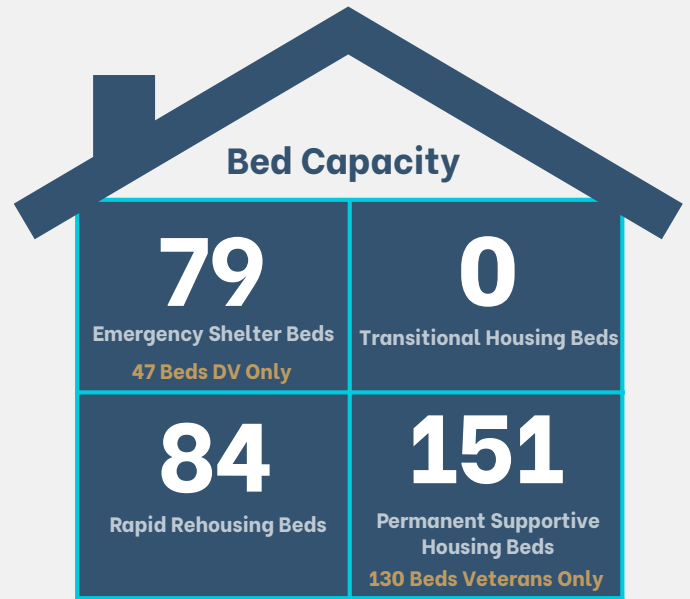
Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 5 PIT Count

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45 UNSHELTERED

52 SHELTERED

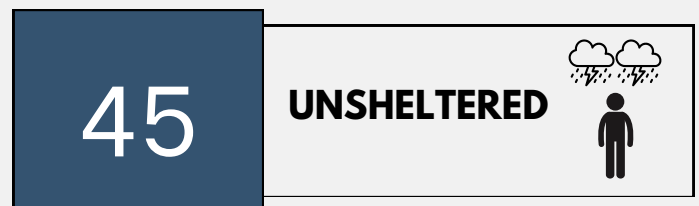*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs*

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NORTHEAST

Populations and Prior Living Situations Identified through Northeast Regional CES List and HMIS Programs
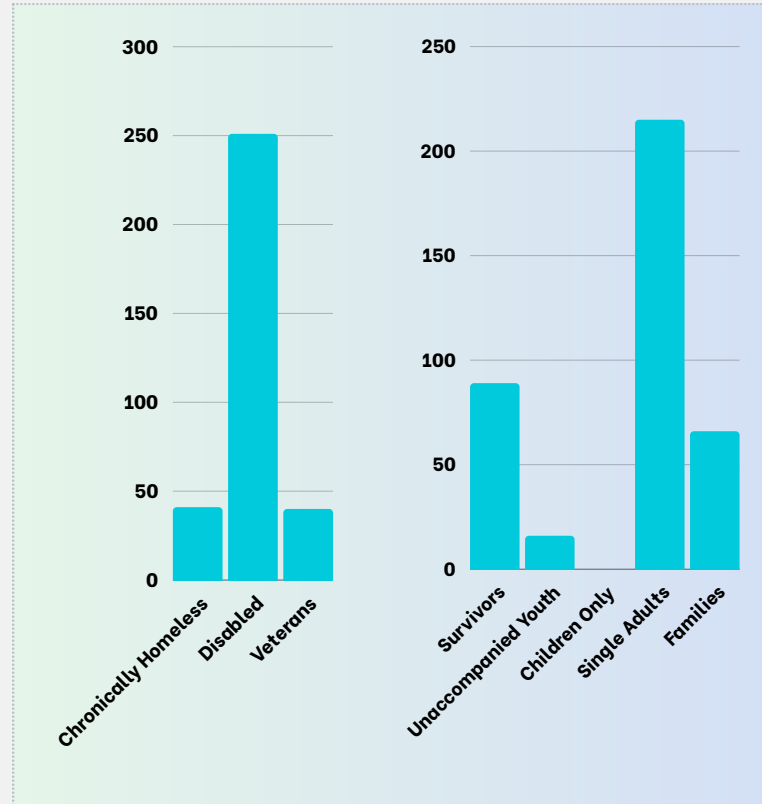
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Identified Homeless in Participating HMIS Programs
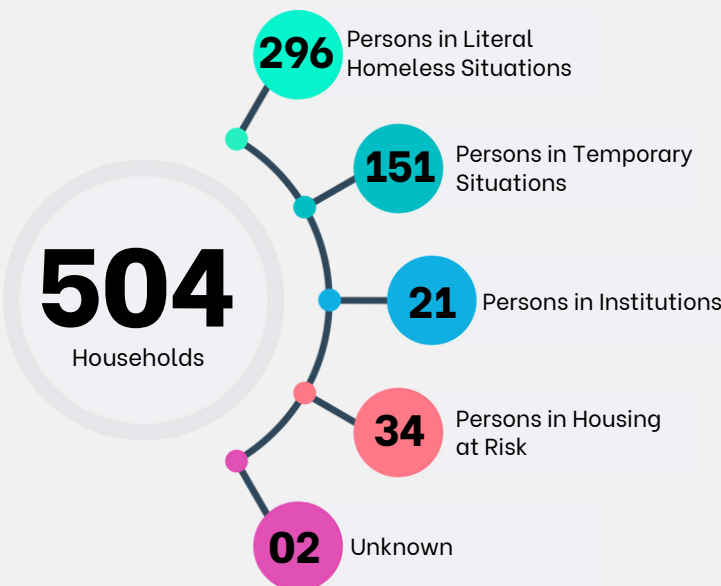**Excluding CES**

41 In the HMIS Annual Performance Report, 41 individuals were identified as chronically homeless. While the previous page indicates a higher number of permanent supportive housing beds designated for these individuals, it should be noted that these beds may already be occupied.

Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

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504 Households

- **296** Persons in Literal Homeless Situations
- **151** Persons in Temporary Situations
- **21** Persons in Institutions
- **34** Persons in Housing at Risk
- **02** Unknown

Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

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DOUGLAS

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in Douglas Kansas

DOUGLAS 6

Catholic Charities of Northeast Kansas

Lawrence

Rapid Rehousing	29 Beds in HMIS

Lawrence Community Shelter

Emergency Shelter	46 Beds in HMIS
Rapid Rehousing	17 Beds in HMIS

The Willow Domestic Violence Center
Victim Service Provider

Emergency Shelter	42 Beds in HMIS

Bert Nash Community Mental Health Center

Rapid Rehousing	63 Beds in HMIS

Lawrence/Douglas County Housing Authority

Permanent Supportive Housing	45 Beds not Integrated into HMIS
Transitional Housing	95 Beds not Integrated into HMIS

Tenants to Home Owners
Victim Service Provider

Transitional Housing	8 Beds in HMIS

Family Promise of Lawrence

Emergency Shelter	33 Beds not Integrated in HMIS

Bert Nash

Transitional Housing	12 Beds not Integrated in HMIS
Emergency Shelter	12 Beds not Integrated in HMIS

City of Lawrence

Emergency Shelter	83 Beds not Integrated in HMIS

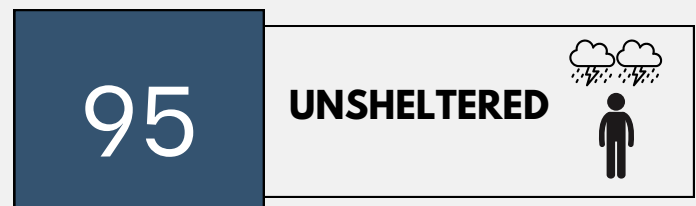*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs*

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Bed Capacity

216 Emergency Shelter Beds *42 Beds DV Only*	**115** Transitional Housing Beds *8 Beds DV Only*
109 Rapid Rehousing Beds	**45** Permanent Supportive Housing Beds
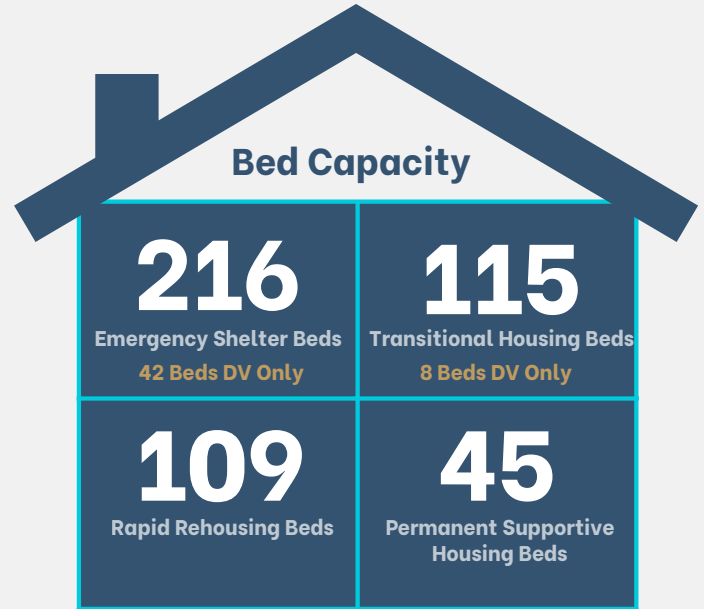
Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 6 PIT Count

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95 UNSHELTERED

256 SHELTERED

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

DOUGLAS

Populations and Prior Living Situations Identified through Douglas Regional CES List and HMIS Programs
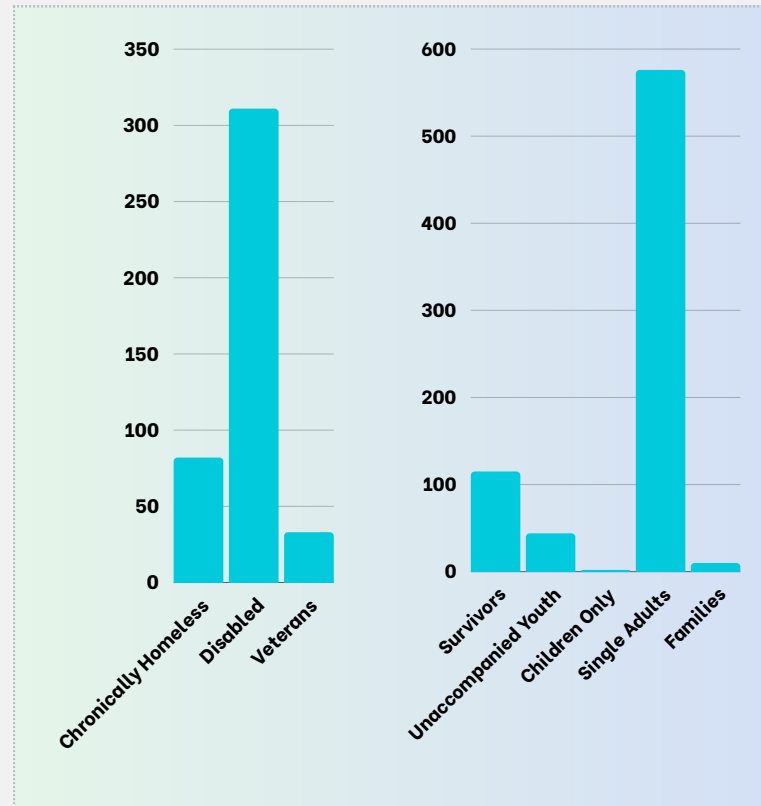
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Excluding CES

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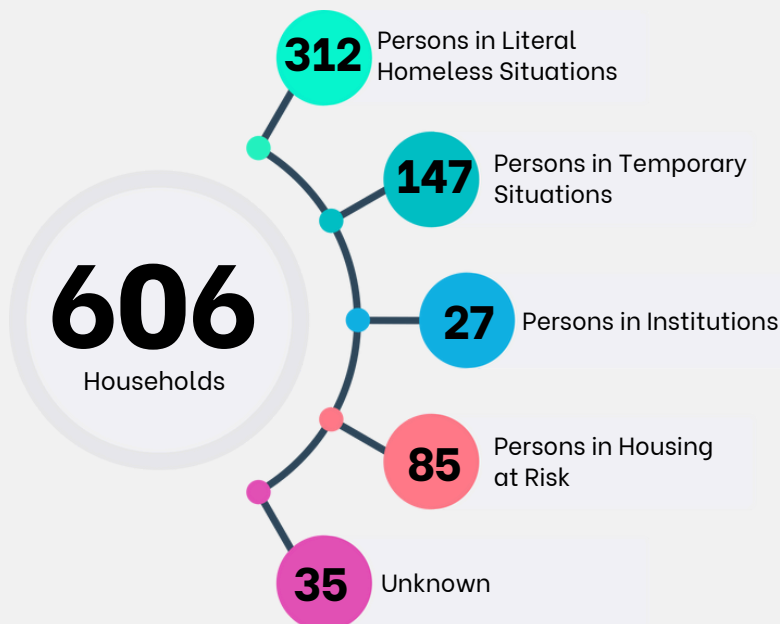
82

In the HMIS Annual Performance Report, 82 individuals were identified as chronically homeless. The previous page reveals a gap in permanent supportive housing beds specifically dedicated to homeless individuals experiencing chronic homelessness.

606 Households

- **312** Persons in Literal Homeless Situations
- **147** Persons in Temporary Situations
- **27** Persons in Institutions
- **85** Persons in Housing at Risk
- **35** Unknown

*Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

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EAST CENTRAL

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in East Central Kansas
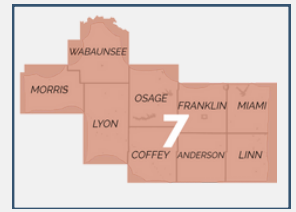
Bloom House Youth Services

Emergency Shelter	9 Beds in HMIS

My Father's House Community Services

Transitional Housing	28 Beds in HMIS

Family Promise of the Flint Hills

Emergency Shelter	12 Beds in HMIS
Rapid Rehousing	4 Beds in HMIS

SOS, Inc.
Victim Service Provider

Emergency Shelter	25 Beds in HMIS

Emporia Rescue Mission

Emergency Shelter	15 Beds not Integrated in HMIS

Shiloh Home of Hope

Transitional Housing	16 Beds not Integrated in HMIS

*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Bed Capacity

61 Emergency Shelter Beds **25 Beds DV Only**	44 Transitional Housing Beds
4 Rapid Rehousing Beds	0 Permanent Supportive Housing Beds
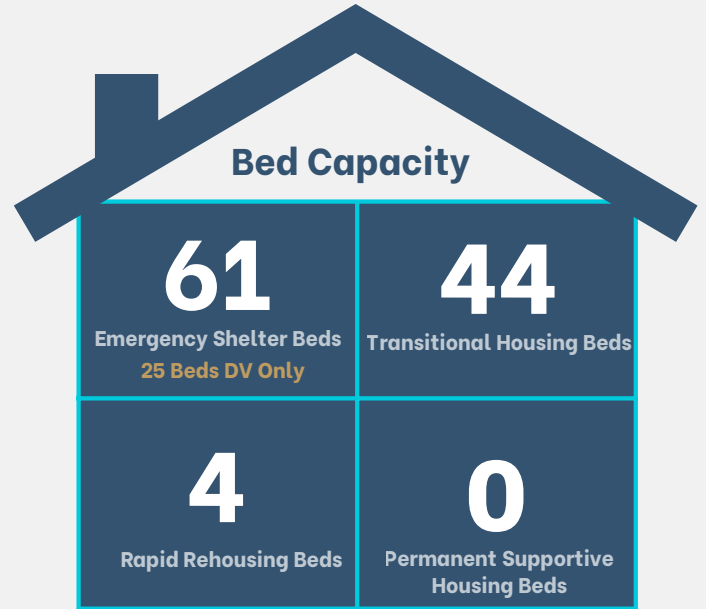
*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 7 PIT Count

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0	UNSHELTERED

60	SHELTERED

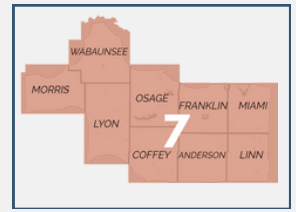*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

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EAST CENTRAL

Populations and Prior Living Situations Identified through East Central Regional CES List and HMIS Programs
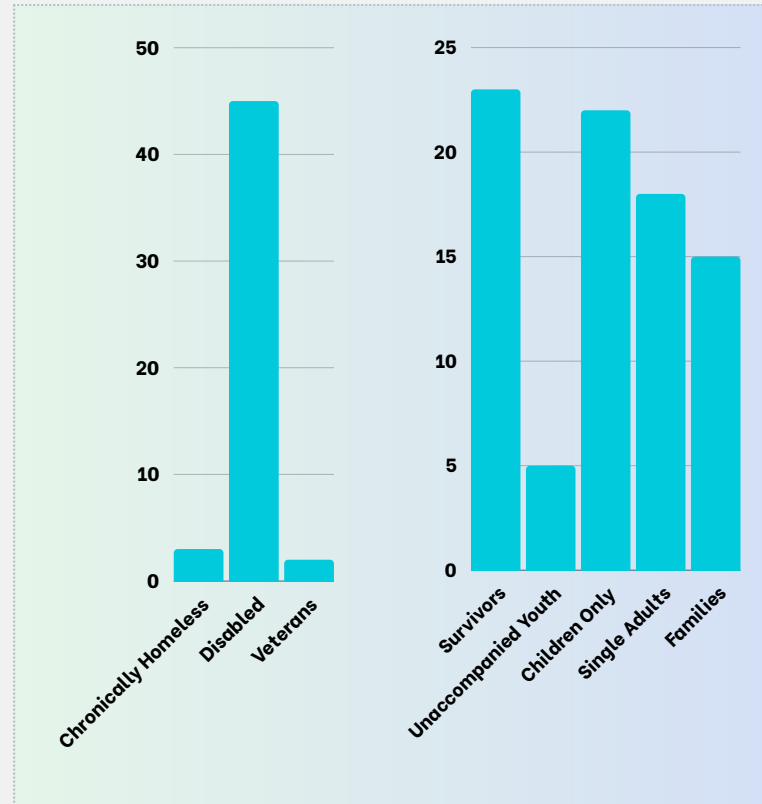

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3
In the HMIS Annual Performance Report, 3 individuals were identified as chronically homeless. The previous page reveals a gap in permanent supportive housing beds specifically dedicated to homeless individuals with disabilities.

Identified Homeless in Participating HMIS Programs
Excluding CES

Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

62 Persons in Literal Homeless Situations

48 Persons in Temporary Situations

132 Households

04 Persons in Institutions

17 Persons in Housing at Risk

01 Unknown

Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

The Regional CE List details the number of households added to the Regional Coordinated Entry System (CES) List from 10/1/2022 to 9/30/2023.

Additionally, this CES Count provides information on the prior living situations of those households before they were entered onto the Regional CES List during the same period. This data helps us understand the diverse backgrounds and circumstances from which households experiencing homelessness come.

By analyzing these prior living situations, we can better tailor our support services and interventions to address the specific needs of these households, ultimately enhancing the effectiveness of our efforts to end homelessness in our community.

SOUTHEAST

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in South Central Kansas

Catholic Charities, Inc.
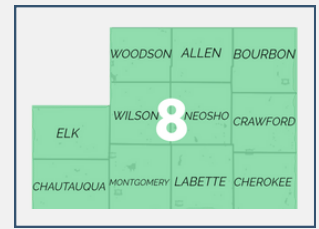
Rapid Rehousing	110 Beds in HMIS

City of Pittsburg

Rapid Rehousing	68 Beds in HMIS

Hope Unlimited, Inc.
Victim Service Provider

Emergency Shelter	12 Beds in HMIS

Safehouse Crisis Center
Victim Service Provider

Emergency Shelter	71 Beds in HMIS

Hannah's House

Emergency Shelter	18 Beds not Integrated in HMIS

Crawford County Mental Health Center

Transitional Housing	6 Beds not Integrated in HMIS

Home Sweet Home

Emergency Shelter	12 Beds not Integrated in HMIS

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

The data presented is reported by individual agencies and may not encompass all aspects or reflect the complete picture. Variations in data collection and reporting practices can result in discrepancies.

Bed Capacity

113 Emergency Shelter Beds **83 Beds DV Only**	**6** Transitional Housing Beds
178 Rapid Rehousing Beds	**0** Permanent Supportive Housing Beds
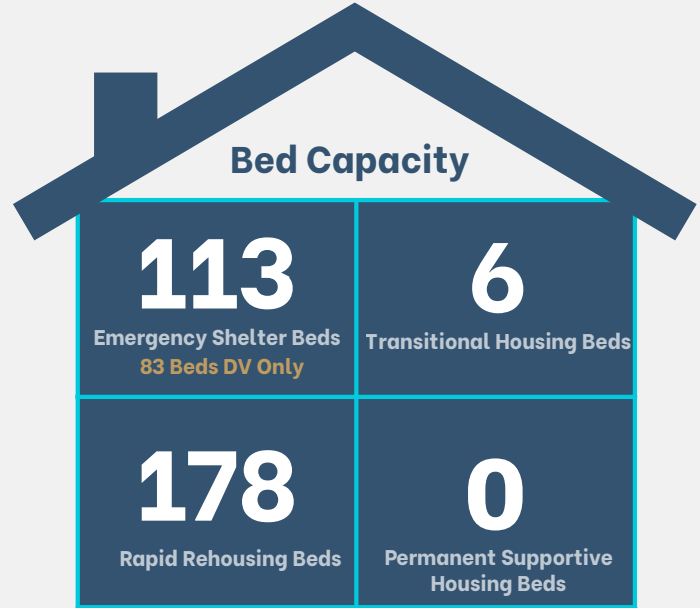
Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 8 PIT Count

The Point-In-Time (PIT) count is a count of unsheltered and sheltered people experiencing homelessness in a shelter, transitional housing, and safe havens on a single night in January of 2023. While required by HUD, the PIT count does not capture an accurate number of people experiencing homelessness, as it only provides a snapshot of a single night and may miss individuals not visible during the count. Furthermore, it does not account for those who are temporarily doubled up or in other unstable housing situations.

54 UNSHELTERED

58 SHELTERED

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

SOUTHEAST

Populations and Prior Living Situations Identified through Southeast Regional CES List and HMIS Programs
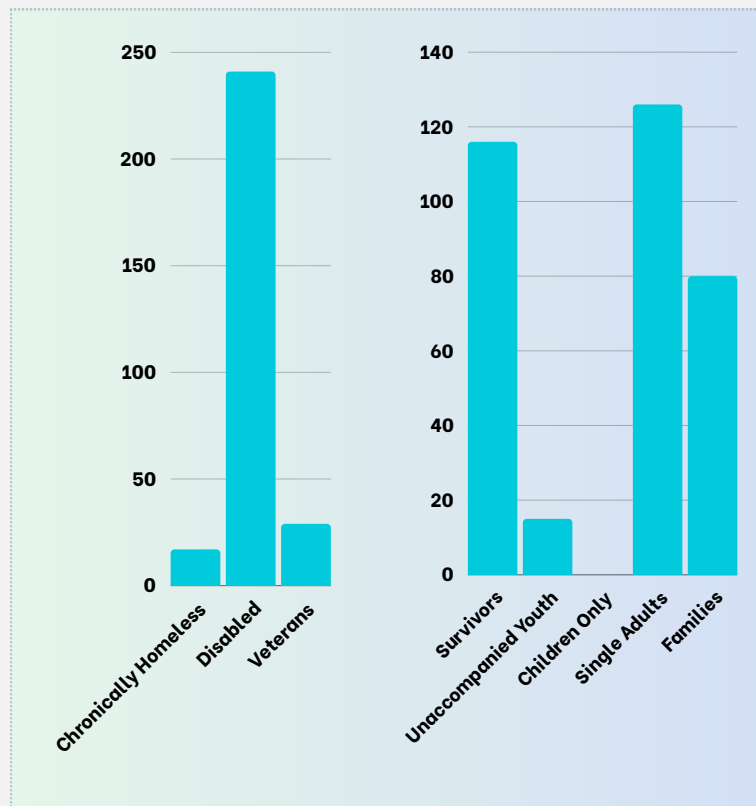

The Annual Performance Report (APR) provides a comprehensive overview of the Homeless Management Information System (HMIS) program data. This report specifically excludes data from the Coordinated Entry System (CES) to focus on the performance and outcomes of individual HMIS-participating programs.

The accompanying data table highlights key metrics, including the number and characteristics of individuals served, categorized by various populations and conditions of homelessness. This includes detailed demographic information and identifies specific subpopulations such as veterans, disabled individuals, and families.

Additionally, the table reflects various populations such as single adults, families, children only, and unaccompanied youth. By examining these metrics, the report and the data table together provide a clear picture of service utilization rates and outcomes achieved, helping to identify areas of success and areas needing further support for future program development and resource allocation.

17

In the HMIS Annual Performance Report, 17 individuals were identified as chronically homeless. The previous page reveals a gap in permanent supportive housing beds specifically dedicated to homeless individuals experiencing chronic homelessness.

Identified Homeless in Participating HMIS Programs
Excluding CES

Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

505 Households

- **395** Persons in Literal Homeless Situations
- **5** Persons in Temporary Situations
- **5** Persons in Institutions
- **30** Persons in Housing at Risk
- **01** Unknown

Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

The Regional CE List details the number of households added to the Regional Coordinated Entry System (CES) List from 10/1/2022 to 9/30/2023.

Additionally, this CES Count provides information on the prior living situations of those households before they were entered onto the Regional CES List during the same period. This data helps us understand the diverse backgrounds and circumstances from which households experiencing homelessness come.

By analyzing these prior living situations, we can better tailor our support services and interventions to address the specific needs of these households, ultimately enhancing the effectiveness of our efforts to end homelessness in our community.

FLINT HILLS

Optimizing Homeless Services through HMIS Integration: Bed Capacity and PIT Findings in Flint Hills Kansas

Manhattan Emergency Shelter

Emergency Shelter	47 Beds in HMIS
Rapid Rehousing	40 Beds in HMIS

Pawnee Mental Health Services

Emergency Shelter	9 Beds in HMIS

Crisis Center, Inc.
Victim Service Provider

Emergency Shelter	35 Beds in HMIS

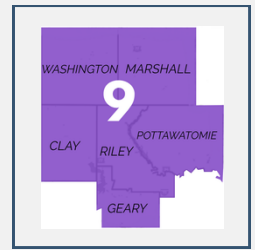### Manhattan Housing Authority
Veterans

Permanent Supportive Housing	55 Beds not Integrated in HMIS

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Bed Capacity

91 Emergency Shelter Beds **35 Beds DV Only**	**0** Transitional Housing Beds
40 Rapid Rehousing Beds	**55** Permanent Supportive Housing Beds **55 Beds Veterans Only**

Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs

Region 9 PIT Count

The Point-In-Time (PIT) count is a count of unsheltered and sheltered people experiencing homelessness in a shelter, transitional housing, and safe havens on a single night in January of 2023. While required by HUD, the PIT count does not capture an accurate number of people experiencing homelessness, as it only provides a snapshot of a single night and may miss individuals not visible during the count. Furthermore, it does not account for those who are temporarily doubled up or in other unstable housing situations.

13 UNSHELTERED

49 SHELTERED
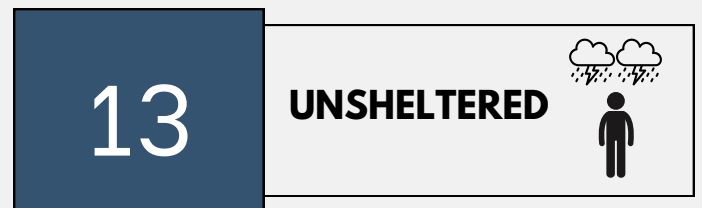
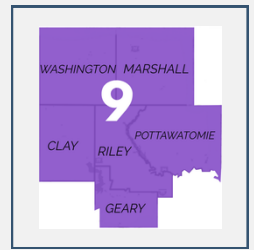*Data Source: 2023 KS BoS CoC HIC Report, [HUD 227-AD] Annual Performance Reports for RRH programs*

The data presented is reported by individual agencies and may not encompass all aspects or reflect the complete picture. Variations in data collection and reporting practices can result in discrepancies.

FLINT HILLS

Populations and Prior Living Situations Identified through Flint Hills Regional CES List and HMIS Programs
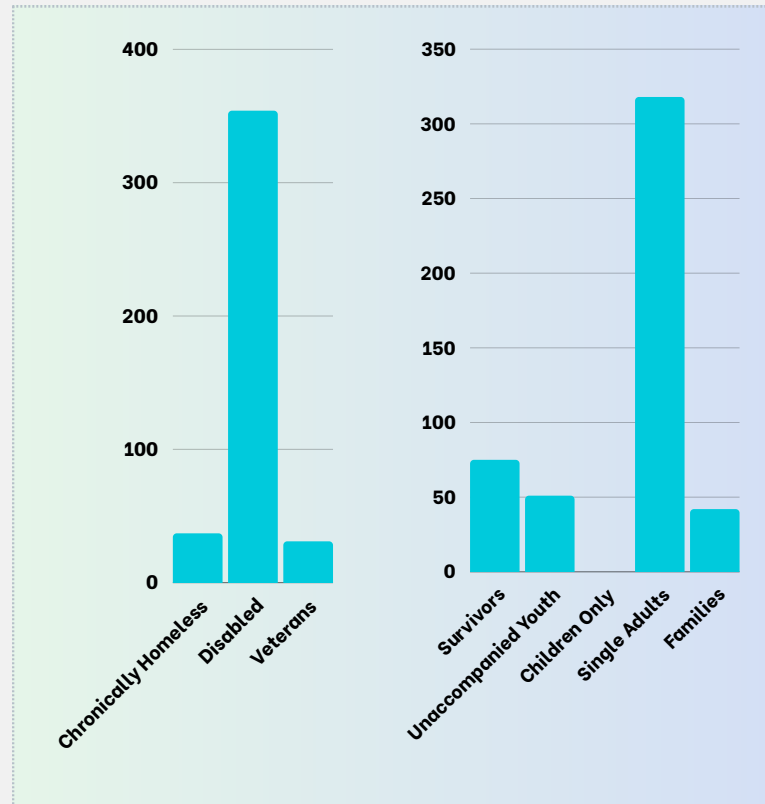

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Additionally, the table reflects various populations such as single adults, families, children only, and unaccompanied youth. By examining these metrics, the report and the data table together provide a clear picture of service utilization rates and outcomes achieved, helping to identify areas of success and areas needing further support for future program development and resource allocation.

Identified Homeless in Participating HMIS Programs
Excluding CES

Data Source: [HUD 227-AD] Annual Performance Reports 10/1/22-9/30/23 Sections Q5a, Q8a, Q13c2, Q14a Includes only non-VSP, HMIS participating program data

37

In the HMIS Annual Performance Report, 37 individuals were identified as chronically homeless. While the previous page indicates a higher number of permanent supportive housing beds designated for these individuals, it should be noted that these beds may already be occupied.

107 Households

- **45** Persons in Literal Homeless Situations
- **47** Persons in Temporary Situations
- **10** Persons in Institutions
- **05** Persons in Housing at Risk
- **00** Unknown

Data Source: CES Evaluation Report from 10/1/2022 to 9/30/2023

CES Prior Living Situations
Excluding all other HMIS Programs

The Regional CE List details the number of households added to the Regional Coordinated Entry System (CES) List from 10/1/2022 to 9/30/2023.

Additionally, this CES Count provides information on the prior living situations of those households before they were entered onto the Regional CES List during the same period. This data helps us understand the diverse backgrounds and circumstances from which households experiencing homelessness come.

By analyzing these prior living situations, we can better tailor our support services and interventions to address the specific needs of these households, ultimately enhancing the effectiveness of our efforts to end homelessness in our community.

REGIONAL GAPS

2023 Regional Analysis of PSH Bed Shortages and Identified Chronically Homeless Individuals

NW Region 1	SW Region 2	NC Region 3	SC Region 4	NE Region 5
1 Identified Chronic	11 Identified Chronic	60 Identified Chronic	25 Identified Chronic	41 Identified Chronic
0 PSH Beds	0 PSH Beds	30 PSH Beds **30 Beds Veterans Only**	10 PSH Beds	151 PSH Beds **130 Beds Veterans Only**
-1 Bed Shortage	-11 Bed Shortage	-30 Bed Shortage	-15 Bed Shortage	110 Potentially Occupied Beds
Douglas Region 6	**EC** Region 7	**SE** Region 8	**Flint Hills** Region 9	**Multi-Regional**
82 Identified Chronic	3 Identified Chronic	17 Identified Chronic	37 Identified Chronic	n/a
45 PSH Beds	0 PSH Beds	0 PSH Beds	55 PSH Beds **55 Beds Veterans Only**	8 PSH Beds **8 Beds Veterans Only**
-37 Bed Shortage	-3 Bed Shortage	-17 Bed Shortage	18 Potentially Occupied Beds	Included in Total

-114

The Kansas Balance of State is experiencing a significant shortage of Permanent Supportive Housing (PSH) beds, particularly in relation to the number of individuals identified as disabled who qualify for and need these beds. Across all nine regions, the analysis reveals a total shortfall of 114 PSH beds. It's important to note that many of the PSH beds are dedicated beds for a certain sub-population.

The current capacity of PSH programs is insufficient to meet the demand, leaving many chronically homeless individuals without the stable, supportive housing they require. This shortage presents a major challenge for the Continuum of Care (CoC) as it strives to provide adequate housing solutions for its most vulnerable populations. The lack of PSH beds not only exacerbates the difficulties faced by chronically homeless individuals but also strains the entire homelessness response system, as these individuals often cycle through emergency shelters and other temporary housing solutions without achieving long-term stability.

KS BOS COC
Regional Bed Capacity Comparison
Housing Inventory Count (HIC)

HIC Shelter Beds

- FH 91
- NW 14
- SW 99
- SE 129
- NC 205
- EC 61
- SC 129
- Douglas 216
- NE 79

HIC TH Beds

- SE 6
- NC 23
- EC 48
- SC 105
- Douglas 115

HIC RRH Beds*

- SW 45
- SE 86
- NC 17
- SC 47
- Douglas 44
- NE 40

HIC PSH Beds

- NC 30
- FH 55
- SC 10
- Douglas 45
- NE 151
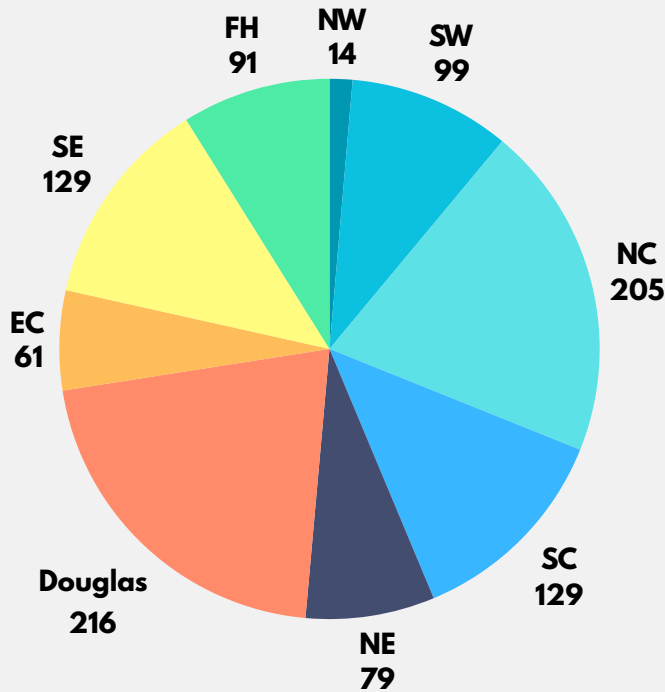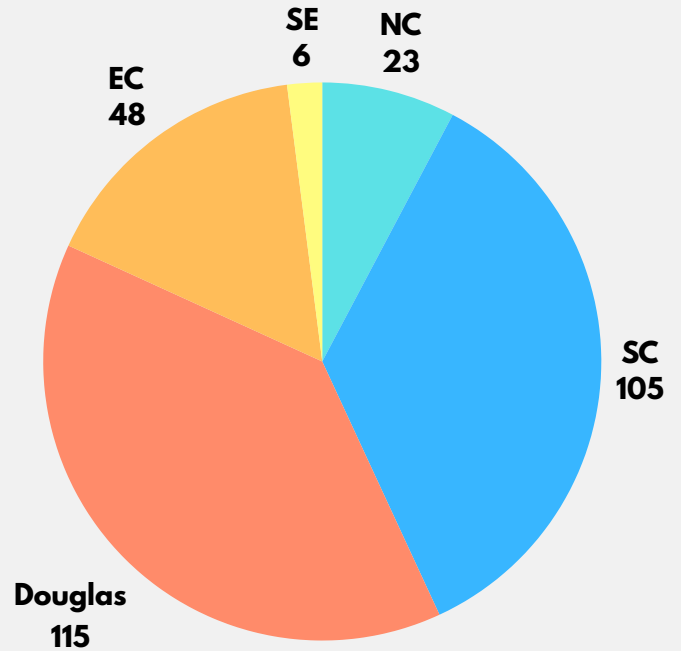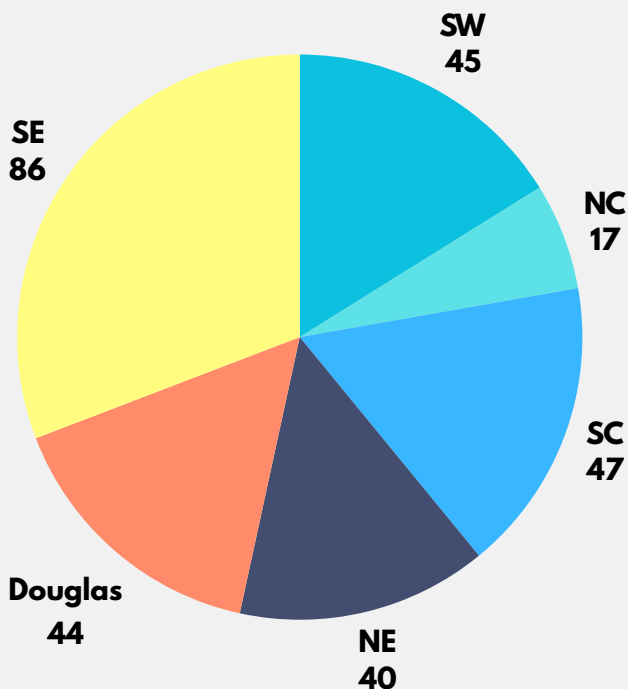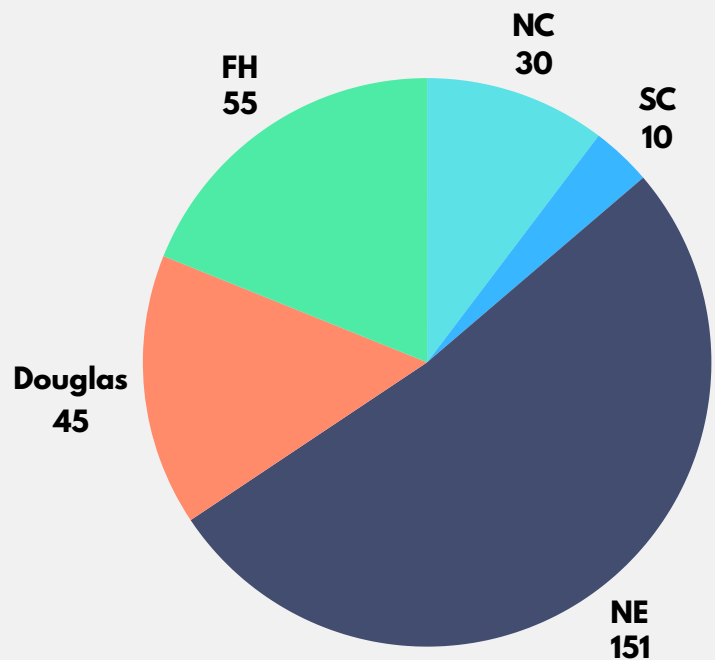
*Data Source: 2023 Housing Inventory Count (HIC)
*In the HIC, RRH includes only those actively enrolled on the night of the PIT count with a move-in date.

KS BOS COC

Regional Comparison: 2023 Point in Time Count (PIT)

PIT Unsheltered Count

EC 0
FH 13
NW 0
SW 52
SE 54
NC 15
SC 2
NE 45
Douglas 95

PIT Sheltered Count

FH 49
SW 26
SE 58
NW 0
EC 60
NC 137
SC 156
Douglas 256
NE 52
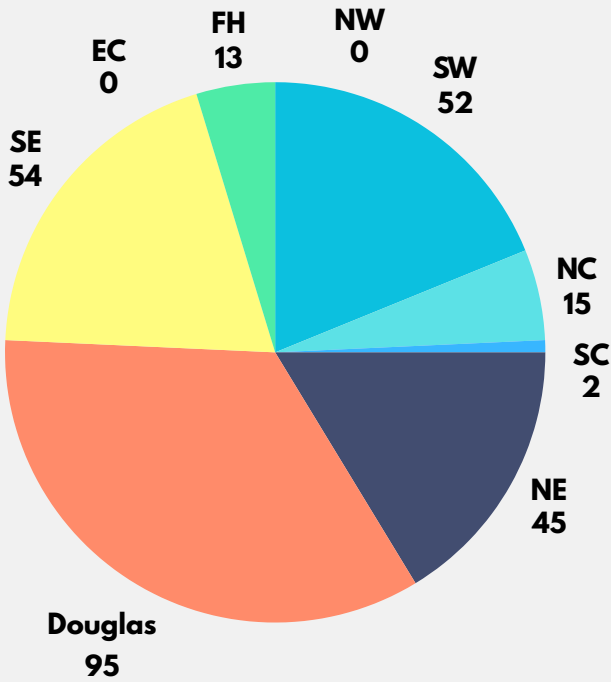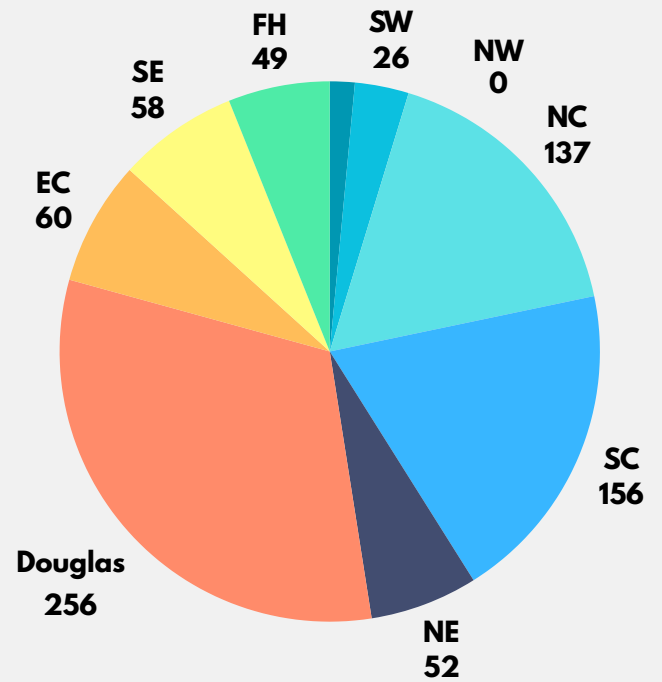
CES Regional County Counts
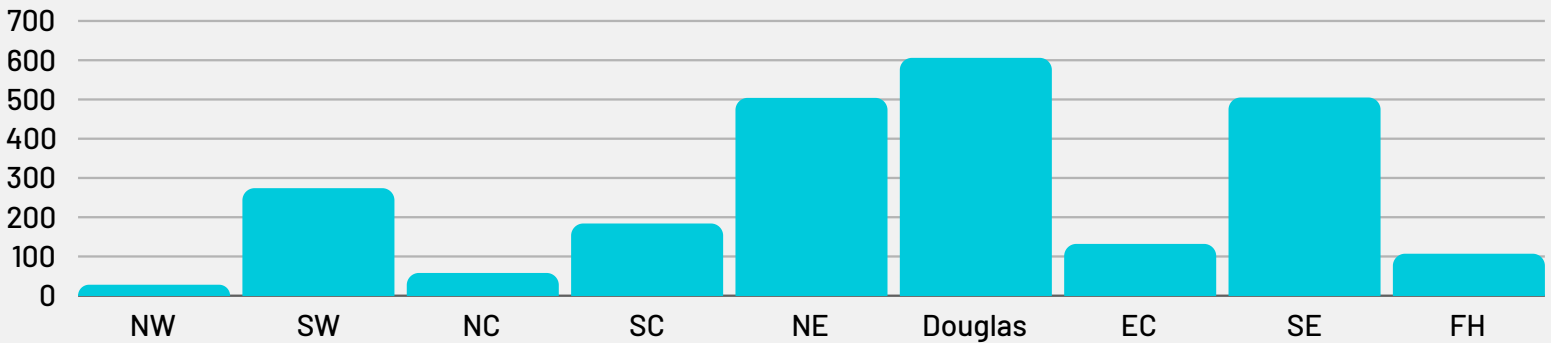
KEY FINDINGS

The 2023 Point-in-Time (PIT) count for the Kansas Balance of State Continuum of Care (KS BOS COC) reveals significant regional variations in homelessness. Douglas County has the highest counts, with 95 unsheltered and 256 sheltered individuals, indicating a concentrated homelessness issue. In contrast, regions like NC and SE show lower counts, with NC reporting 15 unsheltered and 137 sheltered individuals, and SE reporting 54 unsheltered and 58 sheltered individuals. The CES Regional County Counts further highlight Douglas County as a critical area, with over 600 cases, while other regions like EC and FH show minimal counts. The lower numbers in some regions could be attributed to either a lack of agency participation in the count or the challenges of surveying more rural areas.

KANSAS CONTINUA OF CARE GRANT INVENTORY WORKSHEET(GIW)

2023 Funding Comparison

KS BoS
$3,078,753

- HMIS 4.2%
- Admin 6.1%
- Leasing 4.9%
- Operating Costs 7.7%
- Rental Assistance 46.6%
- Supportive Services 30.5%

Topeka
$1,725,339

- Admin 7.2%
- Rental Assistance 92.8%

Wichita
$2,719,842

- HMIS 12.7%
- Admin 3.9%
- Leasing 10.7%
- Operating Costs 4.9%
- Supportive Services 21.7%
- Rental Assistance 46.2%

JoCo
$856,459

- HMIS 7.8%
- Admin 2.6%
- Supportive Services 23%
- Rental Assistance 66.5%
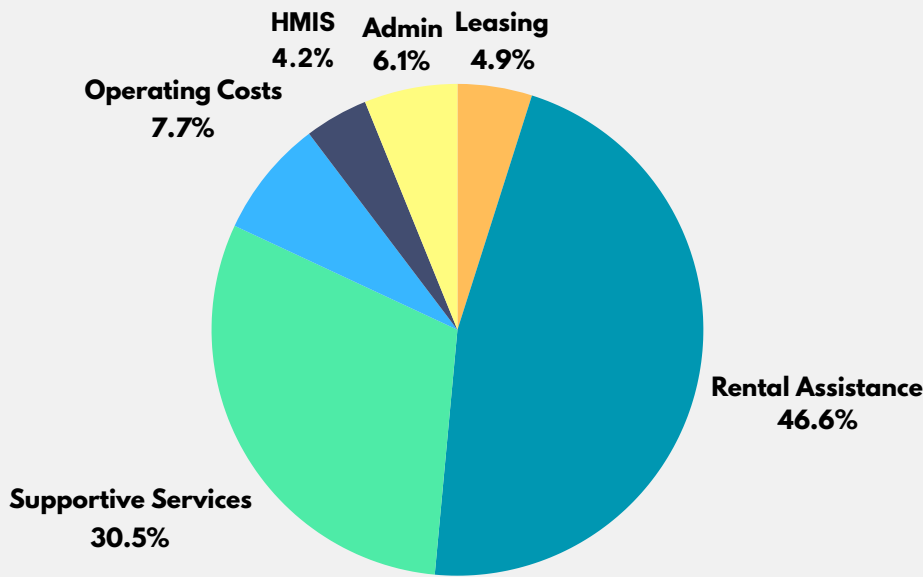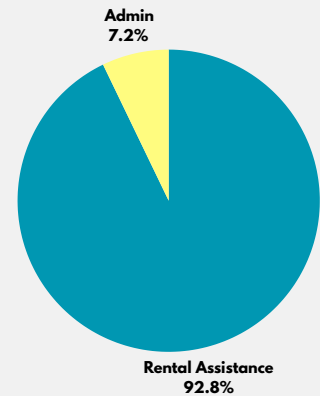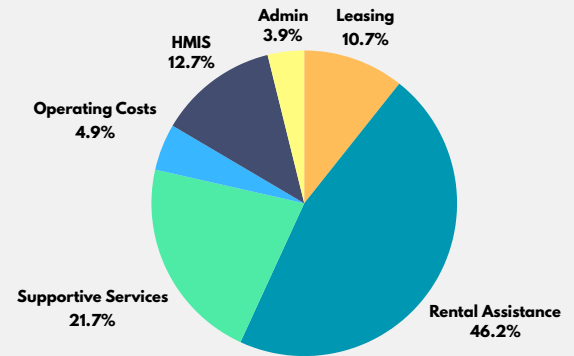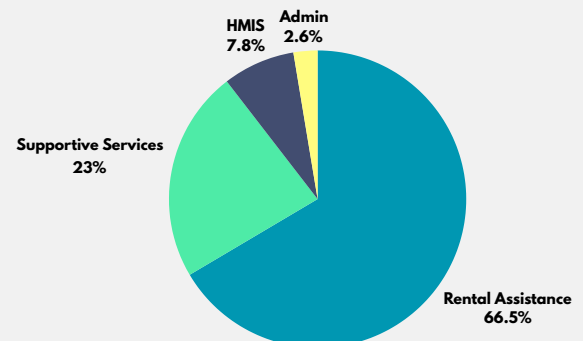
KEY FINDINGS

The Kansas Continuum of Care (CoC) Grant Inventory Worksheet (GIW) shows varying funding allocations across regions.

The KS BoS receives $3,078,753, with 46.6% for rental assistance and 30.5% for supportive services. In contrast, Topeka's $1,725,339 mainly funds rental assistance (92.8%) and supportive services (7.2%).

Wichita's $2,719,842 is more balanced, with 46.2% for rental assistance and 21.7% for supportive services, alongside allocations for administrative costs (3.9%) and HMIS (12.7%).

Johnson County (JoCo) received $856,459, focusing 66.5% on rental assistance and 23% on supportive services.

This comparison highlights the KS BoS's balanced funding approach, while Topeka and JoCo prioritize rental assistance. Wichita's funding mirrors the KS BoS but with slightly different allocations for administrative and operating costs. These variations reflect each region's specific needs and strategies.

- **Length of Stay from Entry to Move-In:**
  - The length of stay for RRH decreased, indicating faster placements.
  - PSH and Transitional Housing (TH) lengths of stay slightly increased.
- **Exits to Permanent Housing:**
  - RRH exits decreased, indicating fewer successful transitions.
  - PSH exits saw a significant decrease.
  - TH exits saw a slight decrease.
- **Returns to Homelessness within 12 Months:**
  - RRH returns to homelessness decreased.
  - TH had insufficient data.
  - PSH had insufficient data.
- **Income Metrics:**
  - Non-employment income for stayers in RRH remained the same. PSH non-employment income increased from 64% in 2022 to 75% in 2023.
  - Non-employment income for leavers increased in RRH and TH, with a decrease for PSH.
  - Employment income for stayers showed mixed results; significant decrease for PSH stayers while RRH remained the same.
  - Employment income for leavers remained relatively unchanged for RRH while PSH saw a significant decrease and TH increased.
- **Persons with Disabilities by Program Type**
  - Rapid Re-Housing Increased from 37% to 45%.
  - Permanent Supportive Housing increased from 69% to 78%.
  - Transitional Housing decreased from 30% to 25%.
- **Housing Placement for People Experiencing Unsheltered Homelessness**
  - Rapid Re-Housing slightly decreased from 47% to 46%.
  - Permanent Supportive Housing increased from 23% to 27%.
  - Transitional Housing had a significant decline from 34% to 26%.

Summary

2023 data on homelessness services highlight several trends influenced by various factors. The length of stay for Rapid Re-Housing (RRH) has decreased, indicating faster placements, while Permanent Supportive Housing (PSH) and Transitional Housing (TH) have slightly increased, possibly due to complex participant needs and limited housing availability. Exits to permanent housing have decreased for RRH and PSH, indicating fewer successful transitions, with TH also seeing a slight decrease.

Returns to homelessness within 12 months have decreased for RRH, suggesting individuals are maintaining stable housing, while data for TH and PSH is insufficient. Non-employment income for PSH stayers increased from 64% to 75% suggesting access to benefits, while non-employment income for leavers increased in RRH and TH but decreased in PSH. Employment income for stayers significantly decreased in PSH, while RRH and TH showed stability or improvement.

The proportion of persons with disabilities increased in RRH and PSH, reflecting better inclusivity and Housing First policies, but decreased in TH, indicating retention challenges. Housing placements for people experiencing unsheltered homelessness slightly decreased in RRH and increased in PSH, but significantly dropped in TH.

KEY FINDINGS
Populations Identified and System Performance

Identified Populations

Chronic Population
Top 3 Regions with the Highest Number of Identified Chronic Households
  1. Douglas   2. North Central   3. Northeast

Disabled Population
Top 3 Regions with the Highest Number of Identified Disabled Population
  1. Flint Hills 2. Douglas   3. Northeast

Veteran Population
Top 3 Regions with the Highest Number of Identified Veteran Households
  1. North Central   2. Northeast   3. Douglas

Survivor Population
Top 3 Regions with the Highest Number of Identified Survivor Households
  1. Southeast   2. Douglas   3. Northeast

Single Adults
Top 3 Regions with the Highest Number of Identified Single Adults Households
  1. Douglas 2. Flint Hills 3. Northeast

Families
Top 3 Regions with the Highest Number of Identified Families Households
  1. Southeast   2. Northeast   3. Flint Hills

Unaccompanied Youth
Top 3 Regions with the Highest Number of Identified Unaccompanied Youth (18 to 24)
  1. Flint Hills   2. Douglas   3. North Central

Children Only Households
Top 3 Regions with the Highest Number of Identified Child Only Households
  1. East Central   2. South Central   3. n/a

Housing Inventory Count (HIC)

Emergency Shelter Beds
Top 3 Regions with the Highest Number of Emergency Shelter Beds
  1. North Central   2. Douglas   3. South Central

Transitional Housing Beds
Top 3 Regions with the Highest Number of Transitional Housing Beds
  1. Douglas   2. South Central   3. East Central

Rapid Rehousing Beds
Top 3 Regions with the Highest Number of Rapid Rehousing Beds
  1. Southeast   2. Douglas   3. Southwest

Permanent Supportive Housing Beds
Top 3 Regions with the Highest Number of Permanent Housing Beds
  1. Northeast   2. Flint Hills   3. Douglas

Point-In-Time Count (PIT)
  - The number of sheltered individuals increased from 668 in the 2022 count to 806, indicating a increase in the capacity or utilization of shelter services.
  - Unsheltered individuals increased from 261 to 271, highlighting a growing issue of individuals living without any form of shelter.
  - Unaccompanied youth aged 18-24 accounted for 49 individuals while zero individuals were reported under the age of 18. The high number of unaccompanied youth emphasizes the need for targeted interventions for young people experiencing homelessness.

Region 1: Northwest

Northwest Kansas faces a significant challenge with a shortage of Permanent Supportive Housing (PSH) beds. With 1 chronically homeless individual identified and no PSH beds available. This area also has only 14 emergency shelter beds and lacks transitional housing entirely. It's important to note that the 14 shelter beds are dedicated to DV only. The rapid rehousing (RRH) program has 26 beds, which is insufficient to cover the needs of the homeless population. Additionally, there are 12 sheltered individuals, highlighting the urgent need for increased emergency shelter capacity and the introduction of transitional housing options.

Region 2: Southwest

Southwest Kansas also struggles with a lack of PSH beds. The region has 86 emergency shelter beds and 107 rapid rehousing beds but no PSH beds, creating a critical gap for long-term housing for chronically homeless individuals. It's also important to note that 46 of the emergency shelter beds are dedicated to DV only. There is a also a high number of individuals identified through HMIS as having a disability. With 90 individuals identified as disabled, it's crucial to address housing barriers and long term housing solutions.

Region 3: North Central

North Central Kansas has the highest number of emergency shelter beds at 224, it's also important to note that 152 shelter beds are dedicated to DV only and 40 beds are dedicated to the winter months. Concluding that only 52 shelter beds are available without DV designation and are year round. There are 66 rapid rehousing beds in which 11 are dedicated to DV and 36 transitional housing beds. The region also has 30 permanent supportive housing beds that are dedicated to veterans. With 60 individuals identified as chronically homeless, there is a shortage of PSH beds. This gap indicates a need for more permanent supportive housing to meet the needs of the chronically homeless population and expansion of emergency shelters, rapid rehousing and transitional housing. The North Central Region also has a considerably high number of 136 individuals with a disabling condition identified through HMIS.

Region 4: South Central

South Central Kansas has 126 emergency shelter beds, 51 of those beds are dedicated to DV, and 57 rapid rehousing, with 2 beds dedicated to DV, but only 10 PSH beds. The region had 25 individuals identified as chronically homeless, leading to a shortage of PSH beds. The region also offers 105 transitional housing beds, which provides some level of support but does not address the need for permanent solutions. The South Central Region has a total of 199 individuals identified through HMIS as disabled. It is crucial to address the housing barriers and expand housing and services in the region.

Region 5: Northeast

Northeast Kansas is comparatively better equipped with 79 emergency shelter beds, with 47 beds dedicated to DV, and 84 rapid rehousing beds, and 151 PSH beds. Of those permanent supportive housing beds, 130 are dedicated to veterans. With 41 individuals identified as chronically homeless, this region appears to have sufficient PSH capacity. However, the actual usage and accessibility of these beds need to be continuously monitored, typically, PSH beds are often at capacity. North Central has the third highest number of individuals identified through HMIS as disabled. The total number of individuals identified that have one or more disabling conditions is 251, signaling the need for expanded housing options.

Region 6: Douglas County

Douglas County Kansas has 216 emergency shelter beds, 42 which are dedicated for DV, and 109 rapid rehousing beds with 45 for PSH. Transitional Housing beds are considerably higher in the region with 115 and 8 beds dedicated to DV, but is insufficient to meet the needs for permanent supportive housing to provide stable, long-term accommodation. The Douglas County Region has the second highest number of individuals identified through HMIS as disabled. The total number of individuals identified that have one or more disabling conditions is 311. It is crucial to expand housing programs with supportive services to address the needs of the high number of individuals experiencing homelessness in Douglas County.

Region 7: East Central

East Central Kansas has 61 emergency shelter beds, with 25 beds dedicated to DV, 4 rapid rehousing beds and 44 transitional housing beds. However, there are 0 PSH beds in the region. This gap highlights the necessity of expanding PSH capacity to adequately support the chronically homeless population. HMIS identified 45 individuals having one or more disabilities. While this number is relatively low compared to other regions, it has a big impact on the housing programs and emergency shelter, it's important to expand long term housing options and supportive services.

Region 8: Southeast

Southeast Kansas offers 113 emergency shelter beds, 83 beds dedicated to DV, and 178 rapid rehousing beds but has no PSH beds available. With 30 individuals identified as chronically homeless, the lack of PSH beds creates a significant gap in long-term housing solutions. The region also provides 6 transitional housing beds, which are essential but not sufficient for the growing population of homeless individuals in the region. HMIS identified 241 individuals with one or more disability in the South East Region, suggesting the need for expanded long term housing supports.

Region 9: Flint Hills

Flint Hills has 91 emergency shelter beds, 35 beds dedicated to DV. and 40 rapid rehousing beds, along with 55 PSH beds dedicated to veterans. With 37 individuals identified as chronically homeless, this region requires additional PSH beds to fully meet the needs of its chronically homeless population. The Flint Hills Region has the highest number of disabled individuals identified through HMIS at 354, it is critical to expand long term housing solutions in this region.

Summary of Regional Findings and Gaps

The Kansas Balance of State (BoS) Continuum of Care (CoC) encompasses nine regions, each facing unique challenges in addressing homelessness. A critical and pervasive issue across all regions is the severe shortage of Permanent Supportive Housing (PSH) beds. Regions such as Northwest Kansas and Southeast Kansas have no PSH beds available, leaving significant gaps in support for chronically homeless individuals. The absence of transitional housing in most regions further complicates efforts to provide a continuum of care, limiting the ability to transition individuals from emergency shelters to stable, long-term housing.

The availability of emergency shelter beds and Rapid Rehousing (RRH) programs varies significantly across regions. North Central Kansas and Douglas County have relatively higher numbers of emergency shelter beds, yet these numbers are still insufficient to meet the needs of their homeless populations. In contrast, Northeast Kansas and East Central Kansas have far fewer emergency shelter beds, which is inadequate to address the demand, especially during peak times. Several regions, including Douglas County, report high numbers of unsheltered individuals, indicating an urgent need for increased outreach, emergency shelter services, and tailored support programs to address this vulnerable group.

To address these challenges, each region requires a multifaceted approach involving increased investment in PSH beds, the introduction of transitional housing, and expansion of RRH programs. Northwest Kansas and Southwest Kansas urgently need more PSH and emergency shelter beds to support their homeless populations effectively. North Central Kansas, South Central Kansas, and Northeast Kansas also need additional resources to address their bed shortages and high numbers of unsheltered individuals. Douglas County, with its severe PSH bed shortage, must focus on expanding its emergency shelters and RRH programs. By addressing these gaps through increased funding, community engagement, and targeted support services, the Kansas BoS CoC can improve housing and support for vulnerable populations across all regions.

RECOMMENDATIONS
KS-507

Integration and Data

Integration of Non-HUD Funded Agencies
- Current Situation: Non-HUD funded agencies often operate outside the HMIS (Homeless Management Information System), leading to fragmented data and service gaps. It's important to note that Domestic Violence Service Providers utilize a HMIS comparable database to ensure safety for all survivors.
- HUD's NOFO awards points for integrating Non-HUD funded agencies into HMIS. Increasing agencies could lead to a higher score, thus potential increase in funding for the CoC.
- Recommendations: Encourage and facilitate the integration of these agencies into the HMIS to ensure comprehensive data collection and service delivery.

Data-Driven Decisions
- Current Situation: Insufficient use of HMIS data limits the ability to plan effectively and allocate resources efficiently.
- Recommendations:
  - Optimize Data Utilization: Ensure all agencies fully leverage HMIS to capture and use comprehensive data on homelessness.
  - Utilize Data: Use data from HMIS to identify trends, gaps, and areas of need, informing funding decisions, program development, and policy initiatives.

Training and Technical Support
- Current Situation: The HMIS data entry process is complex, leading to potential inaccuracies and data quality issues.
- Recommendations:
  - Provide continuous training and technical assistance to help end users navigate the complexities of HMIS data entry and emphasize the importance of accurate data. This training should be adaptive to cover all aspects of HMIS use.
  - Implementing HMIS Office Hours for non-urgent live technical support issues.
  - Streamline support services to quickly address and resolve issues for end users and case managers. Create an escalation option for HMIS Tickets and an option to request live training via zoom.

Enhancing Point-In-Time Count Processes
- Current Situation: Some rural counties lack previous PIT data despite having identified CES numbers.
- Recommendations:
  - Focus on developing the PIT count process in these counties to obtain a more accurate picture of homelessness.
  - Prioritize these areas for data collection and engagement.

Improve CES Access
- Current Situation: Continuous Improvement of CES Access Points
- Recommendations:
  - Utilize Regional Coordinators and CES Navigators to provide outreach to regions with limited Access Points.
  - Increase Coordinated Entry Access Points.
  - Increase outreach and education.

Housing and Programs

Expand Rapid Rehousing (RRH) Programs
- Current Situation: There is a need for more immediate housing solutions to reduce the length of stay in shelters.
- Recommendations:
  - Expand RRH programs to quickly move individuals and families into stable housing.
  - Engage Local Governments: Advocate for local governments to allocate budgetary funds to RRH programs. This could include reallocating existing funds or creating new funding streams dedicated to housing stability.
  - Public Awareness Campaigns: Launch campaigns to educate the public about the benefits of RRH and how it effectively addresses homelessness. Increased public support can lead to more donations and advocacy efforts.

RECOMENDATIONS
KS-507

Housing and Programs Continued

Strengthen Permanent Supportive Housing (PSH) Programs
- Current Situation: Limited capacity to support individuals with complex needs. Deficit of 114 PSH beds.
- Recommendations:
  - Increase the capacity of PSH programs to provide long-term housing and supportive services.
  - Collaborate with Healthcare Providers: Partner with local hospitals and health clinics to integrate healthcare services, including mental health and substance abuse treatment, within PSH programs.
  - Educate Policymakers: Conduct briefings and provide data to policymakers on the effectiveness of PSH in reducing homelessness and healthcare costs.

Enhance Prevention Programs
- Current Situation: Lack of prevention programs, leading to higher rates of homelessness.
- Recommendations:
  - Develop early intervention programs for at-risk populations.
  - Increase access to emergency financial assistance.
  - Raise awareness about prevention resources through public campaigns.

Develop Permanent Housing Solutions
- Current Situation: Shortage of affordable permanent housing options.
- Recommendations:
  - Advocate for and invest in affordable housing projects.
  - Engage landlords to encourage the acceptance of housing vouchers.
  - Expand supportive housing options.

Supporting Case Management Services
- Current Situation: Case management services are often under-resourced.
- Recommendations:
  - Provide case managers with access to supportive resources, such as mental health counseling and peer support groups, to help them manage job-related stress and prevent burnout.
  - Provide ongoing professional development for case managers.
  - Implement integrated care models to address comprehensive needs.

Assisting Rural Areas and Resource-Limited Regions
- Current Situation: Rural areas and regions with limited resources struggle to effectively apply for funding and implement homelessness interventions.
- Recommendations:
  - Provide targeted technical assistance, including workshops, one-on-one support, and comprehensive guides on the application process.
  - Enhance their capacity to secure funding and implement effective interventions.

Implement Trauma-Informed Care
- Current Situation: Homeless individuals often experience trauma, which is not always adequately addressed.
- Recommendations:
  - Provide training for service providers on trauma-informed care principles.
  - Create supportive environments in shelters and housing programs.
  - Increase access to mental health services.

RECOMENDATIONS

KS-507

KS BoS CoC Continuous Improvement

- Current Situation: Enhancing Community and Client Feedback Mechanisms
- Recommendations:
  - Increase opportunities to collect community and client feedback to inform system improvements. Implement an annual CoC performance survey to be completed by CoC-funded agencies and HMIS end users. This survey will gather valuable insights on the effectiveness of current services, identify areas for improvement, and ensure that the voices of those directly involved and affected by the services are heard and considered in the decision-making process.
  - Analyze Survey Results: Conduct a thorough analysis of survey results to identify trends, strengths, and areas needing improvement.

- Current Situation: Legislative Advocacy is needed to combat the Criminalization of Homelessness
- Recommendations:
- Engage with Lawmakers:
  - Regular Meetings: Schedule regular meetings with local, state, and federal lawmakers to discuss the importance of funding and policy support for homelessness programs.
  - Policy Briefs: Prepare and distribute policy briefs and fact sheets highlighting the needs of homeless populations and the benefits of CoC programs.

- Performance Metrics and Evaluation:
  - Develop a set of key performance indicators (KPIs) to measure the effectiveness of CoC initiatives. Regularly review and adjust strategies based on performance data.
  - Conduct annual evaluations of CoC programs to identify best practices and areas for improvement. Share these findings with all stakeholders to foster a culture of transparency and continuous learning.

- Training and Capacity Building:
  - Offer ongoing training for CoC-funded agencies and HMIS end users to ensure they are equipped with the latest best practices and tools for service delivery and data management.
  - Establish a peer learning network where agencies can share experiences and solutions to common challenges.

GLOSSARY

Coordinated Entry System (CES): A consistent, streamlined process for accessing the resources available in the homeless crisis response system. Through coordinated entry, a CoC ensures that the highest need, most vulnerable households in the community are prioritized for services and that the housing and supportive services in the system are used as efficiently and effectively as possible.

Continuum of Care (CoC): A collaborative funding and planning approach that helps communities plan for and provide, as necessary, a full range of emergency, transitional, and permanent housing and other service resources to address the various needs of homeless persons. HUD also refers to the group of community stakeholders involved in the decision-making processes as the "Continuum of Care."

Continuum of Care Lead Agency: Agency that is designated to carry out the activities of the CoC or grant including fiscal and compliance activities. Regular administrative tasks may include, but are not limited to: management of the annual HUD application, coordination of other funding opportunities, project and system monitoring, meeting management, etc. For purposes of the CoC Check-up, this excludes staff/staff time related to fiscal or HMIS-related duties.

Continuum of Care Projects: Projects, which may or may not be funded by HUD, that provide services and/or lodging, and whose primary purpose is to meet the specific needs of people who are homeless or at risk of homelessness within the CoC's geography. All ESG and CoC Program-funded projects are continuum projects, but the system should also include all non-ESG Program and non-CoC Program funded projects dedicated to serving people who are homeless.

Department of Housing and Urban Development (HUD): The Department of Housing and Urban Development administers programs that provide housing and community development assistance. The Department also works to ensure fair and equal housing opportunity for all.

Homeless Management Information Systems (HMIS): An HMIS is a computerized data collection application designed to capture client-level information over time on the characteristics of service needs of men, women, and children experiencing homelessness, while also protecting client confidentiality. It is designed to aggregate client-level data to generate an unduplicated count of clients served within a community's system of homeless services. An HMIS may also cover a statewide or regional area, and include several CoCs. HMIS can provide data on client characteristics and service utilization. HUD will allow only one applicant for HMIS dedicated grants within a CoC.

Housing Inventory Count (HIC): Annual inventory of a CoCs emergency shelter, transitional housing, safe havens, rapid re-housing, and permanent supportive housing resources for persons who are homeless in a CoC. The HIC includes both HUD and non-HUD funded shelter and housing resources.

Grant Inventory Worksheet (GIW): The Continuum of Care (CoC) Grant Inventory Worksheet (GIW) report is used to record all grants within a CoC's geographic area that are eligible for renewal funding in the upcoming CoC Program Competition. The GIW calculates an Annual Renewal Amount (ARA) for each project, which is the sum of each project's renewable budget line items (BLIs) (e.g., rental assistance, leasing, supportive services) and identifies the maximum renewal amount a renewal project applicant may apply for during the CoC Program Competition. The GIW report also calculates the CoC's Estimated Annual Renewal Demand (ARD), which is the sum of all ARAs within the CoC.

Rapid Rehousing (RRH): RRH is permanent housing that provides short-term (up to three months) and medium-term (4-24 months) tenant-based rental assistance and supportive services to households experiencing homelessness.

Permanent Supportive Housing (PSH):
Permanent Supportive Housing (PSH) is permanent housing in which housing assistance (e.g., long-term leasing or rental assistance) and supportive services are provided to assist households with at least one member (adult or child) with a disability in achieving housing stability.

Transitional Housing (TH): Transitional Housing (TH) provides temporary housing with supportive services to individuals and families experiencing homelessness with the goal of interim stability and support to successfully move to and maintain permanent housing.