



## **Quarterly Performance Report (QPR)**

HHOS Quarter: 3

Reporting Period: 7/1/2025 - 3/31/2026



# What is the QPR?

The Quarterly Performance Report (QPR) is used to assess how projects within our Continuum of Care (CoC) are performing throughout the year. Each QPR includes a set of tailored performance measures—some based on HUD standards and others adjusted to reflect local priorities and capacities. These reports help communities monitor progress, identify challenges, and strengthen their collective response to homelessness. Organizations are responsible to review the QPRs and ensure that the data being present accurately reflects what the project is accomplishing.

## System Performance Measures (SPM):

### Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across Emergency Shelter (ES), Safe Haven (SH) (Metric 1.1) and then Emergency Shelter (ES), Safe Haven (SH) and Transitional Housing (TH) (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than the look back stop date or client's date of birth, whichever is later.

- Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
- Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

### Measure 2: Returns to Homelessness for Persons who Exit to Permanent Housing (PH) Destinations

This measures clients who exited Street Outreach (SO), ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

### Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

This measure is divided into two measures capturing employment and non-employment income changes for those who exit the system ("system leavers") and those who stay in the system ("system stayers"). The project types reported in these metrics are the same for each metric, but the universe of clients differs.

- Metric 4.3 – Change in total income for adult system stayers during the reporting period
- Metric 4.6 – Change in total income for adult system leavers

### Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

This measures positive movement out of the homeless system and is divided into three tables: movement off the streets from Street Outreach (Metric 7a.1); movement into permanent housing situations from ES, SH, TH, and RRH (Metric 7b.1); and retention or exits to permanent housing situations from PH (other than PH-RRH).

- Metric 7a.1 – Change in SO exits to temp. destinations, some institutional destinations, and permanent housing destinations
- Metric 7b.1 – Change in ES, SH, TH, and PH-RRH exits to permanent housing destinations
- Metric 7b.2 – Change in PH exits to permanent housing destinations or retention of permanent housing

### Project Narratives:

At the end of the report will be all the narratives provided by each organization submitted by the deadline (alphabetized by organization).



# What is the QPR?

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## Local Measures:

### Average Length of Time to Date of Engagement

A date of engagement signifies in HMIS, that a deliberate client assessment and/or creation of case plan has occurred. This measures the average length of time from the client being enrolled into the project, to their date of engagement.

### Average time from Date of Engagement to Successful Exit

A date of engagement signifies in HMIS, that a deliberate client assessment and/or creation of case plan. This measures the average length of time from their date of engagement to a successful exit (as defined by the 5-year CoC Performance Management Plan for each project type).

### Average Rate of Utilization

This measure varies depending on the project type.

- For Emergency Shelter - Night-by-Night projects that utilize a housing check-in service in HMIS, it is measured by the average amount of recorded bed-nights within the reporting period, then divided by the recorded number of beds.
- For Emergency Shelter - Entry/Exit (ES - EE), Transitional Housing (TH), Permanent Supportive Housing (PSH), and Rapid Rehousing (RRH):
  - For projects with Bed Inventory, it is measured by averaging how many clients stayed in the project on the last Wednesday of each month within the reporting period, then divided by the recorded number of beds.
  - For projects with Units, it is measured by averaging how many heads of households that stayed in the project on the last Wednesday of each month within the reporting period, then dividing by the recorded number of units.

### Returns to Homelessness (Homeless Diversion)

Similar to the SPM measure 2 - Returns to Homelessness. This measures clients who exited Homeless Diversion to a permanent housing destination in the date range one year prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to one year after their initial exit.

### Returns to Homelessness (Homeless Prevention)

Similar to the SPM measure 2 - Returns to Homelessness. This measures clients who exited Homeless Prevention to a permanent housing destination in the date range six months prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to six months years after their initial exit.

### Servicing those with Long Lengths of Homelessness

This measures how many clients who are served in Street Outreach (SO) projects that have lengths of homelessness greater than 12 months.

### Exits to Permanent Housing (Homeless Prevention)

This measures positive movement out of the homeless system from exiting a Homeless Prevention project into a Permanent Housing Destination.



# What is the QPR?

The Quarterly Performance Report (QPR) is used to assess how projects within our Continuum of Care (CoC) are performing throughout the year. Each QPR includes a set of tailored performance measures—some based on HUD standards and others adjusted to reflect local priorities and capacities. These reports help communities monitor progress, identify challenges, and strengthen their collective response to homelessness. Organizations are responsible to review the QPRs and ensure that the data being present accurately reflects what the project is accomplishing.

## Local Measures:

### **Successfully Diverted from the Homeless System (Includes both exits to PH and Temp Stays with Friends and Family)**

This measures positive movement out of the homeless system from exiting a Homeless Diversion project - this includes exits to Permanent Housing and Temporary Stays with Friends and Family.

### **Rapid Placement into Permanent Housing**

This measures the average amount of time between when a household is first enrolled in a rapid rehousing project till the day they are placed into their permanent housing unit. Indicated by the Housing Move-In Date.

### **Annual Income Growth and/or Non Cash Benefits**

This measures how many clients had an increase to income between annual assessments for clients that have been enrolled in Permanent Supportive Housing projects for a year or more.

### **Successful Referrals (Coordinated Entry)**

This measures how many referrals that were made by SHCA (Singles Homeless Coordinated Assessment), HFCA (Homeless Families Coordinated Assessment), and YYA CE (Youth and Young Adult Coordinated Entry) to requesting providers that have a successful or positive outcome.

### **Average Length of time from Assessment to Referral Placement (Coordinated Entry)**

This measures the average amount of time between the date of assessment for the client in Coordinated Entry till the day they received a referral placement.

### **Average Length of Time from Date of Referral Placement to Referral Outcome (Coordinated Entry)**

This measures the average amount of time between the referral placement, to referral outcome in Coordinated Entry projects.



# Quarter 3 - Homelessness Diversion

Diversion: Project focus is on keeping households out of the traditional homeless system. Requires literal homelessness or at-risk of homelessness and typically very little financial assistance is paired with this intervention.

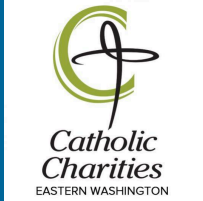
Reporting Term: 07/01/2025 - 03/31/2026



**Public Name:** SNAP - Singles Diversion  
**HMIS Name:** SNAP--SSO--Singles Diversion

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Homeless Prevention (HP)



**Public Name:** Catholic Charities - Family Diversion  
**HMIS Name:** CC--SSO--City Diversion--City HHAA

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



# Spend Down - Homeless Diversion

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining

CC--SSO--City Diversion--HHOS

\$135,209.23 85.04%

SNAP--SSO--Singles Diversion

\$51,315.32 75.46%

\$16,684.68 24.54%

0%

20%

40%

60%

80%

100%



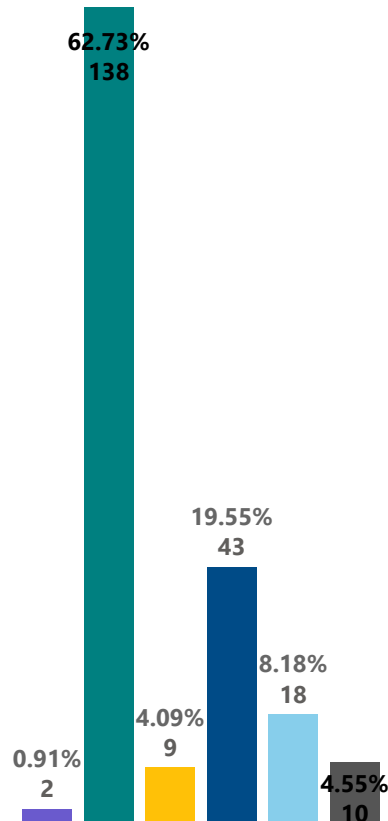
# Quarter 3 - Homelessness Diversion Performance Overview

Number of Households Served

# 225

### Exit Destinations

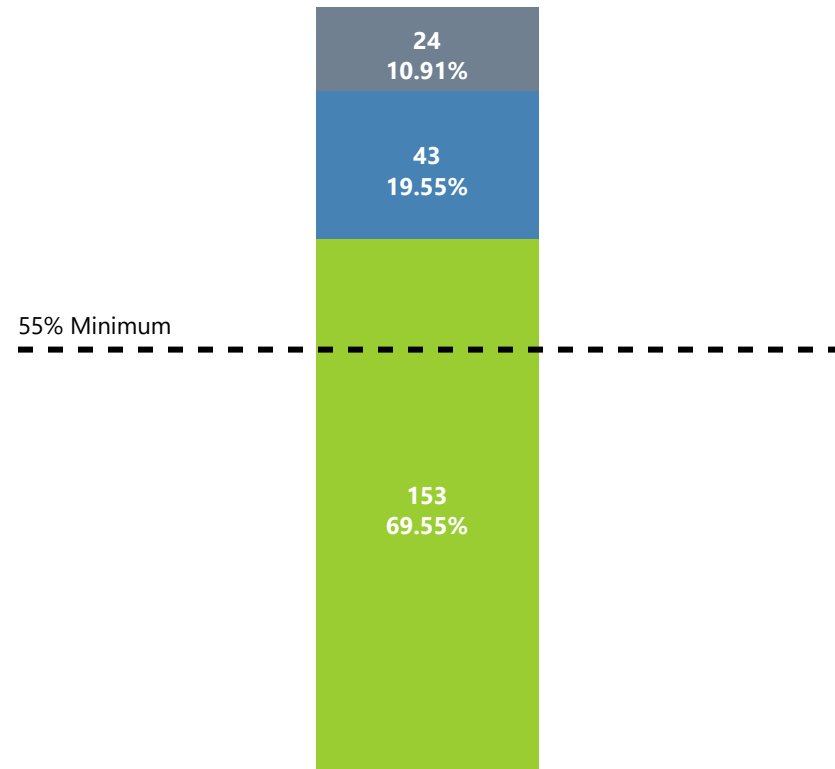
- Institutional
- Permanent
- Sheltered
- Still Enrolled
- Temporary
- Unsheltered



### Successful Diversion

(All Exited Clients)

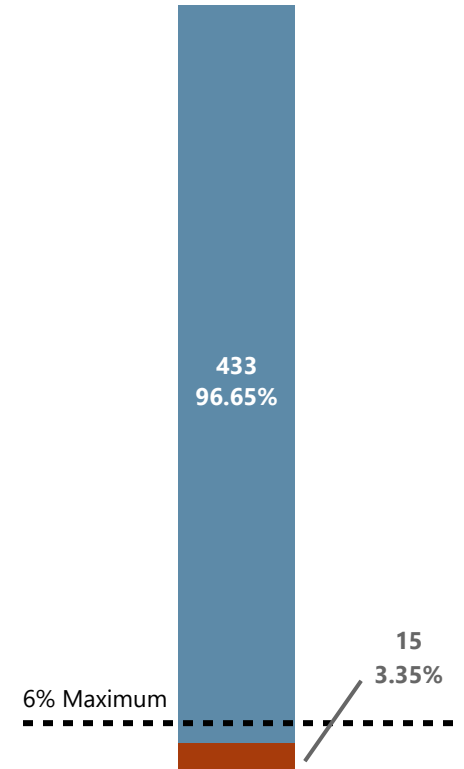
- Currently Enrolled
- Successful Diversion
- Unsuccessful Diversion



### Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Homelessness Diversion SNAP - Singles Diversion

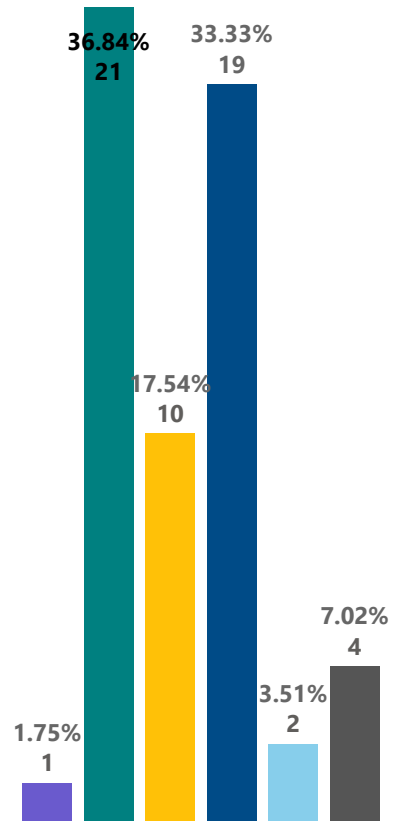
Number of Individuals Served

Projected Individuals Served: 188

# 63

### Exit Destinations

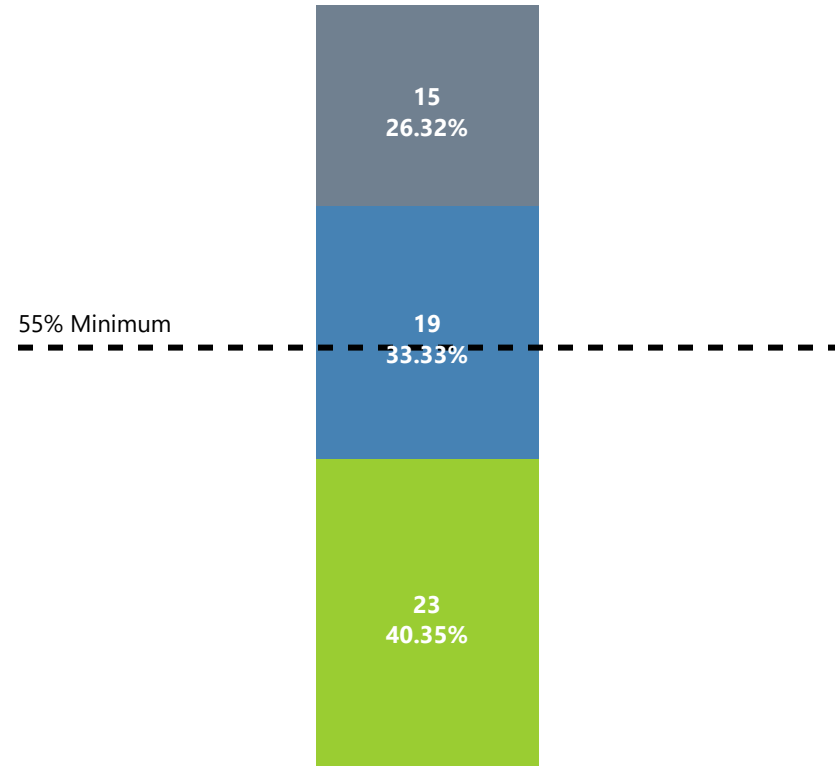
- Institutional
- Permanent
- Sheltered
- Still Enrolled
- Temporary
- Unsheltered



### Successful Diversion

(All Exited Clients)

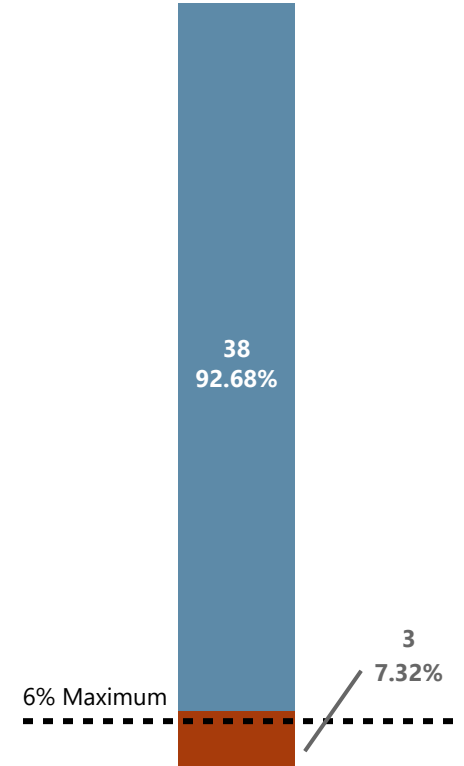
- Currently Enrolled
- Successful Diversion
- Unsuccessful Diversion



### Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Homelessness Diversion Catholic Charities - Family Diversion

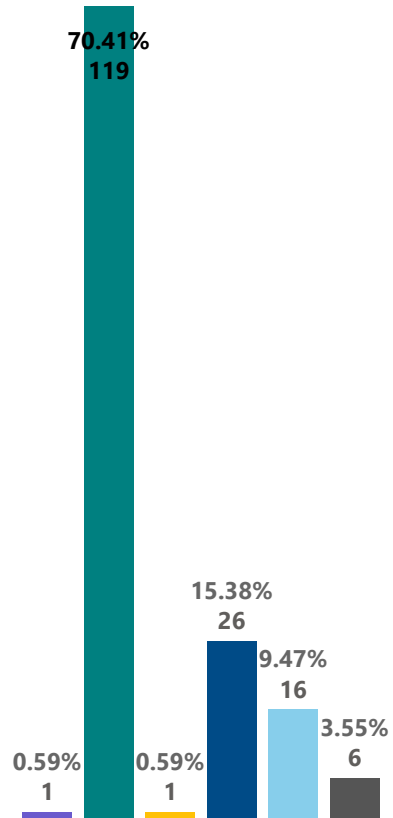
Number of Households Served

Projected Households Served: 485

# 169

### Exit Destinations

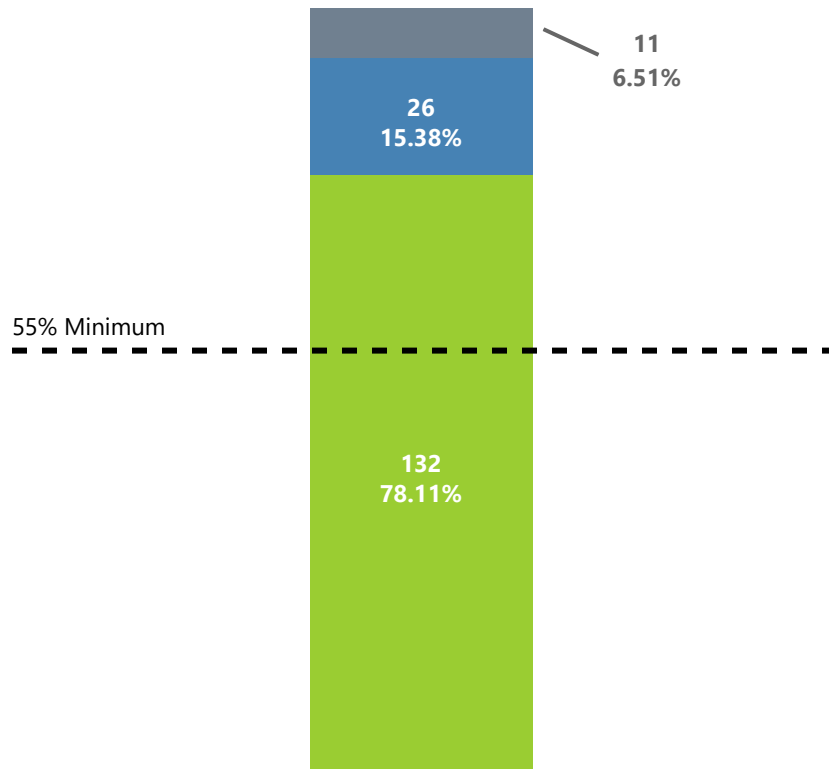
- Institutional
- Permanent
- Sheltered
- Still Enrolled
- Temporary
- Unsheltered



### Successful Diversion

(All Exited Clients)

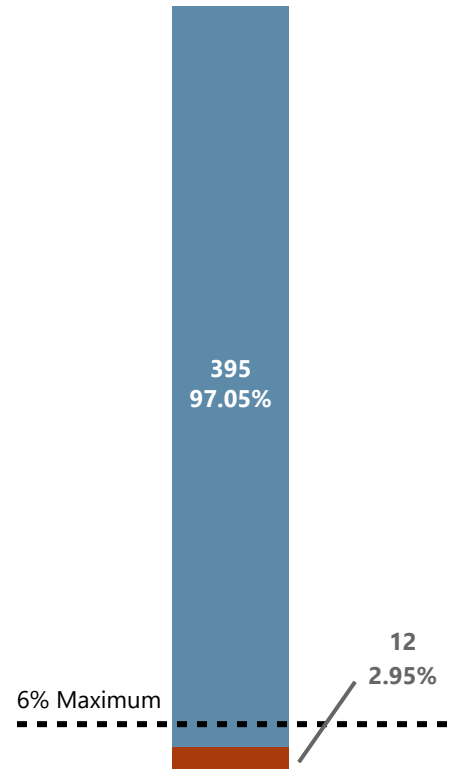
- Currently Enrolled
- Successful Diversion
- Unsuccessful Diversion



### Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Coordinated Entry

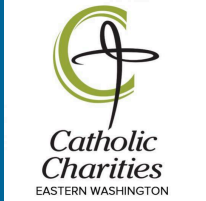
Coordinated Entry (CE): The gateway by which households' access projects in the system.  
Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Singles Coordinated Assessment  
**HMIS Name:** SNAP--CE--Singles

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)
- HUD: Continuum of Care (CoC) - Supportive Services Only (SSO)



**Public Name:** Homeless Family Coordinated Assessment  
**HMIS Name:** CC--CA--HFCA

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)
- HUD: Continuum of Care (CoC) - Supportive Services Only (SSO)



# Spend Down - Coordinate Entry

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining

CC--CA--HFCA

\$51,183.52 78.74%

\$13,816.48 21.26%

SNAP--CE--Singles

\$27,628.55 61.40%

\$17,371.45 38.60%

0%

20%

40%

60%

80%

100%



# Quarter 3 - Coordinated Entry Performance Overview

Number of Households Served

# 2094

Number of Referrals

# 557

Average Length of Time from Assessment to Referral Placement

# 33

Max: 45 Days

Average Length of Time from Date of Referral Placement to Referral Outcome

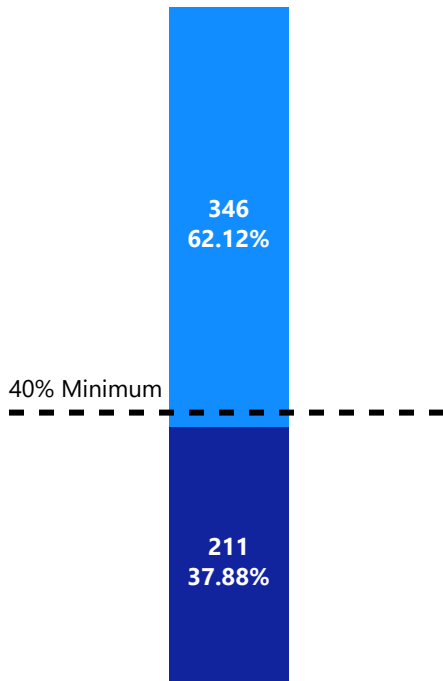
# 12

Max: 30 Days

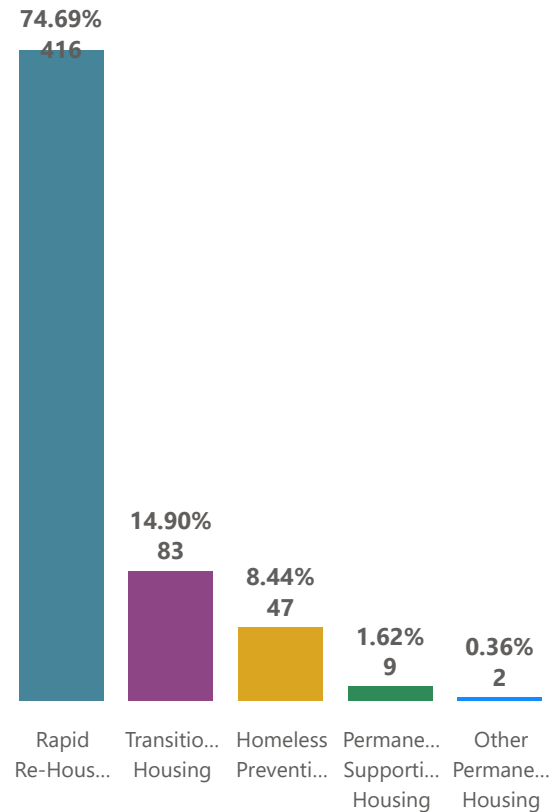
## Percent of Referrals with Successful Outcomes

(Local Measure)

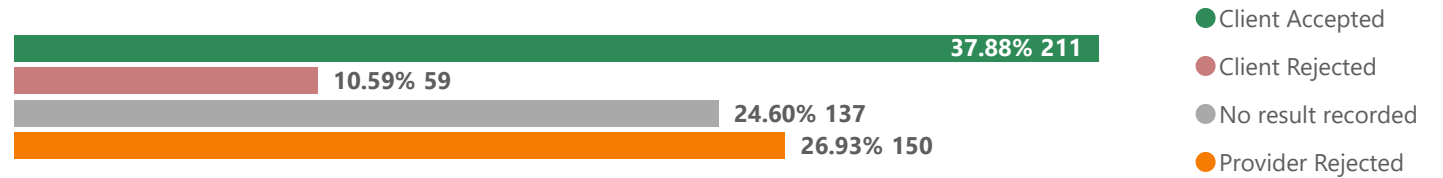
● Successful ● Unsuccessful



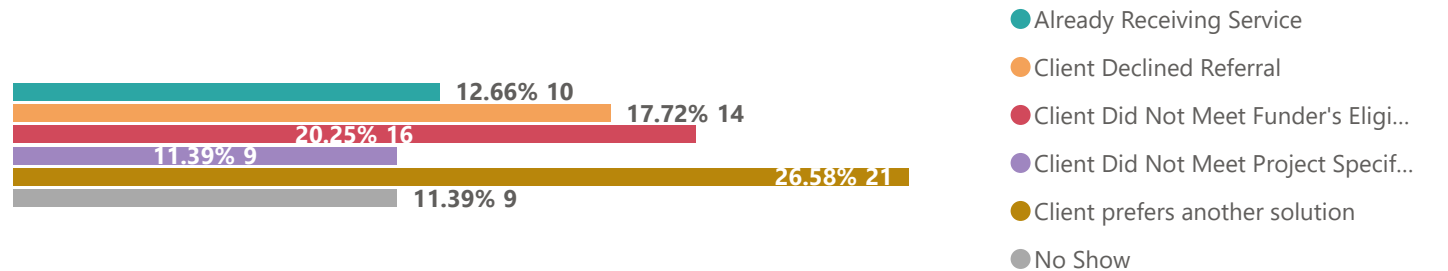
## Referrals by Project-Type



## Referral Results



## Rejection Reason





# Quarter 3 - Coordinated Entry Homeless Families Coordinated Assessment (HFCA)

Number of Households Served

Projected Households Served: 1511

# 684

Number of Referrals

# 154

Average Length of Time from Assessment to Referral Placement

# 34

Max: 45 Days

Average Length of Time from Date of Referral Placement to Referral Outcome

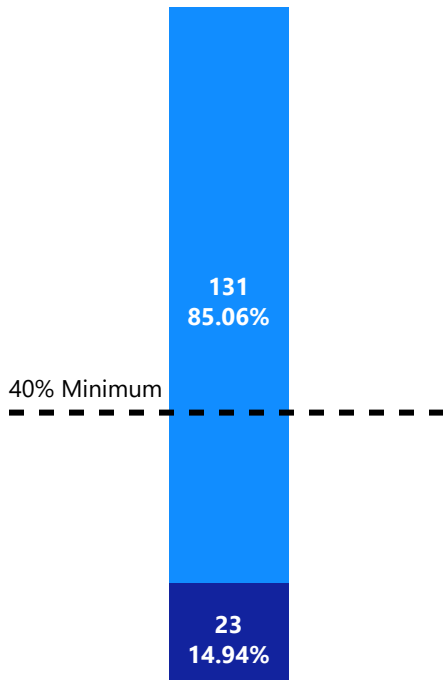
# 4

Max: 30 Days

## Percent of Referrals with Successful Outcomes

(Local Measure)

● Successful ● Unsuccessful



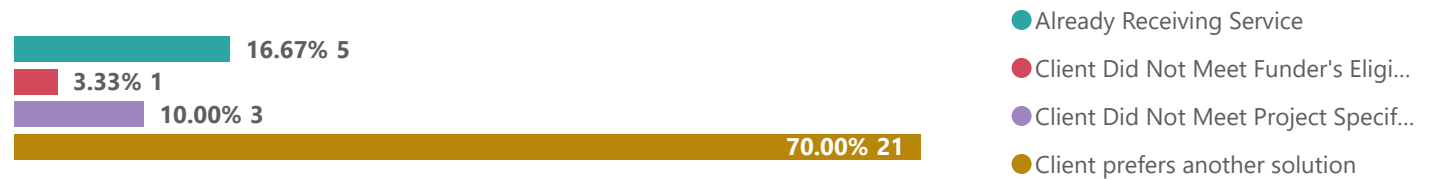
## Referrals by Project-Type



## Referral Results



## Rejection Reason





# Quarter 3 - Coordinated Entry Singles Coordinated Assessment

Number of Individuals Served  
Projected Individuals Served: 1200

1427

Number of Referrals

403

Average Length of Time from  
Assessment to Referral Placement

33

Max: 45 Days

Average Length of Time from Date of  
Referral Placement to Referral Outcome

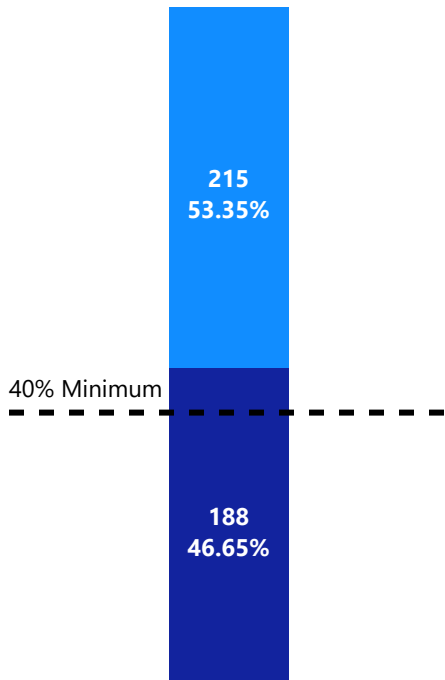
15

Max: 30 Days

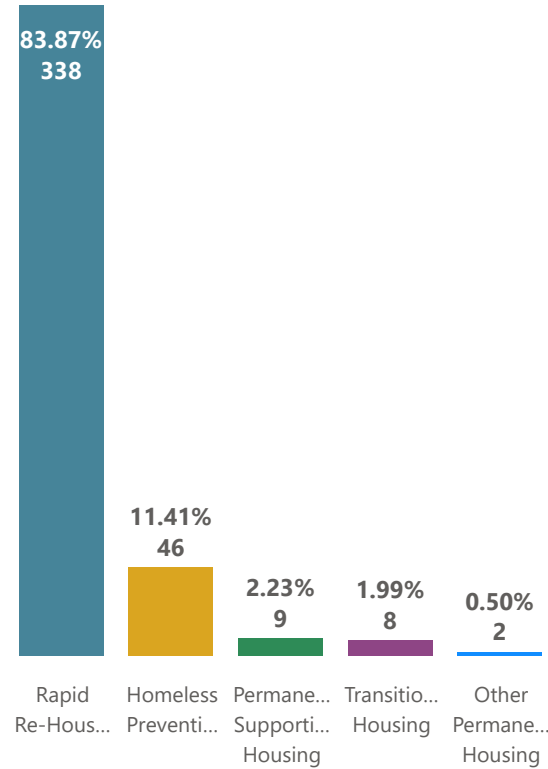
## Percent of Referrals with Successful Outcomes

(Local Measure)

● Successful ● Unsuccessful



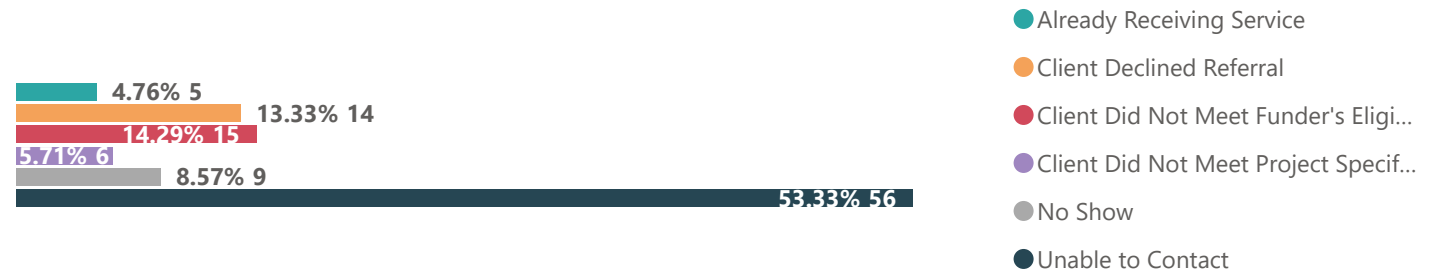
## Referrals by Project-Type



## Referral Results



## Rejection Reason





# Quarter 3 - Homeless Prevention

Homeless Prevention (HP): Households who are facing imminent legal eviction due to non-payment of rent. In addition to providing financial assistance, supportive services are also provided to ensure long term stability.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** HEN Foundational Community Support (FCS) Bridge  
**HMIS Name:** GI--HP--HEN FCS Bridge

**Grants:**

- WA Dept. Commerce: System Demonstration Grant (SDG) - Housing Essential Needs (HEN) Foundational Community Supports (FCS) Bridge



**Public Name:** Housing and Essential Needs (HEN)  
**HMIS Name:** GI--HP--HEN

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Housing and Essential Needs (HEN)



**Public Name:** Esperanza  
**HMIS Name:** NRCC--HP--Esperanza--HHOS

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** Esperanza CHG-HP  
**HMIS Name:** NRCC--HP--Esperanza--CHG-HP

**Grants:**

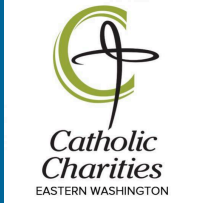
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Homeless Prevention (HP)



# Quarter 3 - Homeless Prevention

Homeless Prevention (HP): Households who are facing imminent legal eviction due to non-payment of rent. In addition to providing financial assistance, supportive services are also provided to ensure long term stability.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Families CHG-HP  
**HMIS Name:** CC--HP--Families--CHG-HP

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Homeless Prevention (HP)



**Public Name:** Carl Maxey Housing CHG-HP  
**HMIS Name:** CMC--HP--Carl Maxey Housing--CHG-HP

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Homeless Prevention (HP)



**Public Name:** Singles CHG-HP  
**HMIS Name:** SNAP--HP--Singles--CHG-HP

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Homeless Prevention (HP)



**Public Name:** Singles CHG-HP  
**HMIS Name:** TPW--HP--Singles--CHG-HP

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Homeless Prevention (HP)



# Spend Down - Homeless Prevention

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

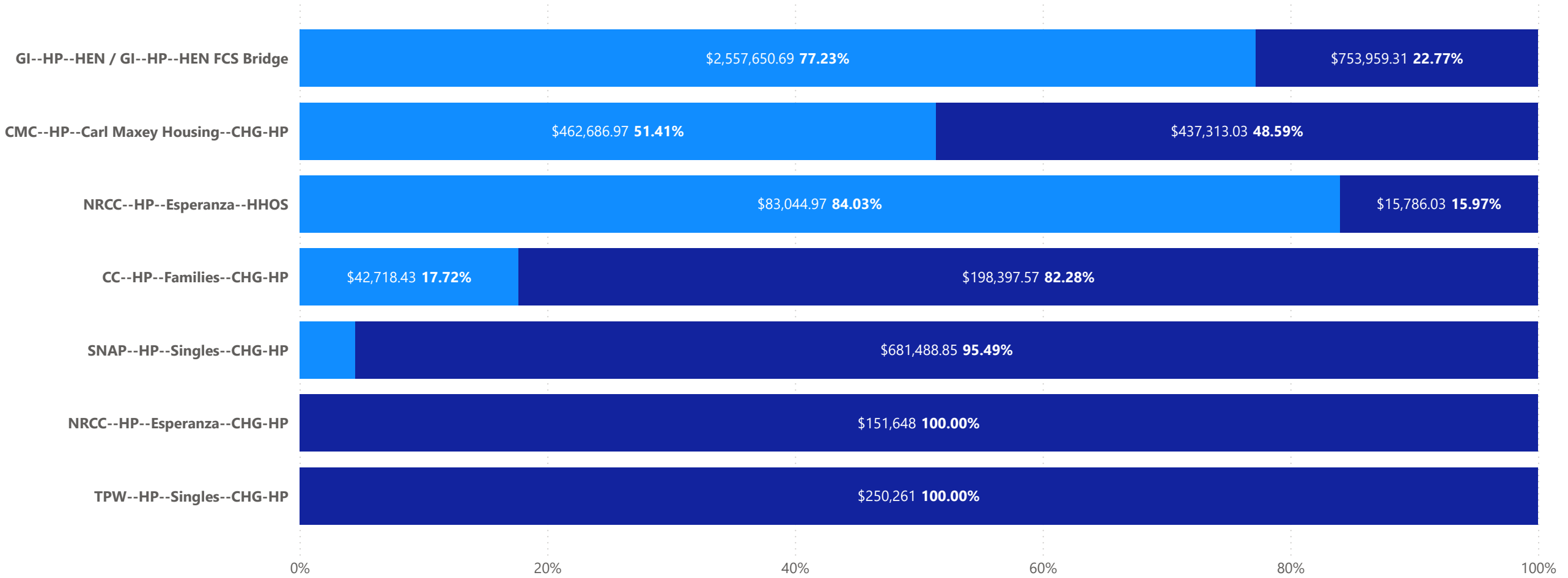
March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining





# Housing Services (HHOS) PY 2025-26 Quarterly Performance Report

## Quarter 3 - Homeless Prevention Performance Overview

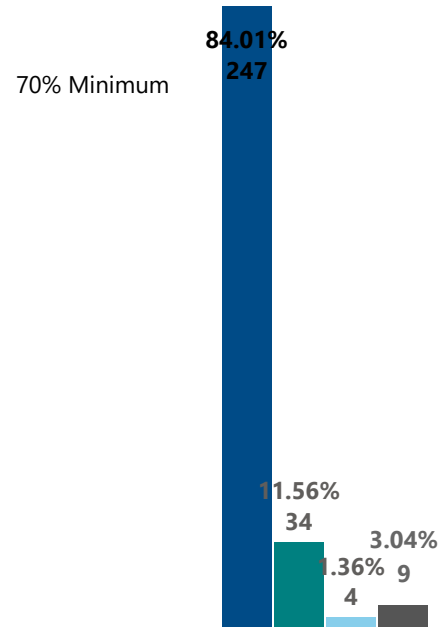
Number of Individuals Served

# 295

### Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

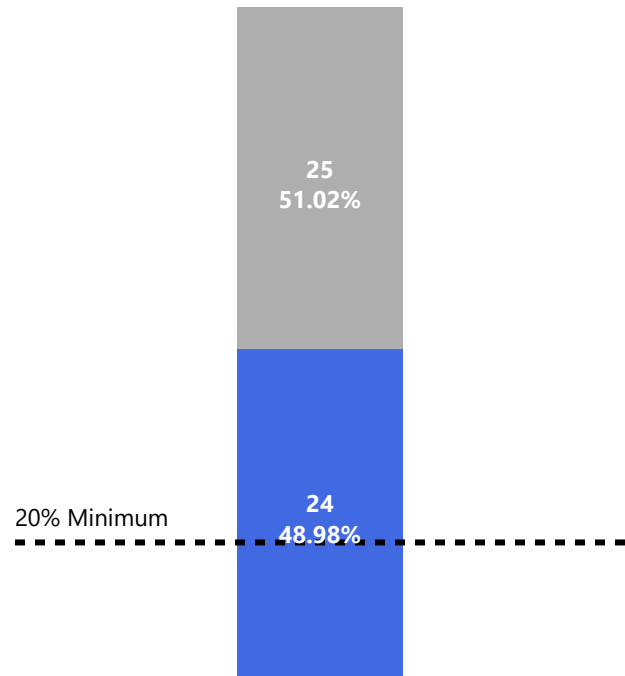
● Currentl... ● Perman... ● Tempor... ● Unshelt...



### Employment and Income Growth

(SPM Metric 4.6)

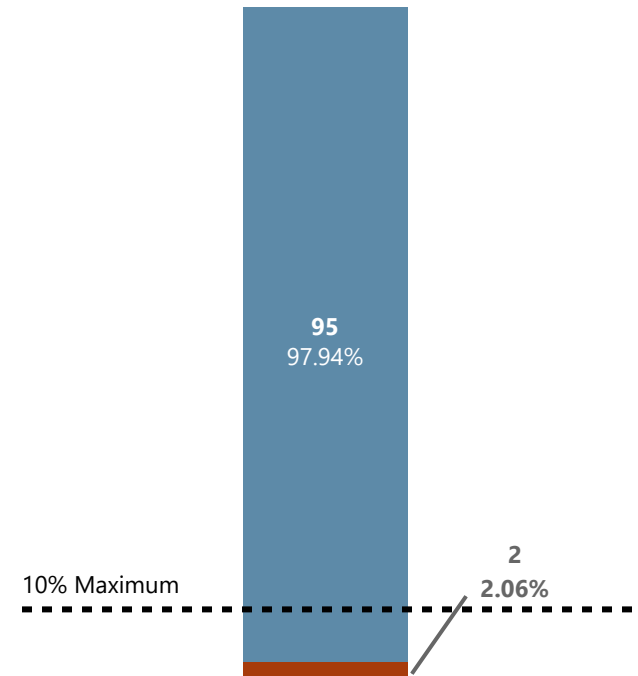
● Increase ● No Increase



### Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned





# Quarter 3 - Homeless Prevention Goodwill - HEN Foundational Community Support (FCS) Bridge

## Number of Individuals Served

Projected Individuals Served: 787

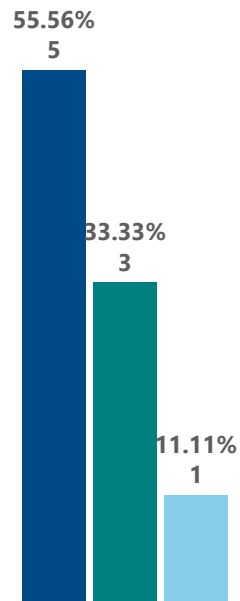
9

### Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently Enrolled ● Permanent ● Temporary

70% Minimum

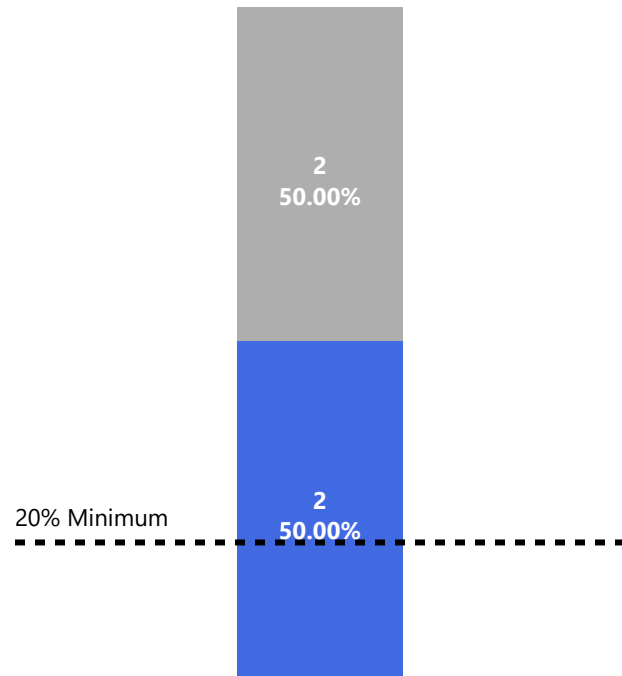


### Employment and Income Growth

(SPM Metric 4.6)

● Increase ● No Increase

20% Minimum

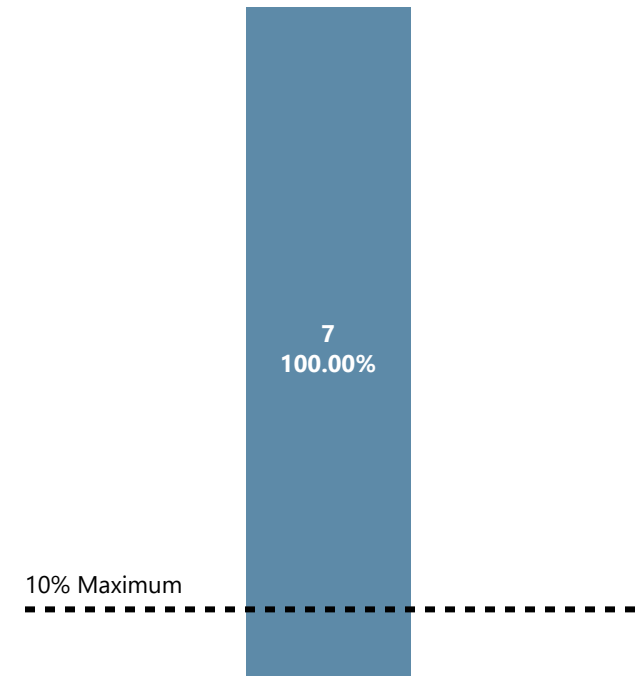


### Returns to Homelessness

(SPM Metric 2b)

● Did Not Return

10% Maximum





# Quarter 3 - Homeless Prevention Goodwill - Housing and Essential Needs (HEN)

Number of Individuals Served

Projected Individuals Served: 787

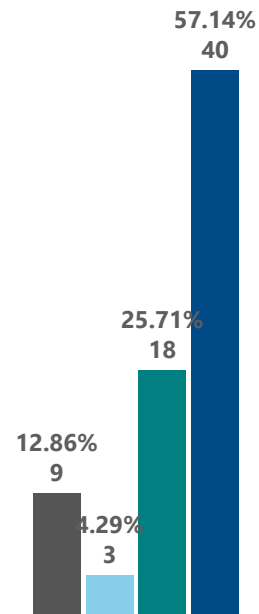
# 71

## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currentl... ● Perman... ● Tempor... ● Unshelt...

70% Minimum

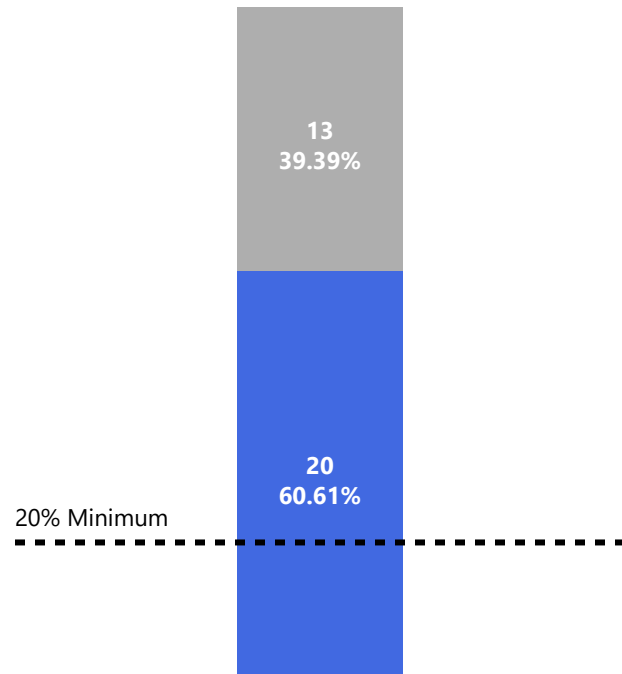


## Employment and Income Growth

(SPM Metric 4.6)

● Increase ● No Increase

20% Minimum

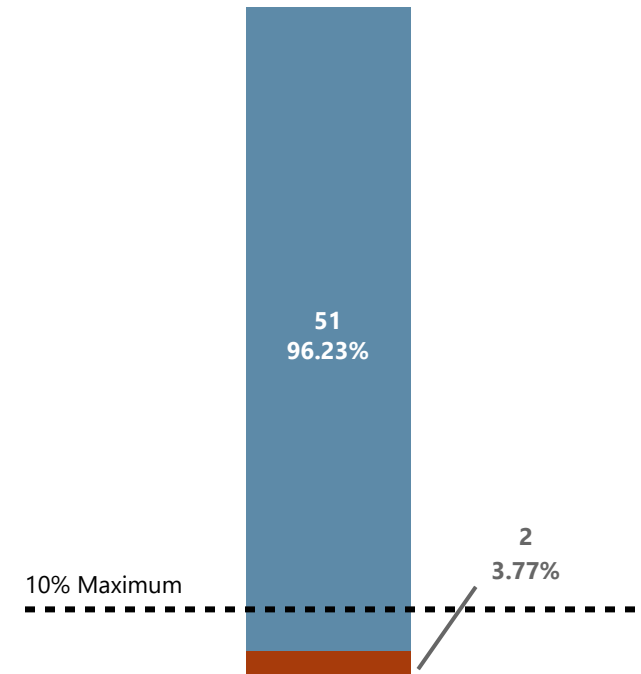


## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned

10% Maximum





# Quarter 3 - Homeless Prevention

## Nuestra Raices - Esperanza

### Number of Individuals Served

Projected Individuals Served: 120

24

### Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently Enrolled ● Permanent

70% Minimum

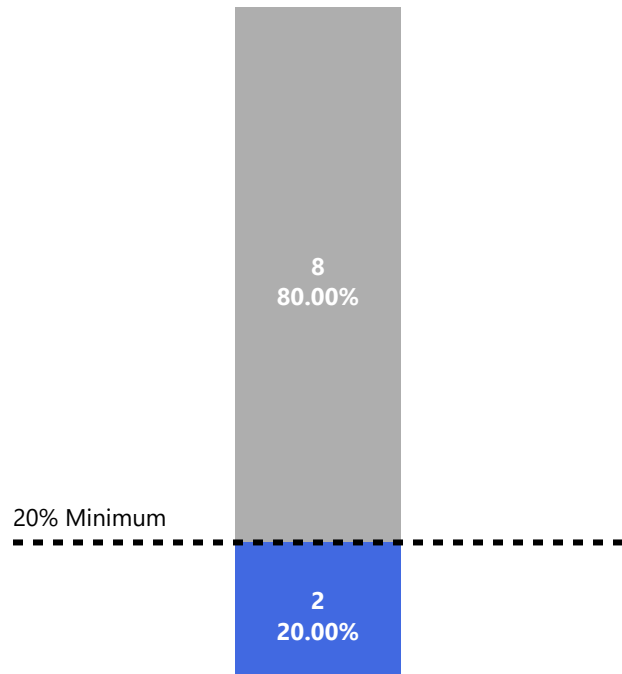


### Employment and Income Growth

(SPM Metric 4.6)

● Increase ● No Increase

20% Minimum

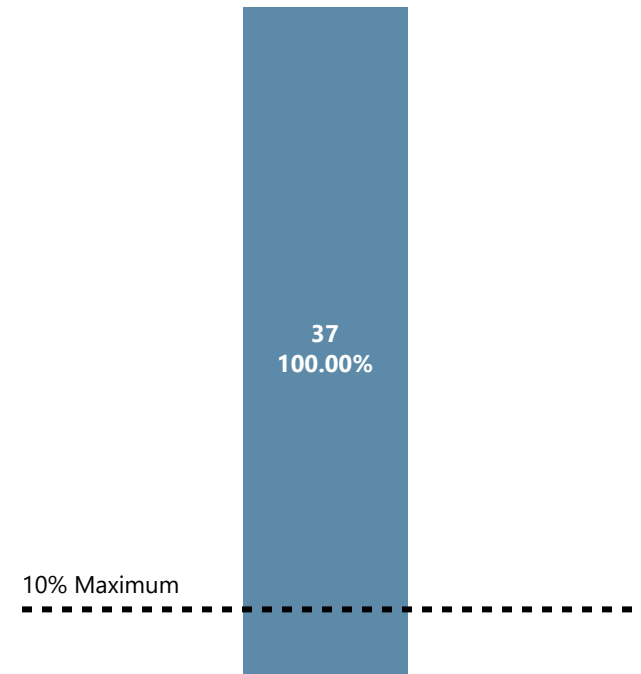


### Returns to Homelessness

(SPM Metric 2b)

● Did Not Return

10% Maximum





# Quarter 3 - Homeless Prevention Nuestra Raices - Esperanza CHG-HP

Note: Project Started 11/1/2025

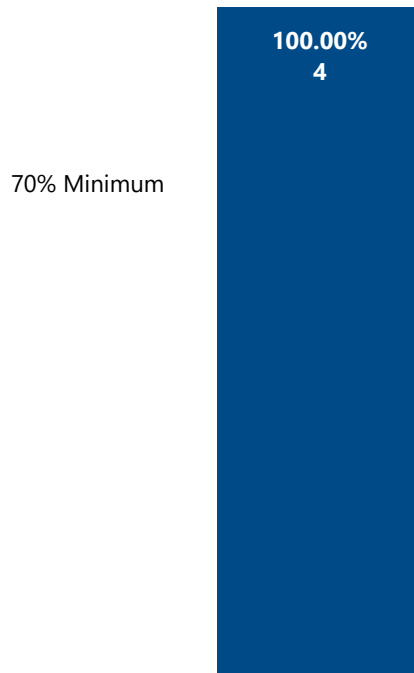
Number of Individuals Served

4

### Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently Enrolled



### Employment and Income Growth

(SPM Metric 4.6)

*During the reporting period, no clients who demonstrate growth in income at exit. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

20% Minimum

### Returns to Homelessness

(SPM Metric 2b)

*No clients exited from this project during the reporting period (shifted six months back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

10% Maximum



# Quarter 3 - Homeless Prevention Catholic Charities - Families CHG-HP

Note: Project Started 11/1/2025

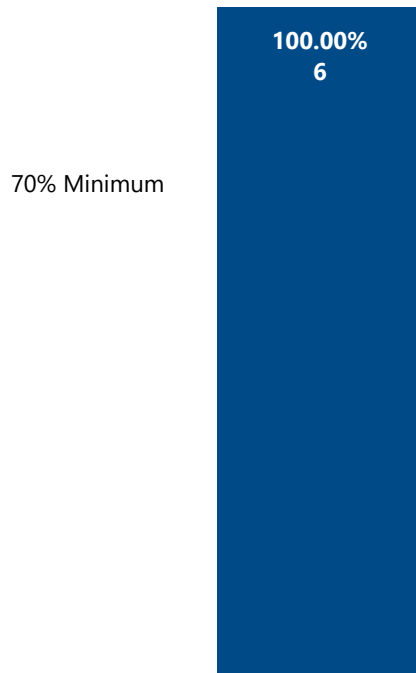
Number of Households Served

6

## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently Enrolled



## Employment and Income Growth

(SPM Metric 4.6)

*During the reporting period, no clients who demonstrate growth in income at exit. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

20% Minimum

## Returns to Homelessness

(SPM Metric 2b)

*No clients exited from this project during the reporting period (shifted six months back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

10% Maximum



# Quarter 3 - Homeless Prevention Carl Maxey Housing - Homeless Prevention CHG-HP

Note: Project Started 11/1/2025

Number of Households Served

# 57

### Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently Enrolled



### Employment and Income Growth

(SPM Metric 4.6)

*During the reporting period, no clients who demonstrate growth in income at exit. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

20% Minimum

### Returns to Homelessness

(SPM Metric 2b)

*No clients exited from this project during the reporting period (shifted six months back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

10% Maximum



# Quarter 3 - Homeless Prevention SNAP - Singles CHG-HP

Note: Project Started 11/1/2025

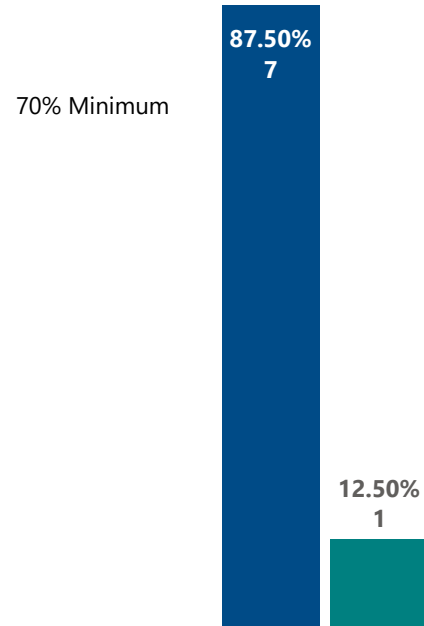
Number of Individuals Served

9

### Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

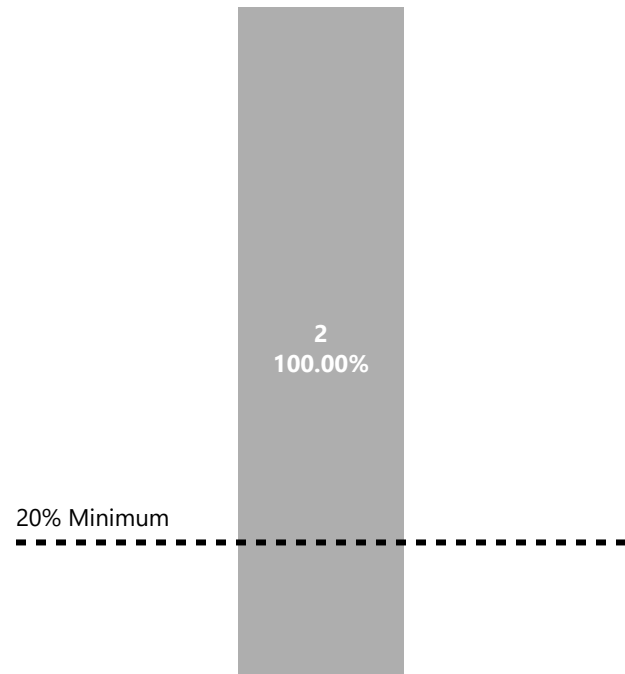
● Currently Enrolled ● Permanent



### Employment and Income Growth

(SPM Metric 4.6)

● No Increase



### Returns to Homelessness

(SPM Metric 2b)

*No clients exited from this project during the reporting period (shifted six months back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

10% Maximum



Housing Services (HHOS) PY 2025-26 Quarterly Performance Report

# Quarter 3 - Homeless Prevention Transitions - Singles CHG-HP

Note: Project Started 11/1/2025

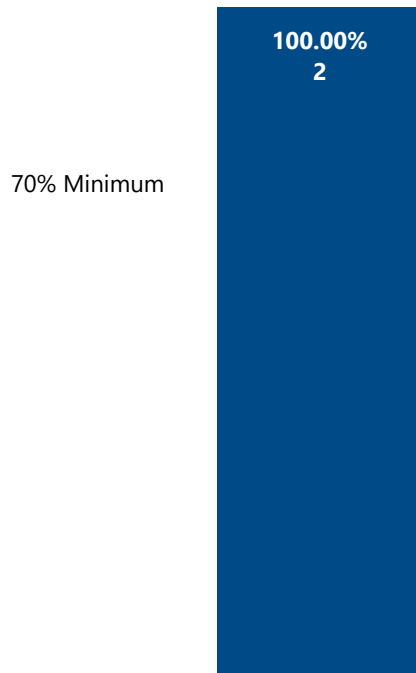
Number of Individuals Served

2

### Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently Enrolled



### Employment and Income Growth

(SPM Metric 4.6)

*During the reporting period, no clients who demonstrate growth in income at exit. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

20% Minimum

### Returns to Homelessness

(SPM Metric 2b)

*No clients exited from this project during the reporting period (shifted six months back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

10% Maximum



# Quarter 3 - Street Outreach

Street Outreach (SO): Providing case management to those who are unsheltered with the goal to exit them into Emergency Shelter, Transitional Housing, Permanent Supportive Housing or treatment facilities (if needed/requested).

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Transitions - Women's Hearth

**HMIS Name:**

- TPW--SO--Womens Hearth
- TPW--SSO--Womens Hearth

**Grants:**

- WA Dept. Commerce: System Demonstrations Grant (SDG) - Standard
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** City Street Outreach

**HMIS Name:** CC--SO--City Street Outreach

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard
- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



# Spend Down - Street Outreach

Q1

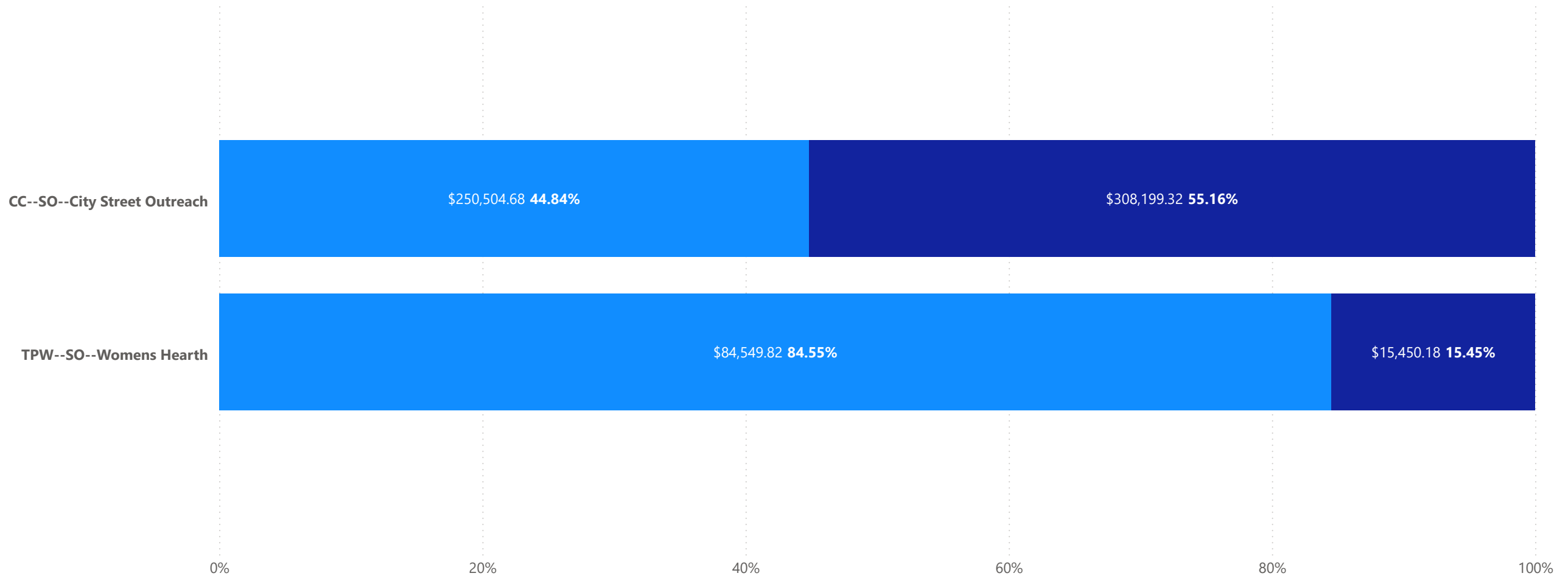
Q2

Q3

Q4

July August September October November December January February March April May June

● Sum of Total Spent ● Sum of Total Remaining





# Quarter 3 - Street Outreach Performance Overview

Number of Individuals Served

# 359

Average time from Date of Engagement to Successful Exit

# 11

Max: 60 Days

Clients with a Date of Engagement

# 105

Serving those with Long Length of Homelessness

● No ● Yes

279 82.79%

58 17.21%

64% Minimum

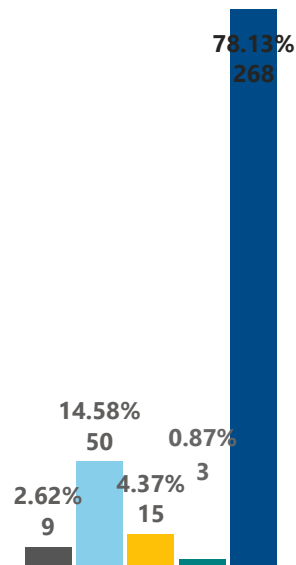
## Exits from Street Outreach

● Currentl... ● Perman... ● Sheltered ● Tempor... ● Unshelt...

Min: 55% (Successful Exits)

Min: 40% (Permanent)

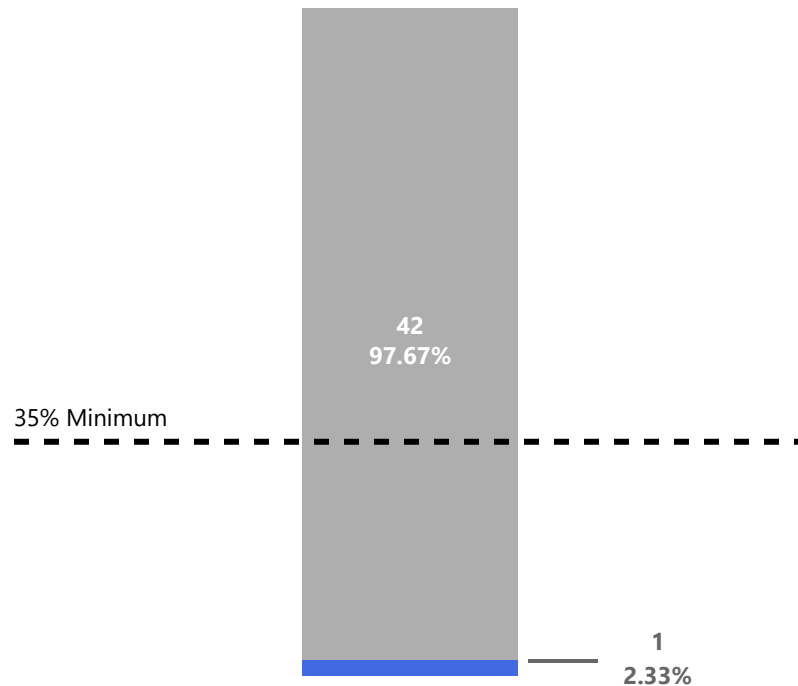
Min: 25% (Temporary or Institutional)



## Employment and Income Growth

(Clients with a Date of Engagement)

● Increase ● No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

20% Maximum



# Quarter 3 - Street Outreach Transitions - Women's Hearth

### Number of Individuals Served

Projected Individuals Served: 150

# 187

### Average time from Date of Engagement to Successful Exit

# 73

Max: 60 Days

### Clients with a Date of Engagement

# 19

### Serving those with Long Length of Homelessness

● No ● Yes



### Exits from Street Outreach

● Currently Enrolled ● Temporary ● Unsheltered

Min: 55% (Successful Exits)

Min: 40% (Permanent)

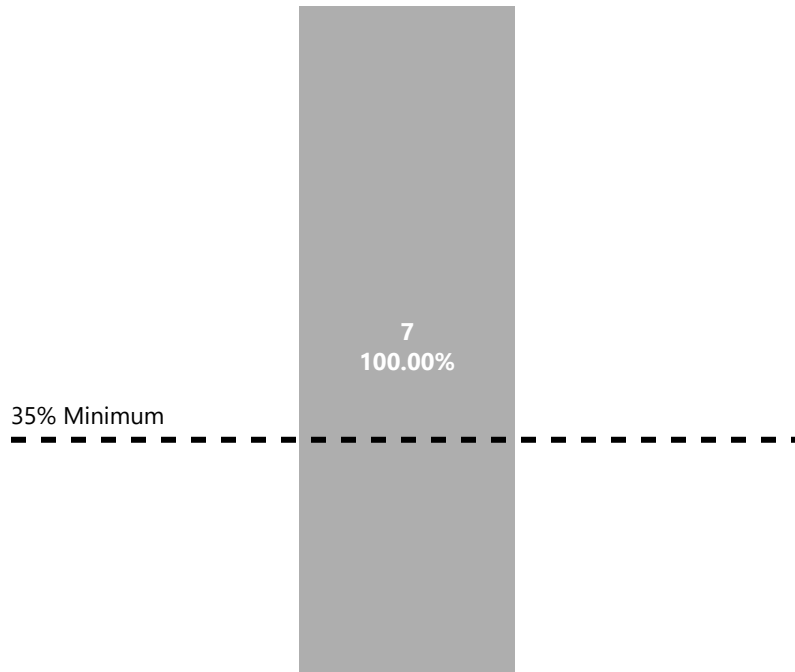
Min: 25% (Temporary or Institutional)



### Employment and Income Growth

(Clients with a Date of Engagement)

● No Increase



### Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

20% Maximum



# Quarter 3 - Street Outreach Catholic Charities - City Street Outreach

Number of Individuals Served

Projected Individuals Served: 180

# 178

Average time from Date of Engagement to Successful Exit

# 9

Max: 60 Days

Clients with a Date of Engagement

# 86

Serving those with Long Length of Homelessness

● No ● Yes



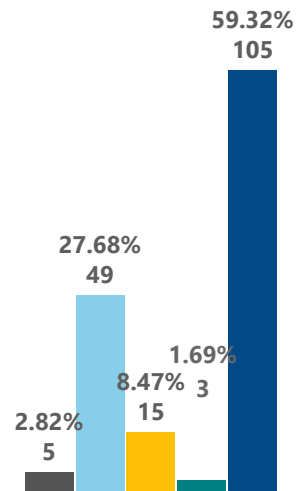
## Exits from Street Outreach

● Currentl... ● Perman... ● Sheltered ● Tempor... ● Unshelt...

Min: 55% (Successful Exits)

Min: 40% (Permanent)

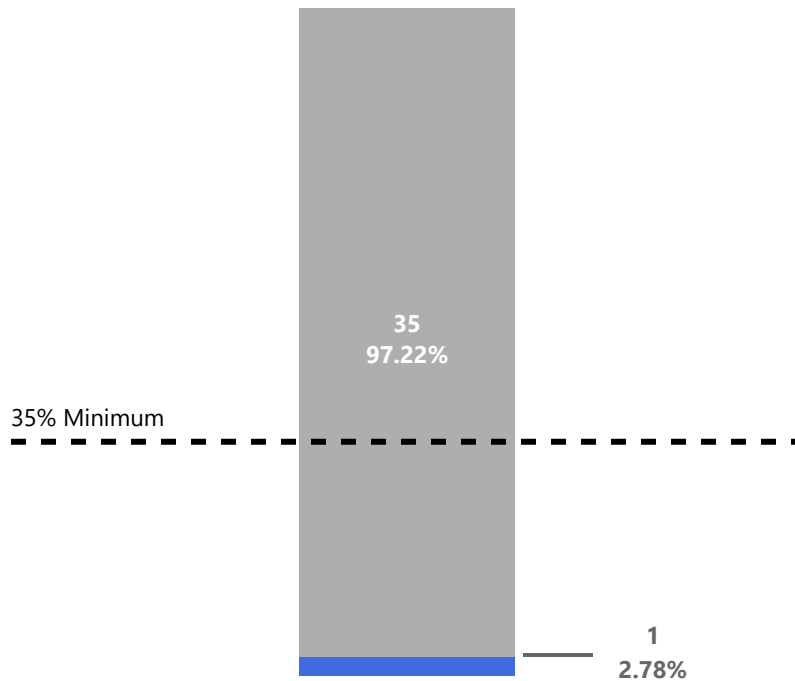
Min: 25% (Temporary or Institutional)



## Employment and Income Growth

(Clients with a Date of Engagement)

● Increase ● No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

20% Maximum



# Quarter 3 - Housing Navigation Center

Housing Navigation Center (HNC): The navigation center serves as a specialized facility offering comprehensive support services during daytime hours, when most emergency shelters are closed. It focuses on connecting residents with mental health care, addiction treatment, and housing placement services through individualized case management.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Housing Navigation Center (HNC)  
**HMIS Name:** JHH--DS--Housing Navigation Center

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)
- City of Spokane: Human Services Grant (HSG)



# Spend Down - Housing Navigation Center

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

March

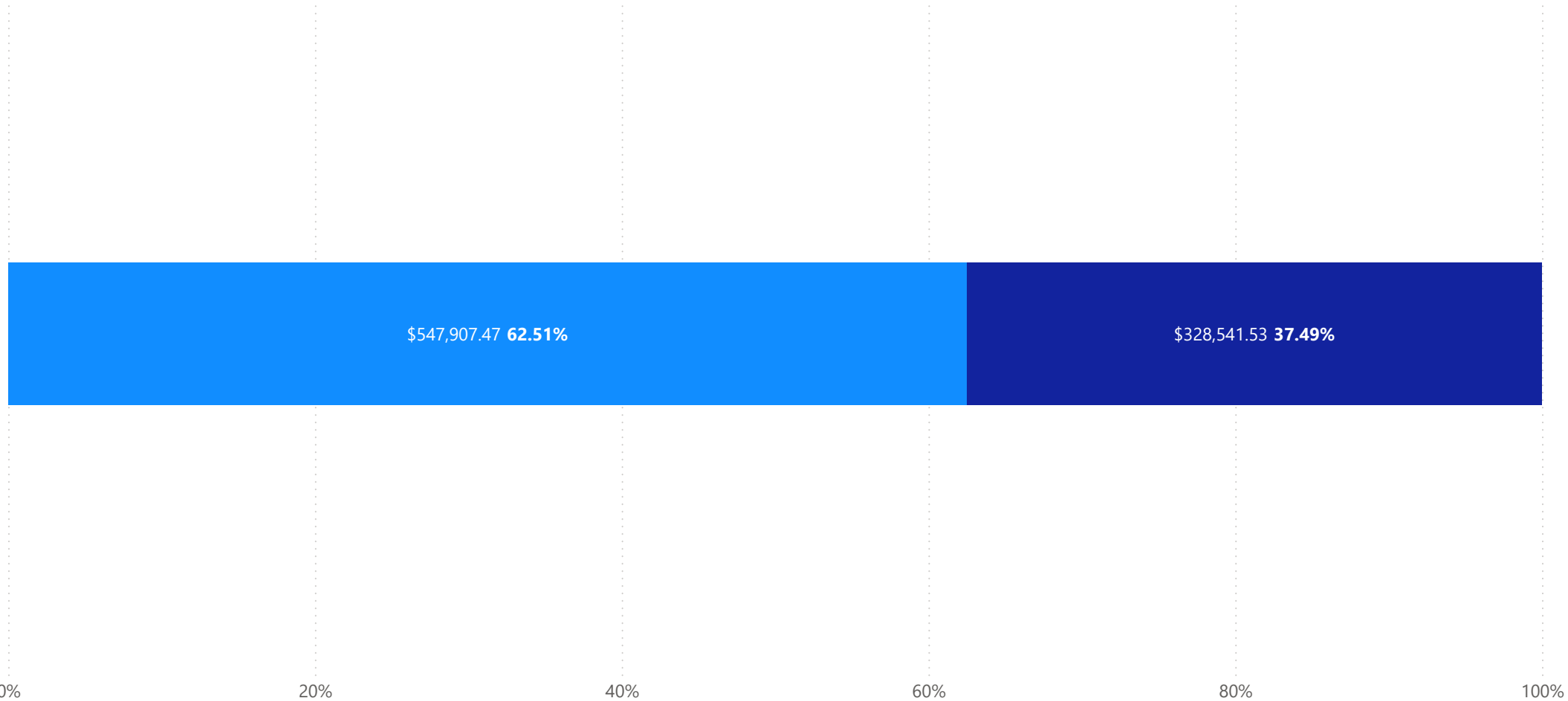
April

May

June

● Sum of Total Spent ● Sum of Total Remaining

JHH--DS--Housing Navigation Center





# Quarter 3 - Housing Navigation Center Performance Overview

Number of Individuals Served

1485

Average time from Date of Engagement to Successful Exit

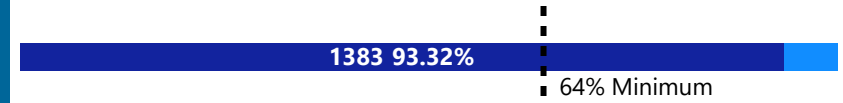
No Client exited successfully from this project that had a Date of Engagement.  
-- HMIS Team

Clients with a Date of Engagement

1421

Serving those with Long Length of Homelessness

● No ● Yes



## Exits from Street Outreach

● Currently Enrolled ● Sheltered

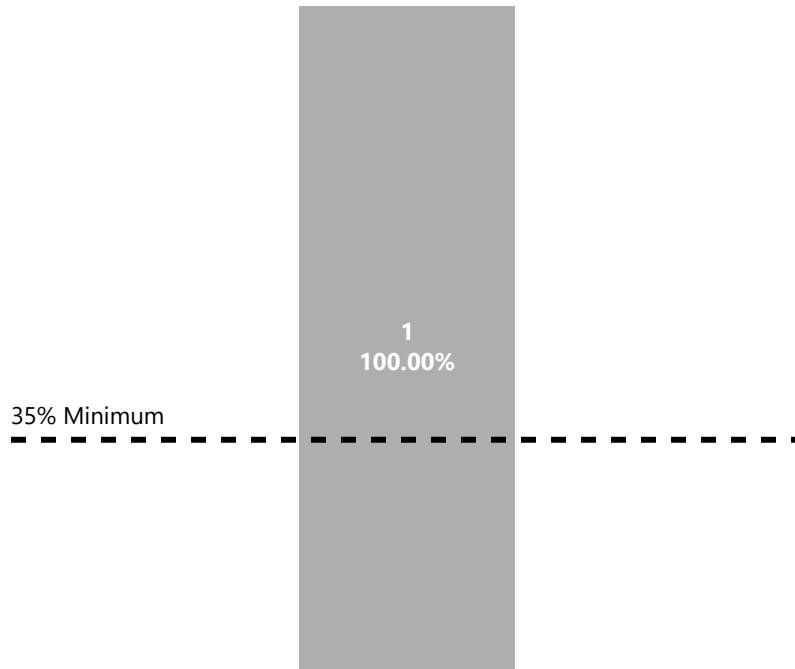
Min: 55% (Successful Exits)  
Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Employment and Income Growth

(Clients with a Date of Engagement)

● No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

20% Maximum



# Quarter 3 - Housing Navigation Center Jewels Helping Hands - Housing Navigation Center (HNC)

Number of Individuals Served

1485

Average time from Date of Engagement to Successful Exit

No Client exited successfully from this project that had a Date of Engagement.  
-- HMIS Team

Clients with a Date of Engagement

1421

Serving those with Long Length of Homelessness

● No ● Yes



## Exits from Street Outreach

● Currently Enrolled ● Sheltered

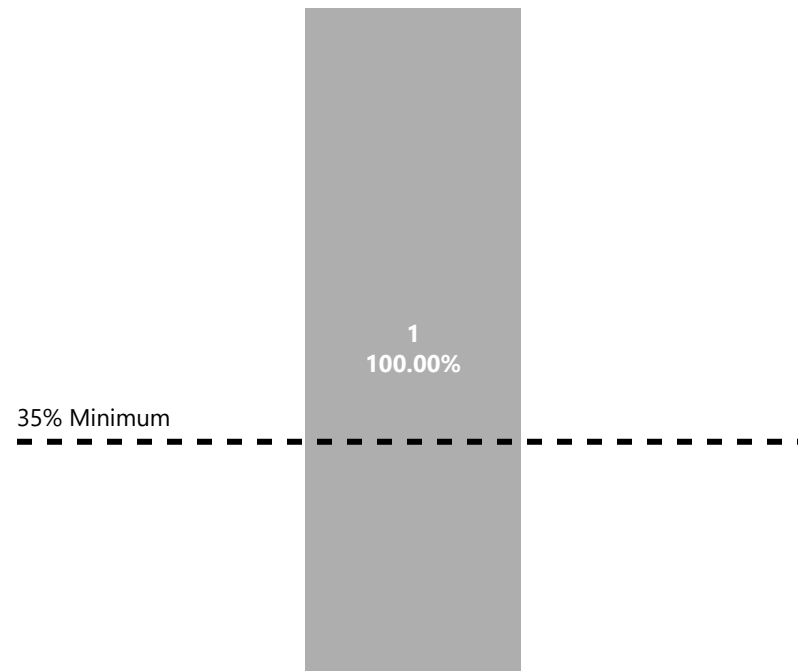
Min: 55% (Successful Exits)  
Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Employment and Income Growth

(Clients with a Date of Engagement)

● No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

20% Maximum



# Quarter 3 - Housing Navigation Center Jewels Helping Hands - Housing Navigation Center (HNC)

Number of Individuals Served

1485

Average Number of Daily Clients

114

Number of Services

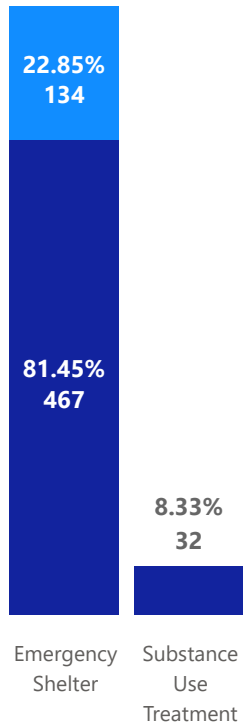
22,492

Number of Referrals

642

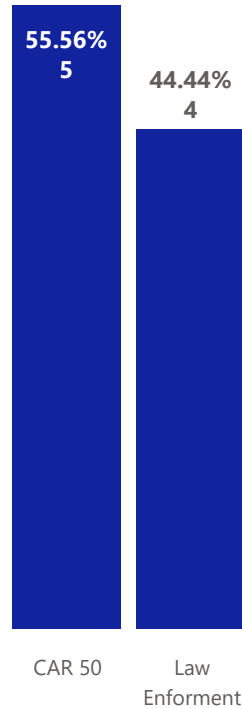
Referrals From HNC

● Referral Accepted ● Unknown



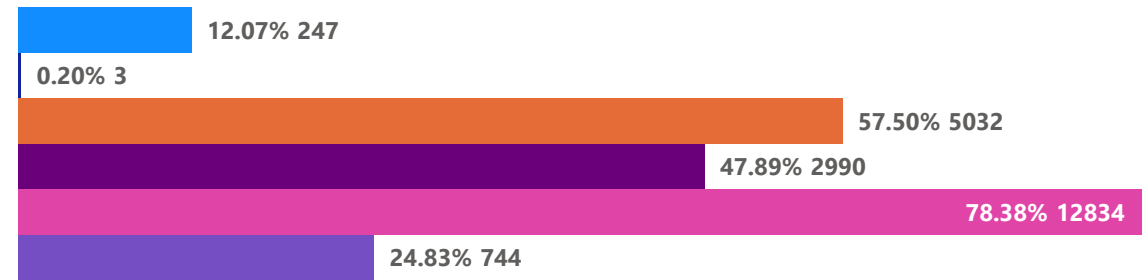
Referrals To HNC

● Referral Accepted



Services Provided

- Bus Pass
- Case Management
- Daily Check-in
- Essential Household Needs
- Outreach Contacts
- Transportation





# Quarter 3 - Night-by-Night Emergency Shelter

Emergency Shelter (ES): Crisis intervention offering beds to individuals who require immediate shelter due to homelessness.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** House of Charity Shelter  
**HMIS Name:** CC--ES--HOC Shelter  
**Inventory:** 99 Beds (Households without children)

**Grants:**

- City of Spokane: Human Services Grant (HSG)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard
- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** Families Shelter  
**HMIS Name:** FPS--ES--Families Shelter  
**Inventory:** 55 Beds (Households with at least one adult and one child)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard
- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** FPS - Scattered Sites  
**HMIS Name:** FPS--ES--Scattered Sites  
**Inventory:** 15 Beds (Households with at least one adult and one child)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- City of Spokane: Behavioral Health and Housing Related Services (1590)
- City of Spokane: Human Services Grant (HSG)



**Public Name:** Recovery Options Center  
**HMIS Name:** CAT--ES--Recovery Options Center  
**Inventory:** 24 Beds (Households without children)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- City of Spokane: Behavioral Health and Housing Related Services (1590)



# Quarter 3 - Night-by-Night Emergency Shelter

Emergency Shelter (ES): Crisis intervention offering beds to individuals who require immediate shelter due to homelessness.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Women's Shelter

**HMIS Name:** JHH--ES--Womens Shelter--Scattered Site

**Inventory:** 30 Beds (Households without children)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- City of Spokane: Behavioral Health and Housing Related Services (1590)
- City of Spokane: Human Services Grant (HSG)



**Public Name:** Churches

**HMIS Name:** JHH--ES--Churches--Scattered Site

**Inventory:** 60 Beds (Households without children)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard
- City of Spokane: Behavioral Health and Housing Related Services (1590)
- City of Spokane: Human Services Grant (HSG)



**Public Name:** Aurora Center

**HMIS Name:** JHH--ES--Aurora Center

**Inventory:** 15 Beds (Households without children)

**Grants:**

- City of Spokane: Behavioral Health and Housing Related Services (1590)



**Public Name:** Young Adult Shelter

**HMIS Name:** VOA--ES--YAS

**Inventory:** 44 Beds (Households without children)

**Grants:**

- City of Spokane: Behavioral Health and Housing Related Services (1590)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard



# Spend Down - Emergency Shelter - Night-by-Night

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

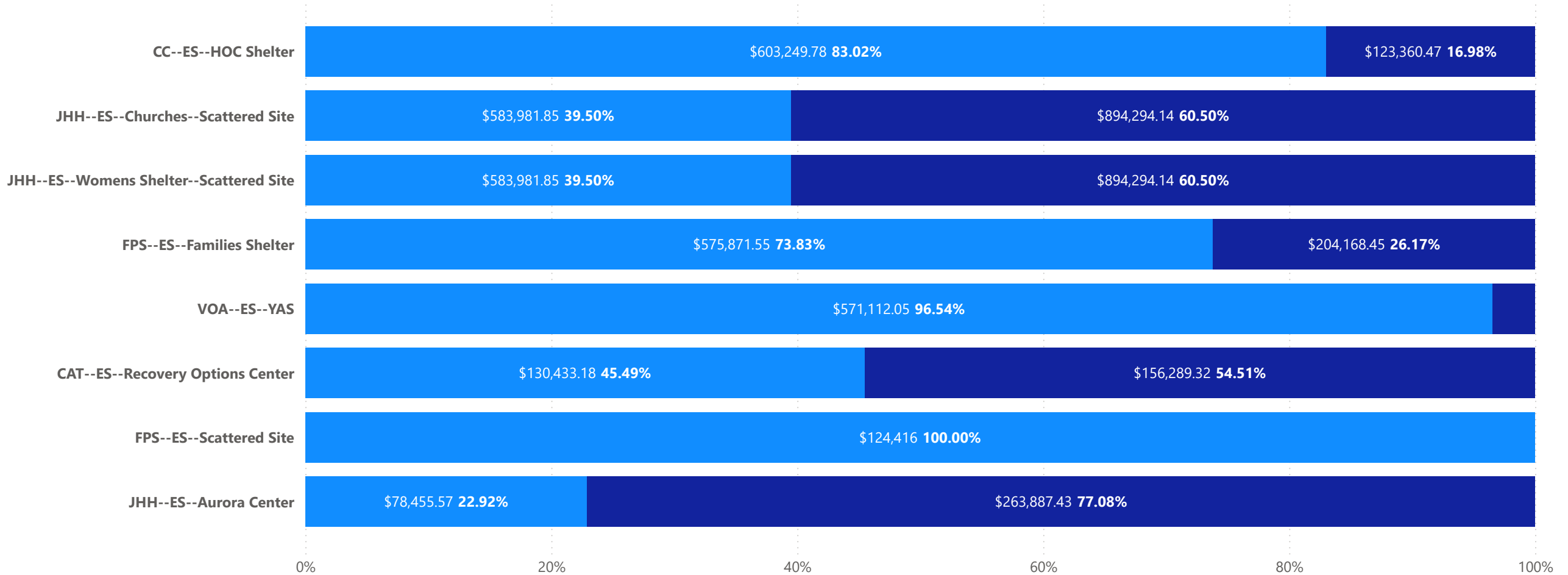
March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining





# Quarter 3 - Night-by-Night Emergency Shelter Performance Overview

Number of Individuals Served

1529

Length of Time Homeless in ES  
(SPM Metric 1a.1)

75

Max: 90 Days

Clients with a Date of Engagement

798

Average Length of Time to Date of Engagement (Days)

10

Max: 30 Days

Average Rate of Utilization  
(Local Measure)

83%

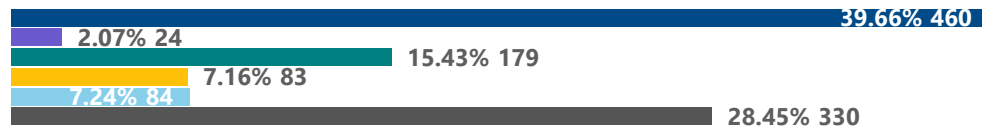
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered

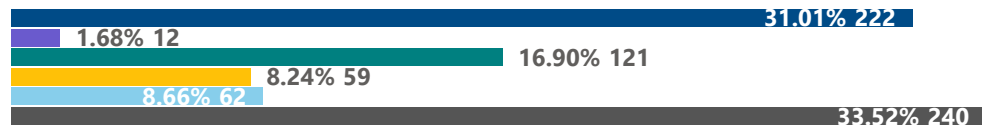
Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

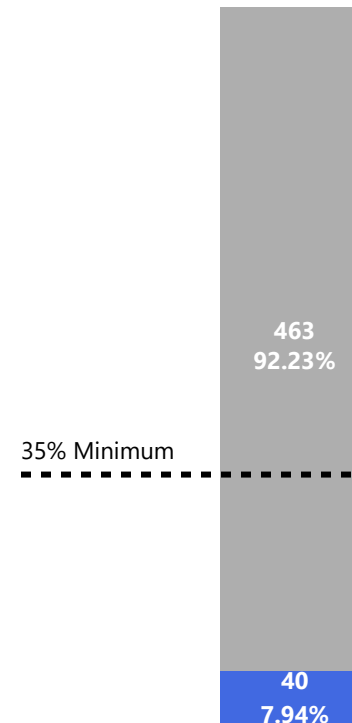
- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

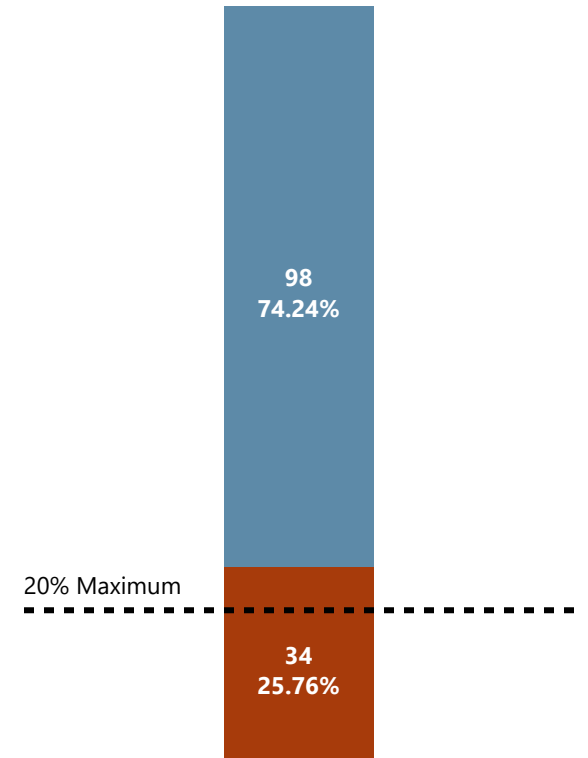
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Night-by-Night Emergency Shelter Catholic Charities - House of Charity Shelter

Number of Individuals Served

Projected Individuals Served: 461

# 390

Length of Time Homeless in ES

(SPM Metric 1a.1)

# 137

Max: 90 Days

Clients with a Date of Engagement

# 58

Average Length of Time to Date of Engagement (Days)

# 70

Max: 30 Days

Average Rate of Utilization

(Local Measure)

# 97%

Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary

Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

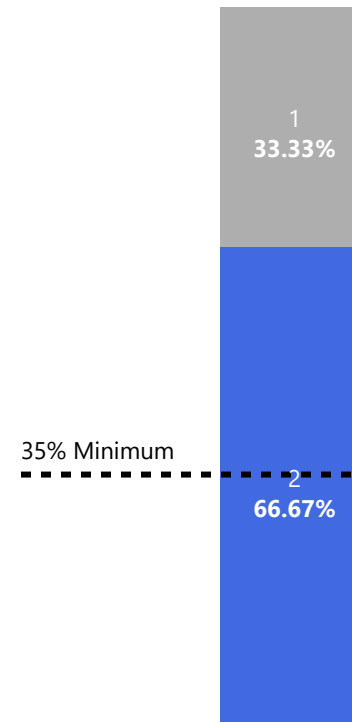
- Currently Enrolled
- Permanent



## Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

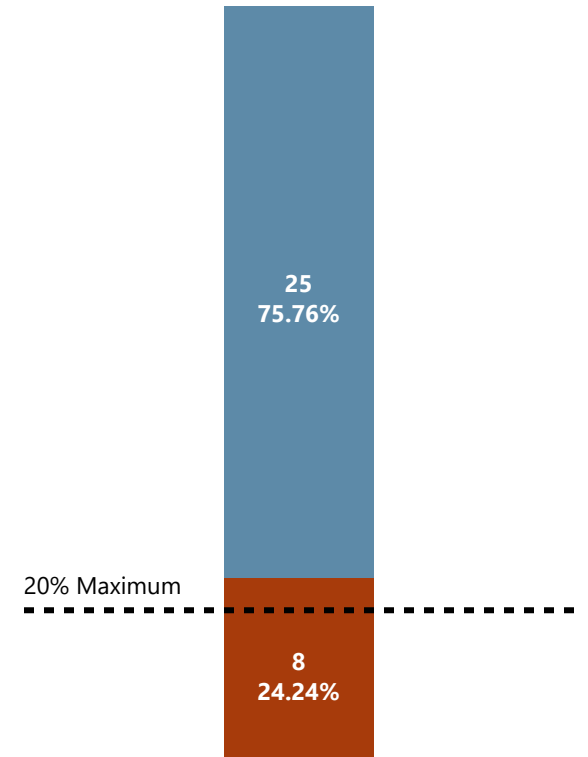
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Night-by-Night Emergency Shelter Family Promise of Spokane - Families Shelter

Number of Households Served  
Projected Households Served: 204

114

Length of Time Homeless in ES  
(SPM Metric 1a.1)

60

Max: 90 Days

Clients with a Date of Engagement

76

Average Length of Time to Date of Engagement (Days)

4

Max: 30 Days

Average Rate of Utilization  
(Local Measure)

94%

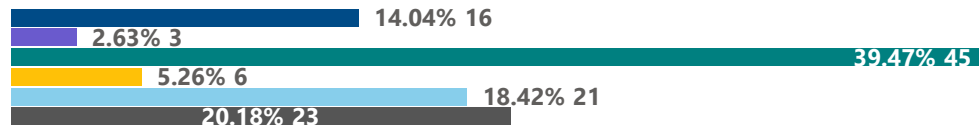
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered

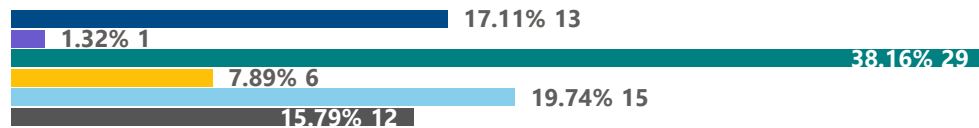
Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

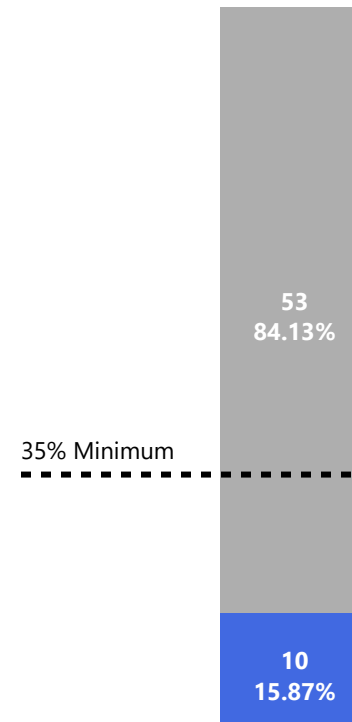
- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

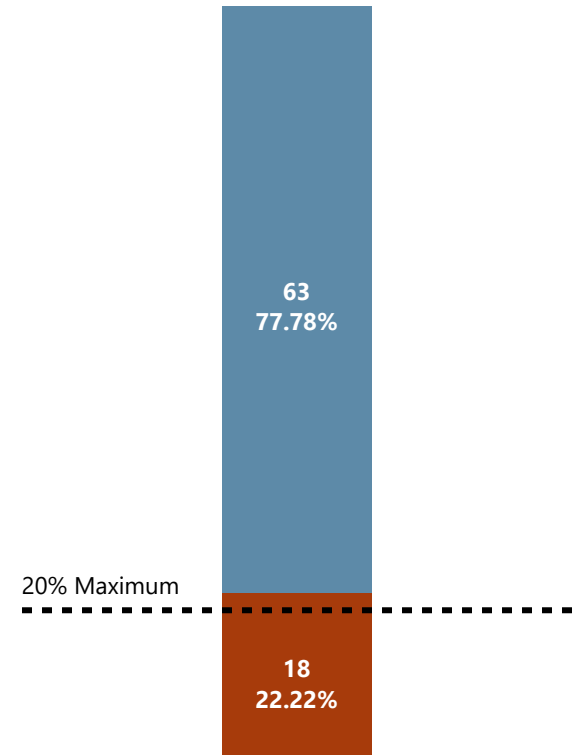
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Night-by-Night Emergency Shelter Family Promise of Spokane - Scattered Sites

**Number of Households Served**  
Projected Households Served: 25

**Length of Time Homeless in ES**  
(SPM Metric 1a.1)

**Clients with a Date of Engagement**

**Average Length of Time to Date of Engagement (Days)**

**Average Rate of Utilization**  
(Local Measure)

**38**

**47**  
Max: 90 Days

**25**

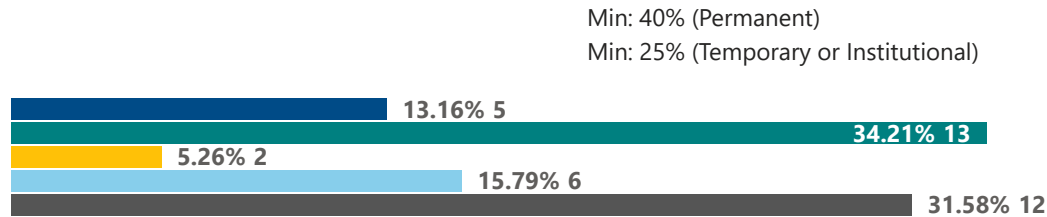
**3**  
Max: 30 Days

**79%**  
Min: 85%

### Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered

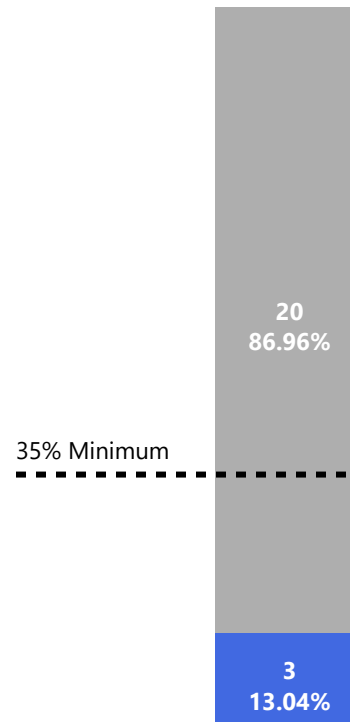


Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)

### Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

- Increase
- No Increase



35% Minimum

### Returns to Homelessness

(SPM Metric 2b)

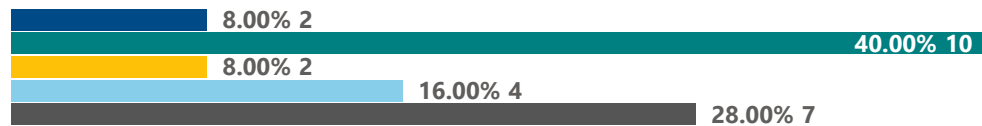
No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

### Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered



20% Maximum



# Quarter 3 - Night-by-Night Emergency Shelter Compassionate Addictive Treatment - Recovery Options Center

Number of Individuals Served  
Projected Individuals Served: 81

Length of Time Homeless in ES  
(SPM Metric 1a.1)

Clients with a Date of Engagement

Average Length of Time to Date of Engagement (Days)

Average Rate of Utilization  
(Local Measure)

94

75

Max: 90 Days

83

0

Max: 30 Days

76%

Min: 85%

### Exits

(SPM Metric 7b.1 - All Clients)

Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)

- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered



### Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

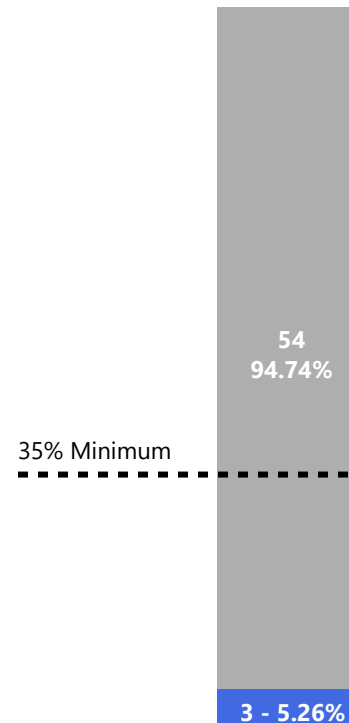
- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered



### Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

- Increase
- No Increase



### Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

35% Minimum

20% Maximum



# Quarter 3 - Night-by-Night Emergency Shelter Jewels Helping Hands - Women's Shelter

Number of Individuals Served  
Projected Individuals Served: 250

Length of Time Homeless in ES  
(SPM Metric 1a.1)

Clients with a Date of Engagement

Average Length of Time to Date of Engagement (Days)

Average Rate of Utilization  
(Local Measure)

247

25  
Max: 90 Days

203

2  
Max: 30 Days

73%  
Min: 85%

### Exits

(SPM Metric 7b.1 - All Clients)

Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)

- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered



### Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

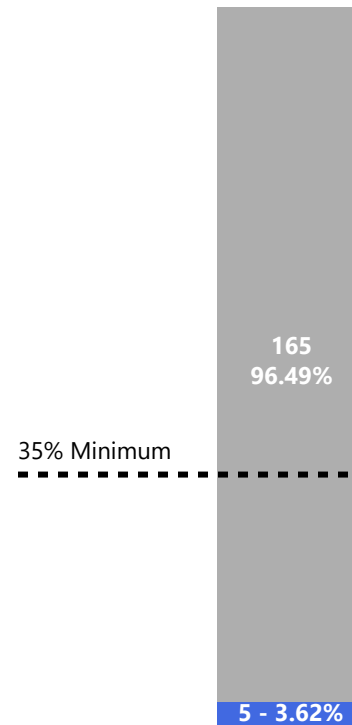
- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered



### Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

- Increase
- No Increase



### Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team



# Quarter 3 - Night-by-Night Emergency Shelter Jewels Helping Hands - Churches

Number of Individuals Served  
Projected Individuals Served: 600

Length of Time Homeless in ES  
(SPM Metric 1a.1)

Clients with a Date of Engagement

Average Length of Time to Date of Engagement (Days)

Average Rate of Utilization  
(Local Measure)

281

74  
Max: 90 Days

139

1  
Max: 30 Days

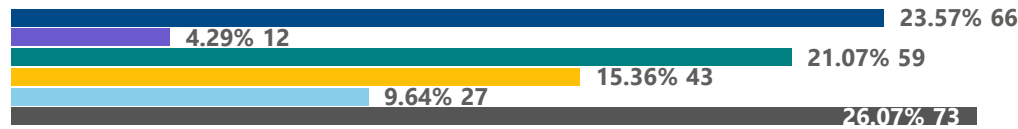
93%  
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered

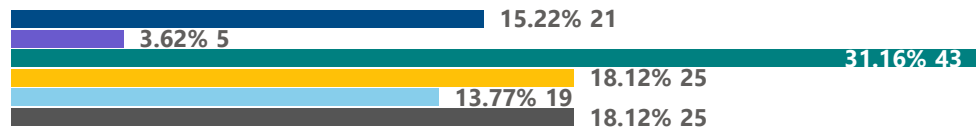
Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

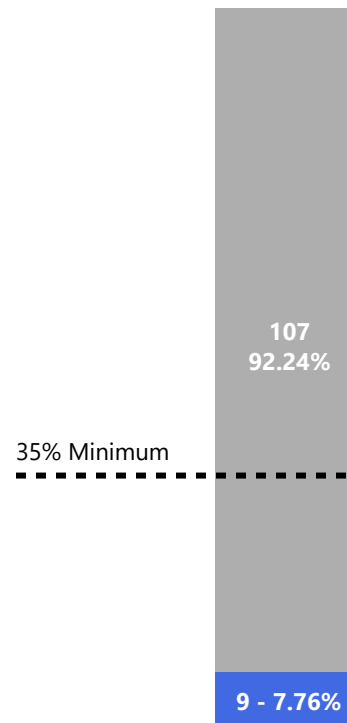
- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

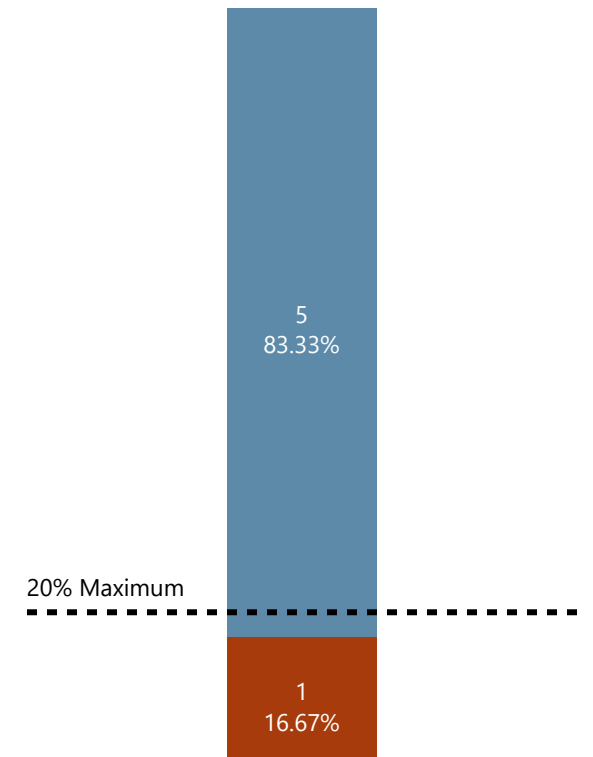
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Night-by-Night Emergency Shelter Jewels Helping Hands - Aurora Center

Number of Individuals Served

35

Length of Time Homeless in ES  
(SPM Metric 1a.1)

14

Max: 90 Days

Clients with a Date of Engagement

24

Average Length of Time to Date of Engagement (Days)

0

Max: 30 Days

Average Rate of Utilization  
(Local Measure)

76%

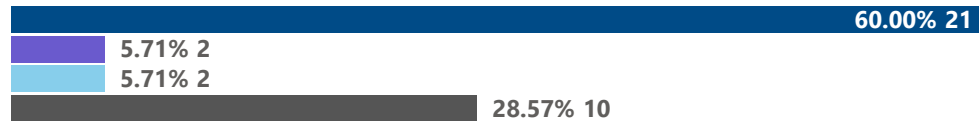
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Institutional
- Temporary
- Unsheltered

Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

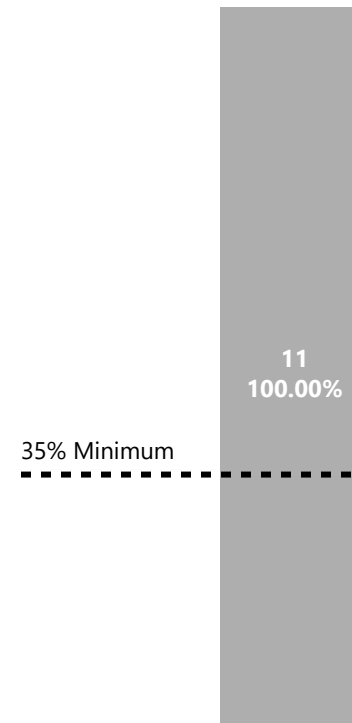
- Currently Enrolled
- Institutional
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

- No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

20% Maximum



# Quarter 3 - Night-by-Night Emergency Shelter Volunteers of America - Young Adult Shelter

Number of Individuals Served

Projected Individuals Served: 199

185

Length of Time Homeless in ES

(SPM Metric 1a.1)

60

Max: 90 Days

Clients with a Date of Engagement

140

Average Length of Time to Date of Engagement (Days)

19

Max: 30 Days

Average Rate of Utilization

(Local Measure)

73%

Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered

Min: 40% (Permanent)  
Min: 25% (Temporary or Institutional)



## Exits

(SPM Metric 7b.1 - Only W/ Date of Engagement)

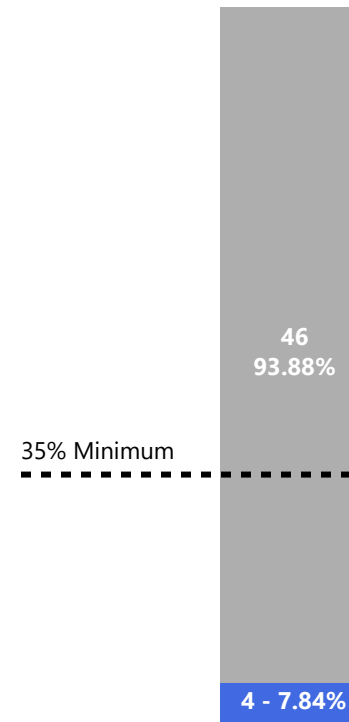
- Currently Enrolled
- Institutional
- Permanent
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6 - Only w/ Date of Engagement)

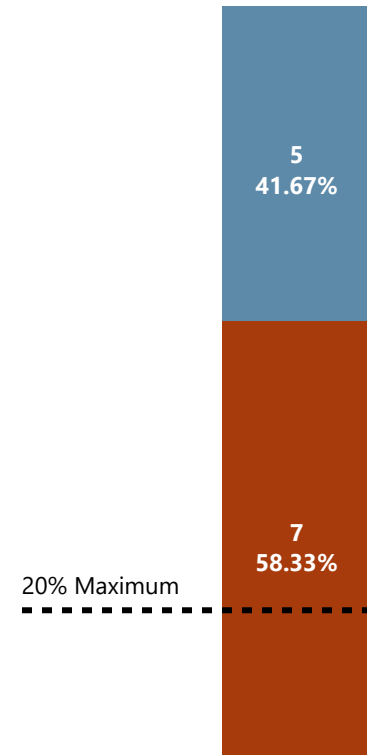
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Continuous Stay Emergency Shelter

Emergency Shelter (ES): Crisis intervention offering beds to individuals who require immediate shelter due to homelessness.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** The Way Out Shelter  
**HMIS Name:** TSA--ES--The Way Out Center  
**Inventory:** 30 Beds (Households without children)

**Grants:**

- City of Spokane: Homeless Housing Assistance Act (HHAA)
- Spokane County: Homeless Housing Assistance Act (HHAA)
- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** Crosswalk Youth Shelter  
**HMIS Name:** VOA--ES--Crosswalk Youth Shelter  
**Inventory:** 18 Beds (Households with only children)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)
- WA Dept. Commerce: Supportive Services - Ancillary Therapeutic Services (ATS)
- Health and Human Services (HHS): Runaway Homeless Youth (RHY) - Basic Center Program (BCP)



**Public Name:** DV Shelter  
**HMIS Name:** YWCA--ES--DV Shelter  
**Inventory:** 25 Beds (Households with at least one adult and one child), 6 Beds (Households without children)

**Grants:**

- City of Spokane: Behavioral Health and Housing Related Services (1590)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard



**Public Name:** Emergency Declaration  
**HMIS Name:** YWCA--ES--Emergency Declaration  
**Inventory:** 18 Beds (Households with at least one adult and one child), 1 Bed (Households without children)

**Grants:**

- City of Spokane: Behavioral Health and Housing Related Services (1590)



# Quarter 3 - Continuous Stay Emergency Shelter

Emergency Shelter (ES): Crisis intervention offering beds to individuals who require immediate shelter due to homelessness.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Catalyst

**HMIS Name:**

- CC--ES--Catalyst--ROW
- CC--ES--Community Catalyst--ROW

**Inventory:** 80 Beds (Households without children)

**Grants:**

- WA Dept. Commerce: Right of Way (ROW)



**Public Name:** Revive Homes

**HMIS Name:** REV--ES--Homes--ROW

**Inventory:** 26 Beds (Households with only children)

**Grants:**

- WA Dept. Commerce: Right of Way (ROW)



**Public Name:** Healing Hearts Medical Respite

**HMIS Name:** JHH--ES--Healing Hearts Medical Respite

**Inventory:** 30 Beds (Households without children)

**Grants:**

- City of Spokane: Behavioral Health and Housing Related Services (1590)
- City of Spokane: Human Services Grant (HSG)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)



# Spend Down - Emergency Shelter - Continuous Stay

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

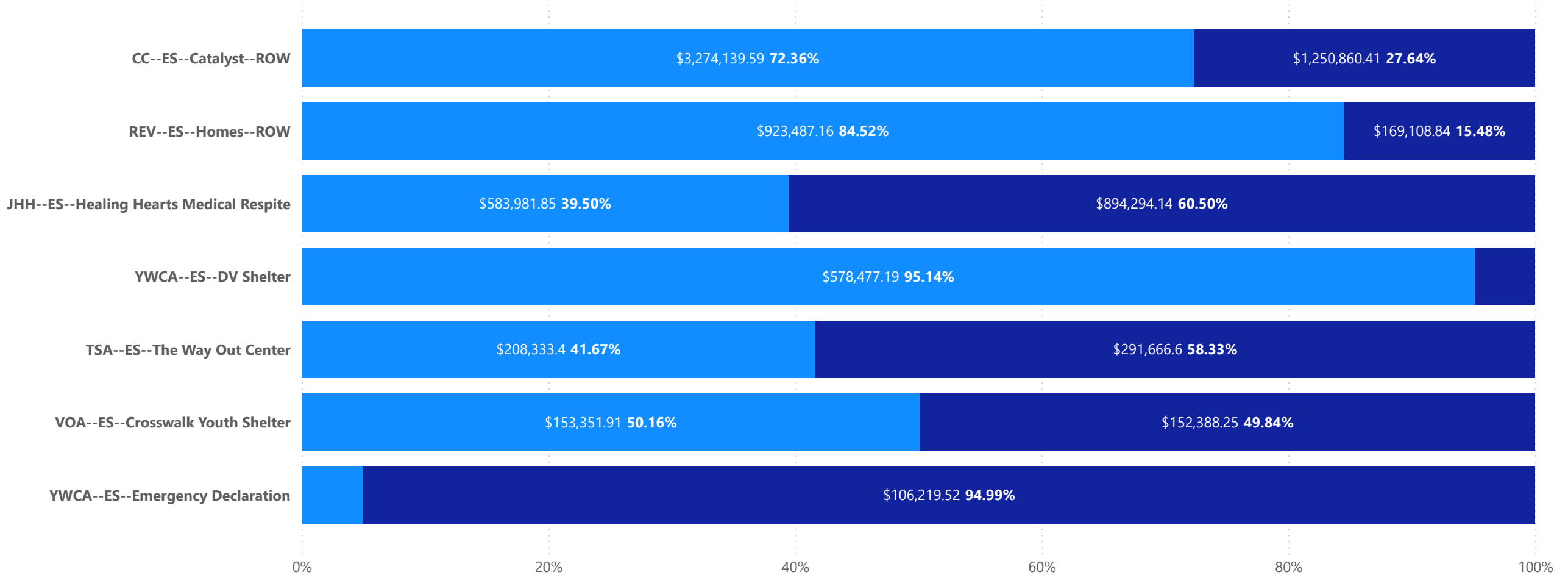
March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining





# Quarter 3 - Continuous Stay Emergency Shelter Performance Overview

Number of Individuals Served

692

Length of Time Homeless in ES  
(SPM Metric 1a.1)

131

Max: 90 Days

Average Rate of Utilization  
(Local Measure)

69%

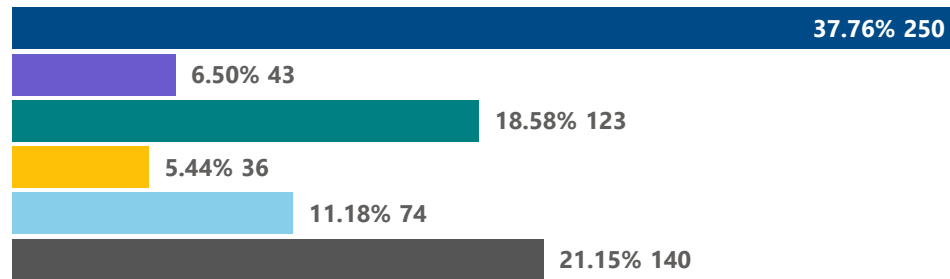
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)

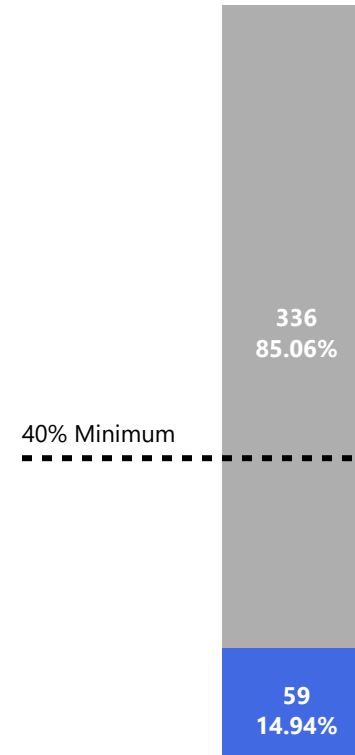
- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6)

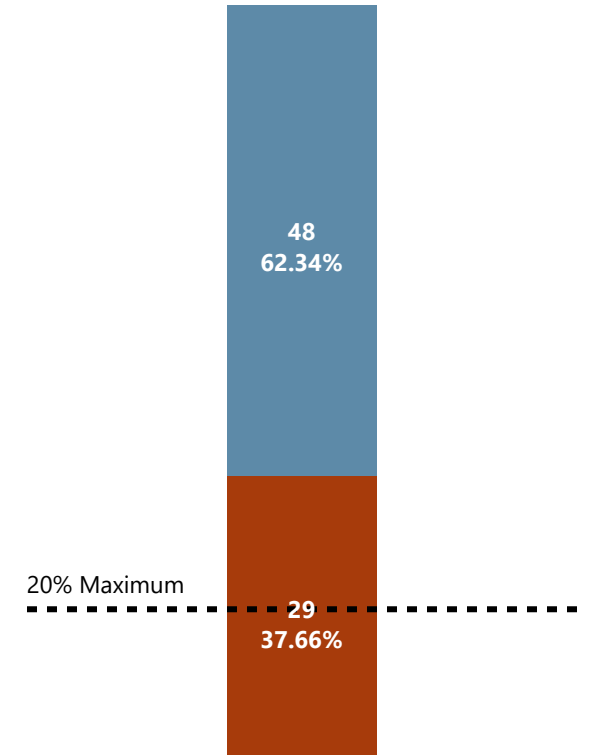
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Continuous Stay Emergency Shelter The Salvation Army - The Way Out Shelter

Number of Individuals Served

Projected Individuals Served: 250

# 247

Length of Time Homeless in ES

(SPM Metric 1a.1)

# 45

Max: 90 Days

Average Rate of Utilization

(Local Measure)

# 97%

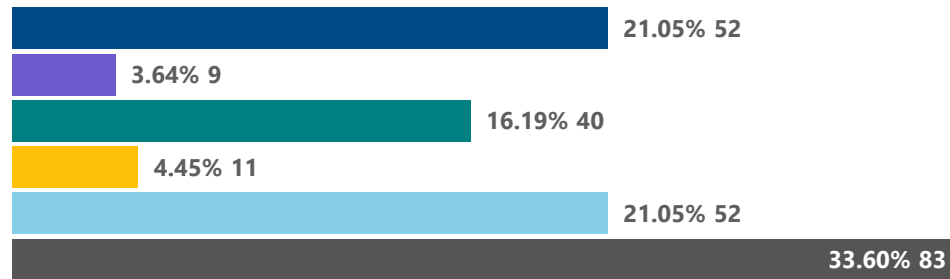
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)

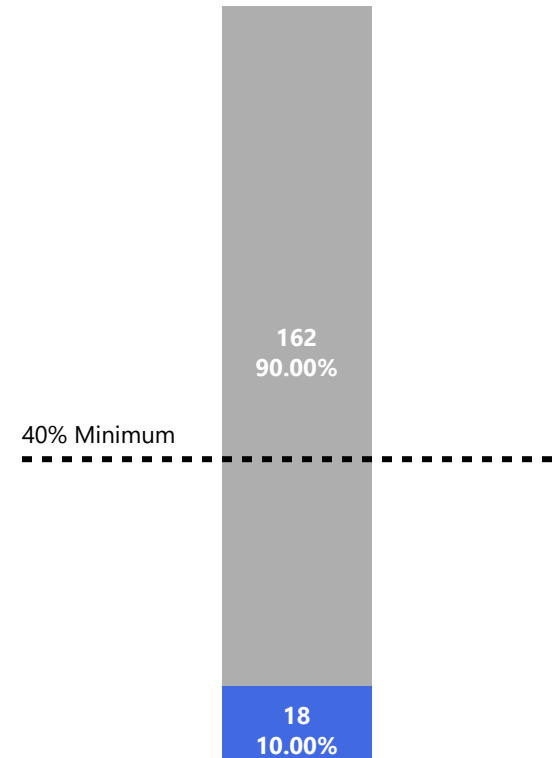
- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6)

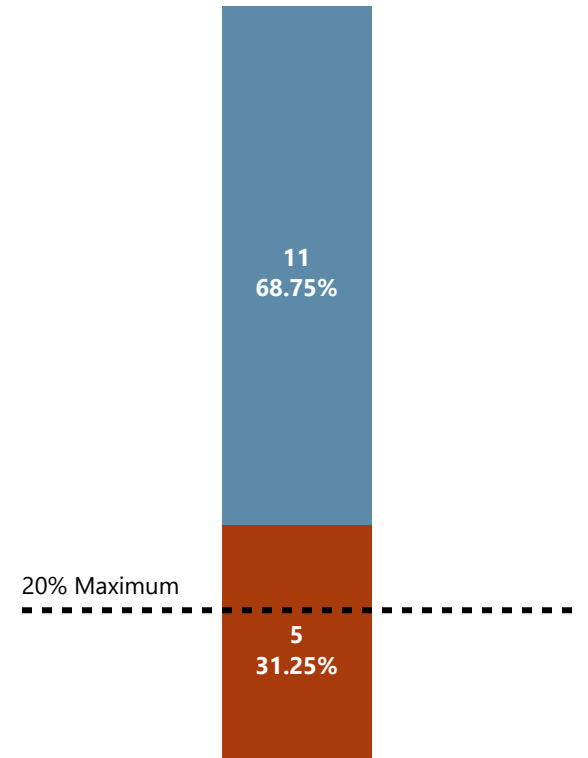
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Continuous Stay Emergency Shelter Volunteers of America - Crosswalk Youth Shelter

Number of Individuals Served

Projected Individuals Served: 170

# 105

Length of Time Homeless in ES

(SPM Metric 1a.1)

# 167

Max: 90 Days

Average Rate of Utilization

(Local Measure)

# 60%

Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)

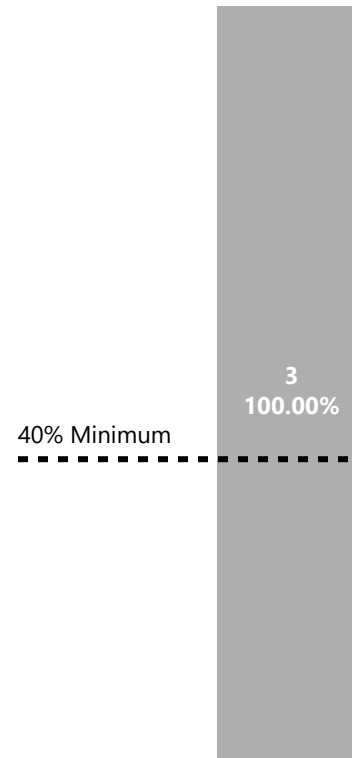
- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6)

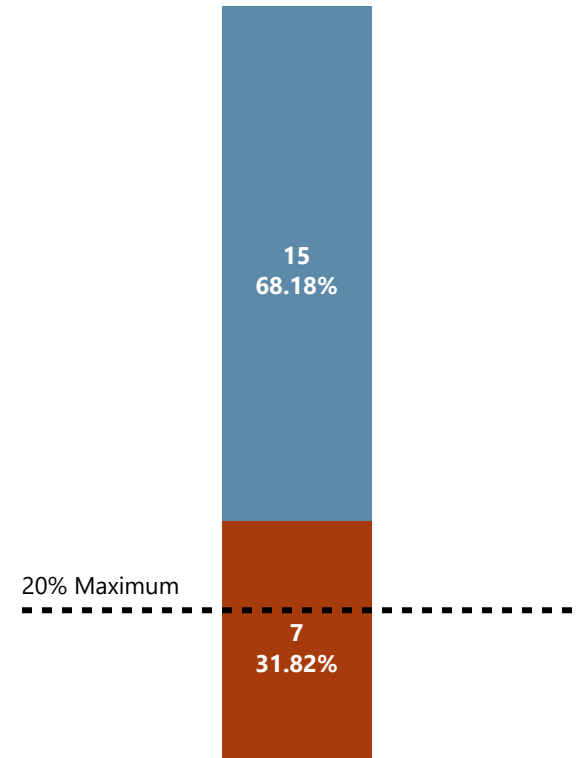
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Continuous Stay Emergency Shelter YWCA - DV Shelter

## Number of Individuals Served

Projected Households Served: 80

# 49

## Length of Time Homeless in ES

(SPM Metric 1a.1)

*We are unable to surface this data as the YWCA uses a comparable database.*

-- HMIS Team

## Average Rate of Utilization

(Local Measure)

# 43%

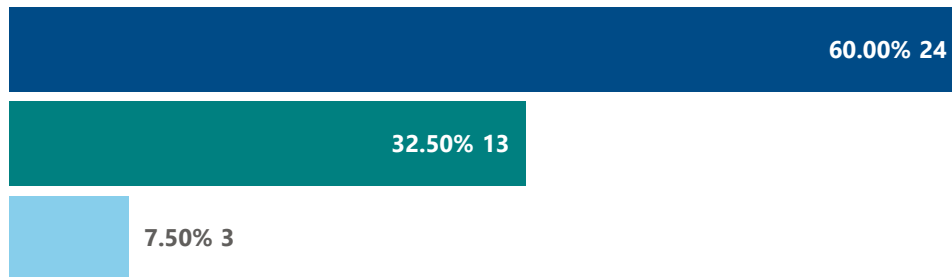
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Permanent
- Temporary

Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)

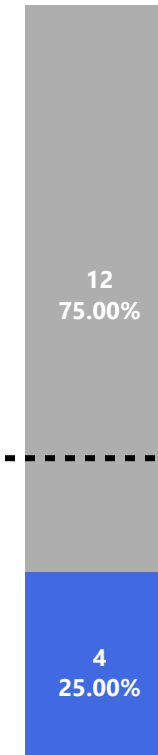


## Employment and Income Growth

(SPM Metric 4.6)

- Increase
- No Increase

40% Minimum



## Returns to Homelessness

(SPM Metric 2b)

*This measure is not yet available. The HMIS team is working closely with the provider to obtain the data necessary for this report.*

-- HMIS Team

20% Maximum



# Quarter 3 - Continuous Stay Emergency Shelter YWCA - Emergency Declaration

Note: Project Started 12/1/2025

Number of Individuals Served

47

Length of Time Homeless in ES  
(SPM Metric 1a.1)

We are unable to surface this data as the YWCA uses a comparable database.

-- HMIS Team

Average Rate of Utilization  
(Local Measure)

100%

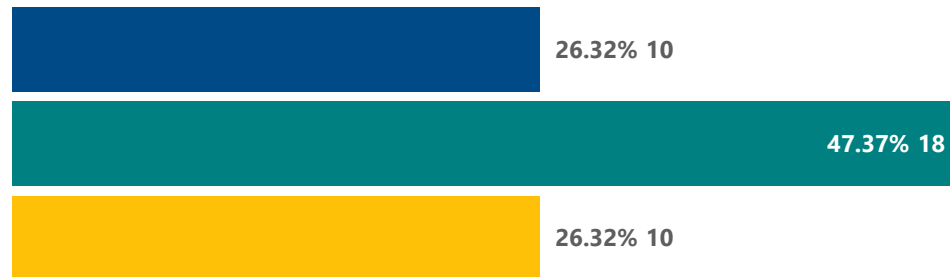
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)

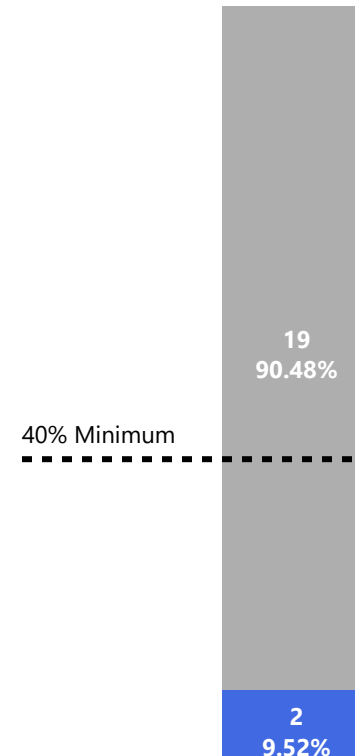
- Currently Enrolled
- Permanent
- Sheltered



## Employment and Income Growth

(SPM Metric 4.6)

- Increase
- No Increase



40% Minimum

This measure is not yet available. The HMIS team is working closely with the provider to obtain the data necessary for this report.

-- HMIS Team

20% Maximum



# Quarter 3 - Continuous Stay Emergency Shelter Catholic Charities - Catalyst

Number of Individuals Served

Projected Individuals Served: 125

# 100

Length of Time Homeless in ES

(SPM Metric 1a.1)

# 330

Max: 90 Days

Average Rate of Utilization

(Local Measure)

# 71%

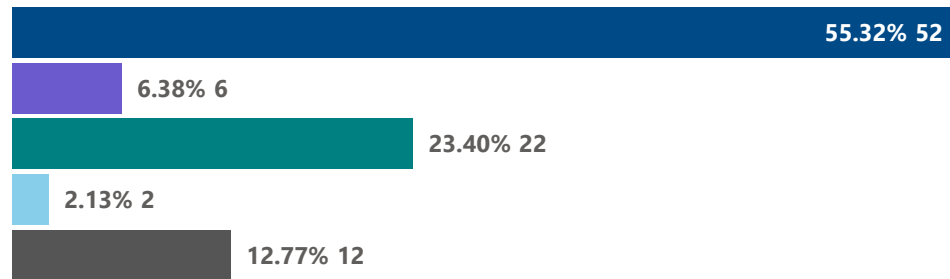
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)

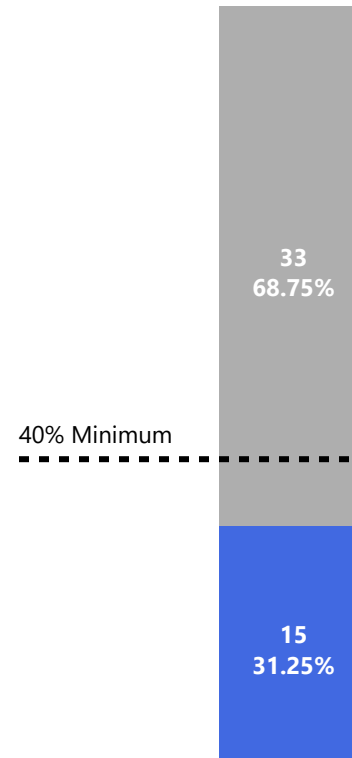
- Currently Enrolled
- Institutional
- Permanent
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6)

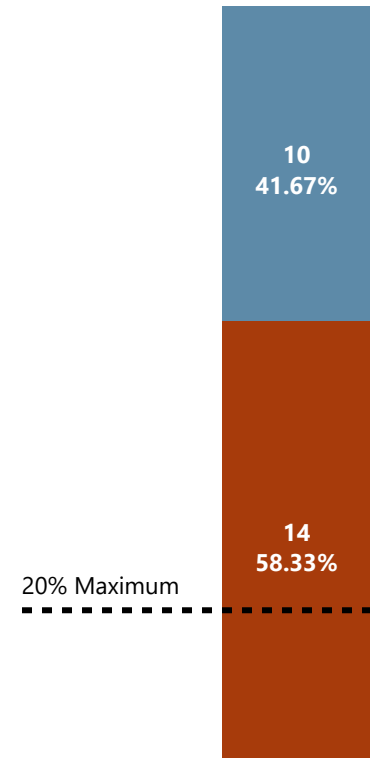
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Continuous Stay Emergency Shelter Revive Counseling - Revive Homes

Number of Individuals Served

Projected Households Served: 60

# 38

Length of Time Homeless in ES

(SPM Metric 1a.1)

# 291

Max: 90 Days

Average Rate of Utilization

(Local Measure)

# 51%

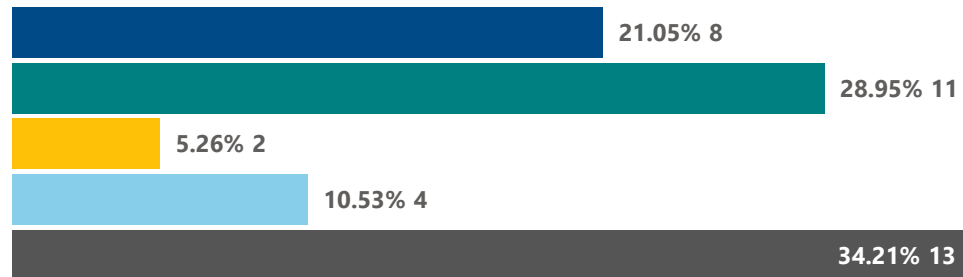
Min: 85%

## Exits

(SPM Metric 7b.1 - All Clients)

Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)

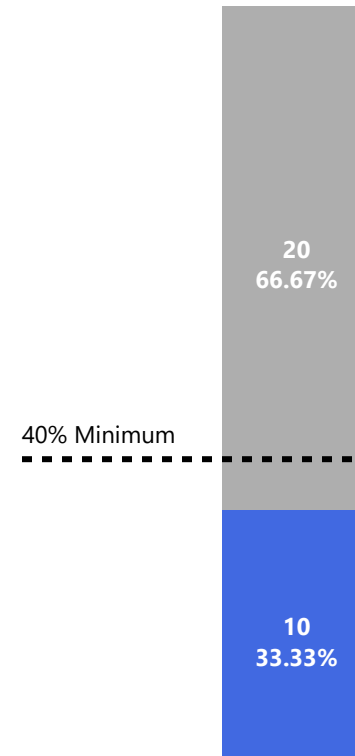
- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6)

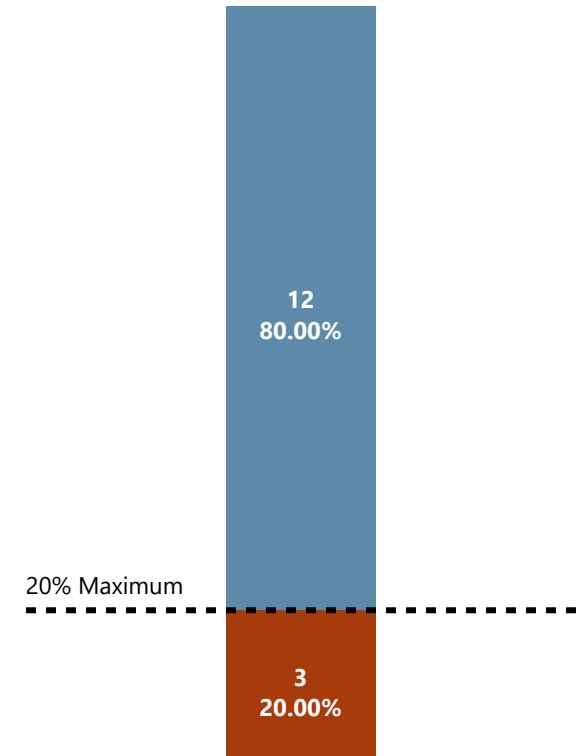
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Continuous Stay Emergency Shelter Jewels Helping Hands - Healing Hearts Medical Respite

Number of Individuals Served

Projected Individuals Served: 110

# 112

Length of Time Homeless in ES

(SPM Metric 1a.1)

# 54

Max: 90 Days

Average Rate of Utilization

(Local Measure)

# 60%

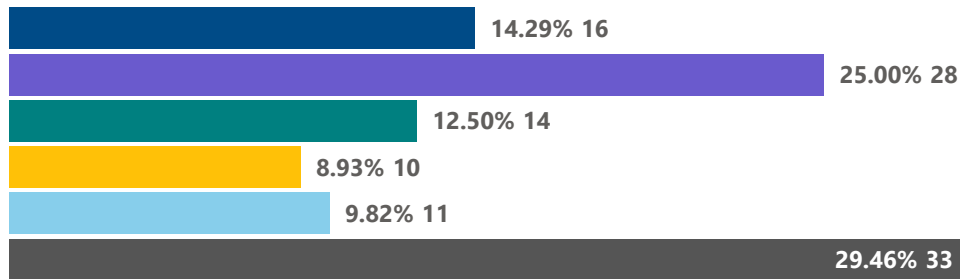
Min: 85%

### Exits

(SPM Metric 7b.1 - All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Sheltered
- Temporary
- Unsheltered

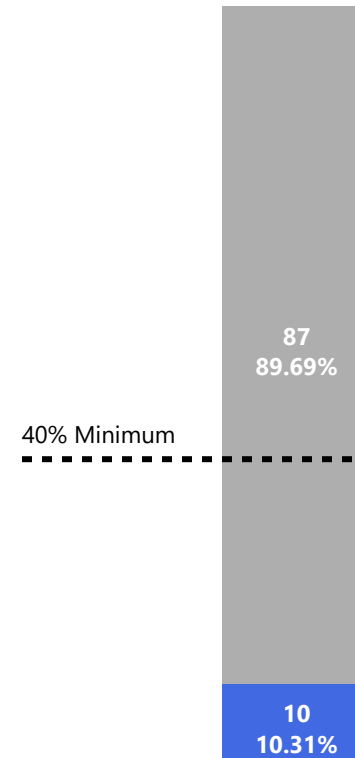
Min: 55% (Permanent)  
Min: 25% (Temporary or Institutional)



### Employment and Income Growth

(SPM Metric 4.6)

- Increase
- No Increase



### Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team



# Quarter 3 - Transitional Housing

Transitional Housing (TH): One-to-Two year program offering intensive case management. Helps stabilize households and prepare them for independent living. Units are pre-identified.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Saint Margaret's Shelter  
**HMIS Name:** CC--TH--SMS--CoC-WA0109  
**Inventory:** 36 Beds / 12 Units (Households with at least one adult and one child)

- Grants:**
- WA Dept. Commerce: System Demonstration Grant (SDG) - Standard
  - HUD: Continuum of Care (CoC) - Transitional Housing (TH)



**Public Name:** Alexandria's House  
**HMIS Name:** VOA--TH--Alexandrias House--CoC-WA0126  
**Inventory:** 6 Beds / 3 Units (Households with at least one adult and one child), 6 Beds / 3 Units (Households with only children)

- Grants:**
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard
  - WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)
  - HUD: Continuum of Care (CoC) - Transitional Housing (TH)



**Public Name:** Miryam's House  
**HMIS Name:** TPW--TH--Miryams House  
**Inventory:** 6 Beds / 6 Units (Households without children)

- Grants:**
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
  - WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** Transitional Living Center  
**HMIS Name:** TPW--TH--TLC  
**Inventory:** 18 Beds / 6 Units (Households with at least one adult and one child)

- Grants:**
- City of Spokane: Behavioral Health and Housing Related Services (1590)
  - WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
  - WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



# Spend Down - Transitional Housing

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining

TPW--TH--TLC

\$110,197.93 74.68%

\$37,368.82 25.32%

TPW--TH--Miryams House

\$89,523.61 78.99%

\$23,805.85 21.01%

VOA--TH--Alexandrias House--CoC-WA0126

\$76,203.17 76.20%

\$23,796.83 23.80%

CC--TH--SMS--CoC-WA0109

\$35,875.18 83.43%

\$7,124.82 16.57%

0%

20%

40%

60%

80%

100%



# Quarter 3 - Transitional Housing Performance Overview

Number of Households Served

69

Average Length of Time Homeless (Days)  
(SPM Metric 1a.2)

146

Max: 160 Days

Average Utilization Rate  
(Bed)

76%

Min: 85%

Average Utilization Rate  
(Unit)

73%

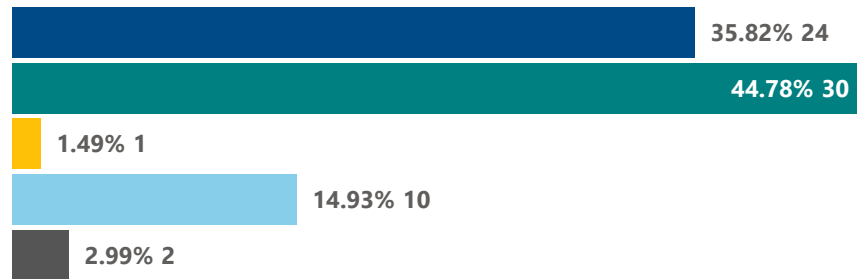
Min: 85%

## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

Min: 70% (Permanent)

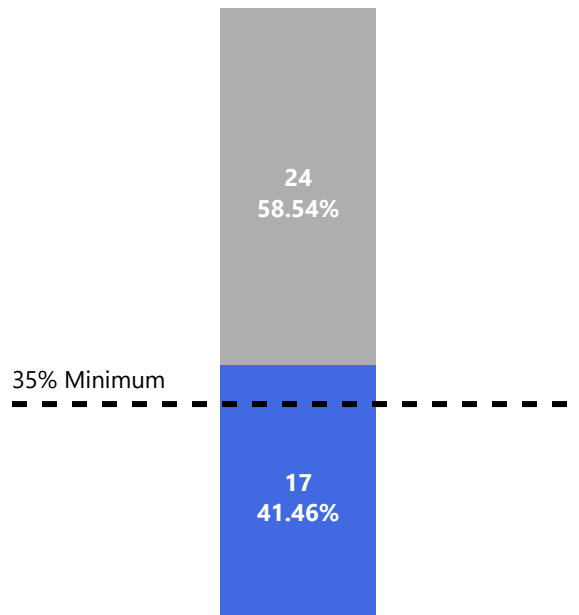
- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6)

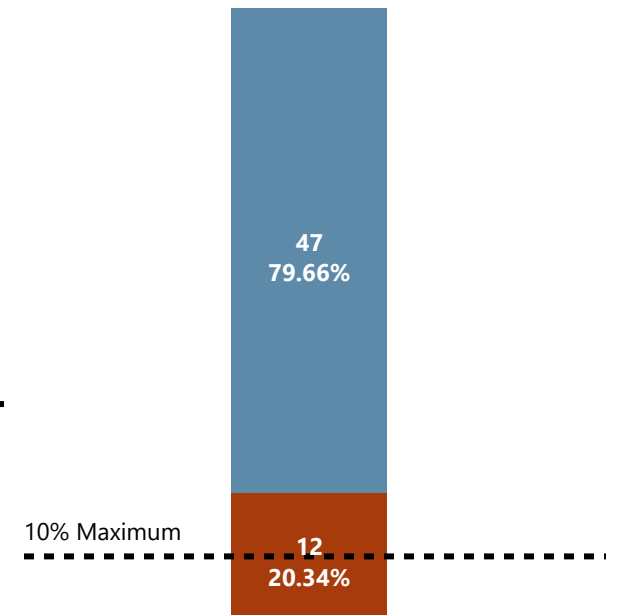
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Transitional Housing Catholic Charities - Saint Margaret's Shelter

Number of Households Served

Projected Households Served: 17

# 39

Average Length of Time Homeless (Days)

(SPM Metric 1a.2)

# 103

Max: 160 Days

Average Utilization Rate

(Bed)

# 93%

Min: 85%

Average Utilization Rate

(Unit)

# 100%

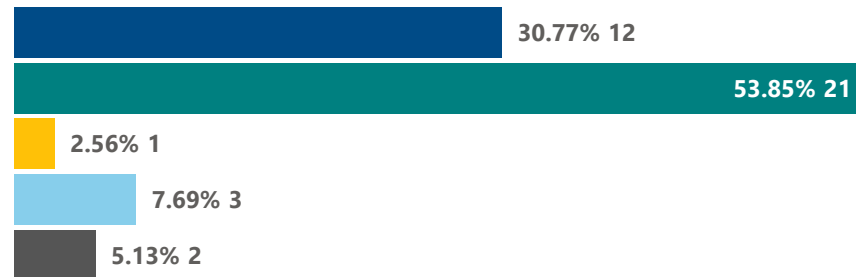
Min: 85%

## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

Min: 70% (Permanent)

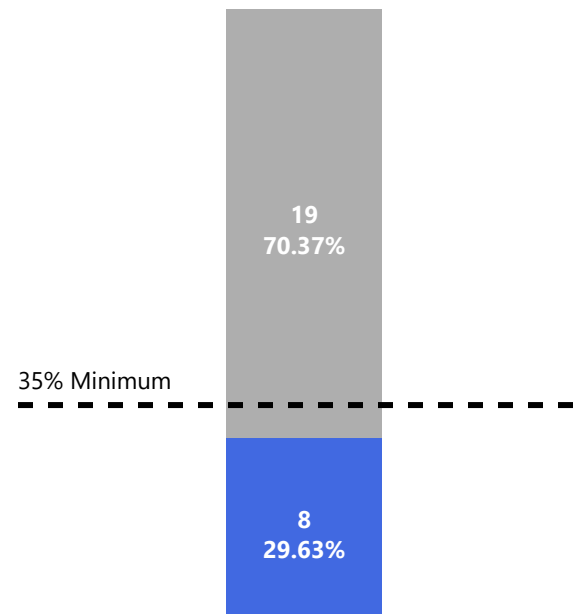
- Currently Enrolled
- Permanent
- Sheltered
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6)

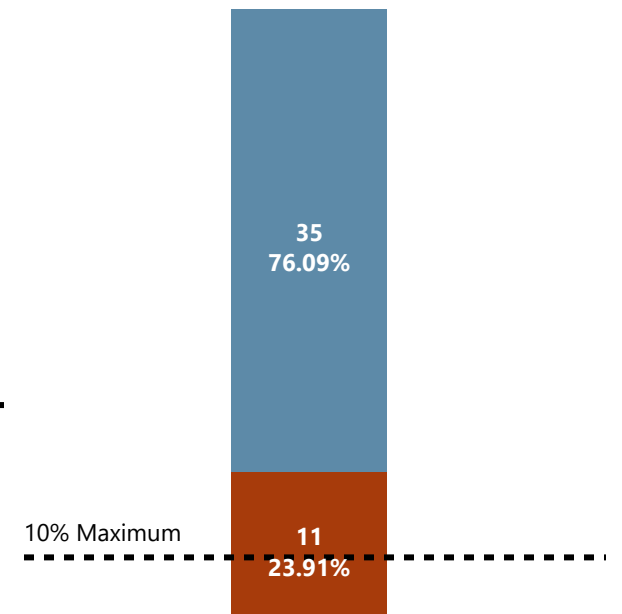
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Transitional Housing Volunteers of America - Alexandria's House

Number of Households Served

Projected Households Served: 5

11

Average Length of Time Homeless (Days)

(SPM Metric 1a.2)

66

Max: 160 Days

Average Utilization Rate

(Bed)

16%

Min: 85%

Average Utilization Rate

(Unit)

26%

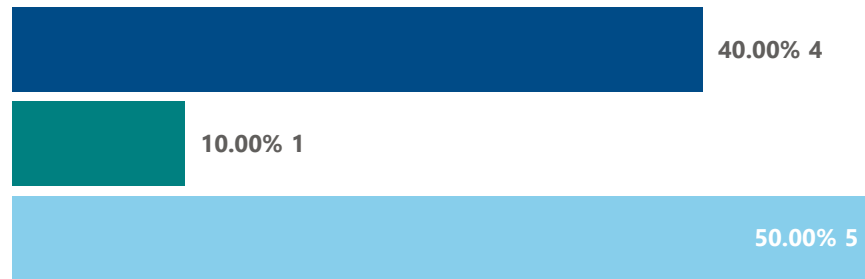
Min: 85%

## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

Min: 70% (Permanent)

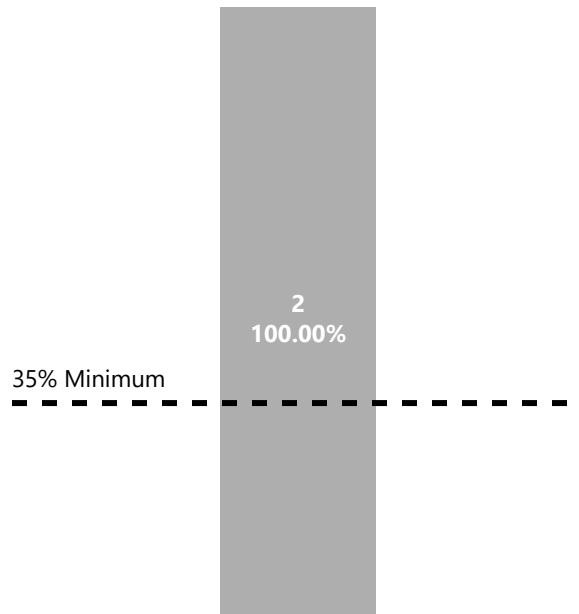
- Currently Enrolled
- Permanent
- Temporary



## Employment and Income Growth

(SPM Metric 4.6)

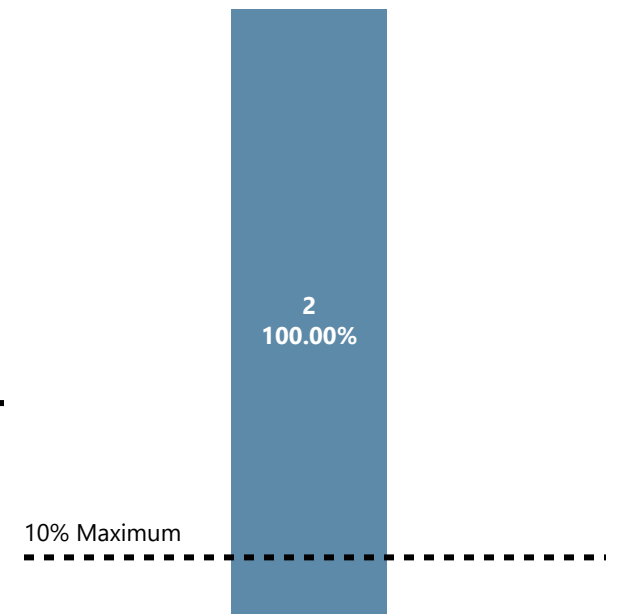
● No Increase



## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return





# Quarter 3 - Transitional Housing Transitions - Miryam's House

Number of Households Served

Projected Households Served: 4

11

Average Length of Time Homeless (Days)

(SPM Metric 1a.2)

194

Max: 160 Days

Average Utilization Rate

(Bed)

84%

Min: 85%

Average Utilization Rate

(Unit)

84%

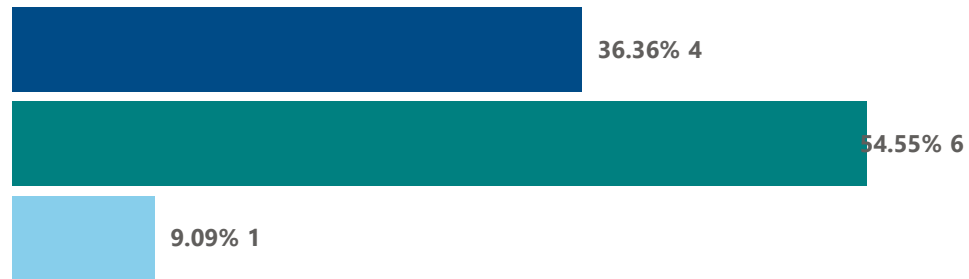
Min: 85%

## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

Min: 70% (Permanent)

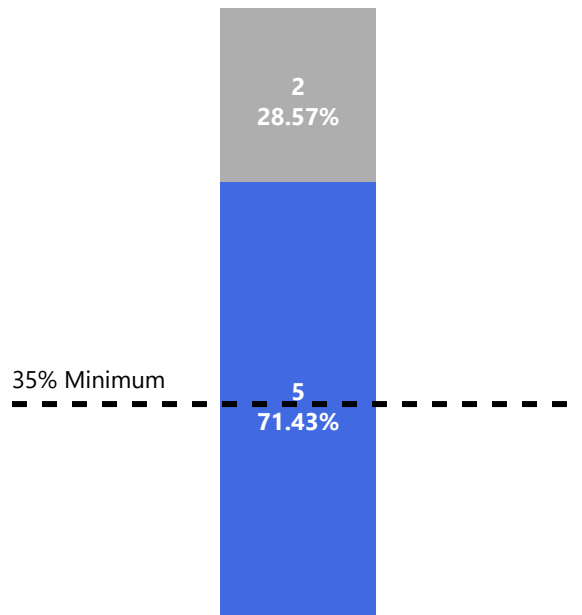
- Currently Enrolled
- Permanent
- Temporary



## Employment and Income Growth

(SPM Metric 4.6)

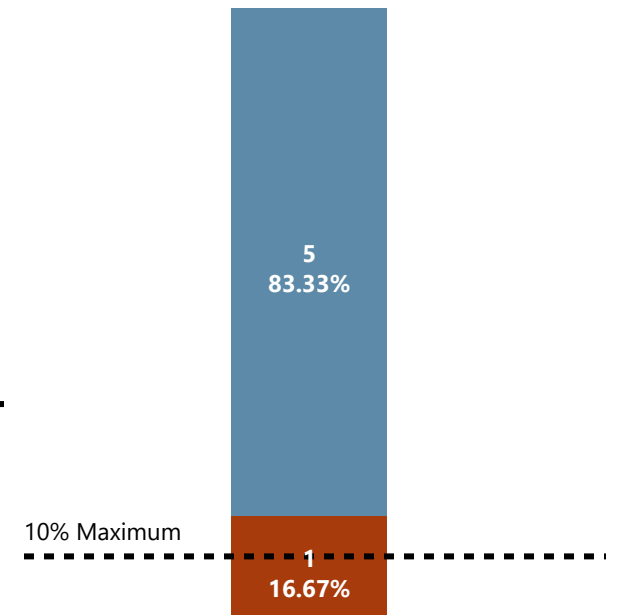
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return
- Returned





# Quarter 3 - Transitional Housing Transitions - Transitional Living Center (TLC)

Number of Households Served

Projected Households Served: 6

9

Average Length of Time Homeless (Days)

(SPM Metric 1a.2)

314

Max: 160 Days

Average Utilization Rate

(Bed)

110%

Min: 85%

Average Utilization Rate

(Unit)

84%

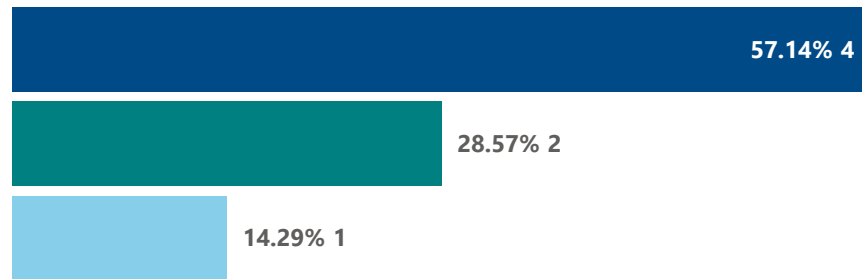
Min: 85%

## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

Min: 70% (Permanent)

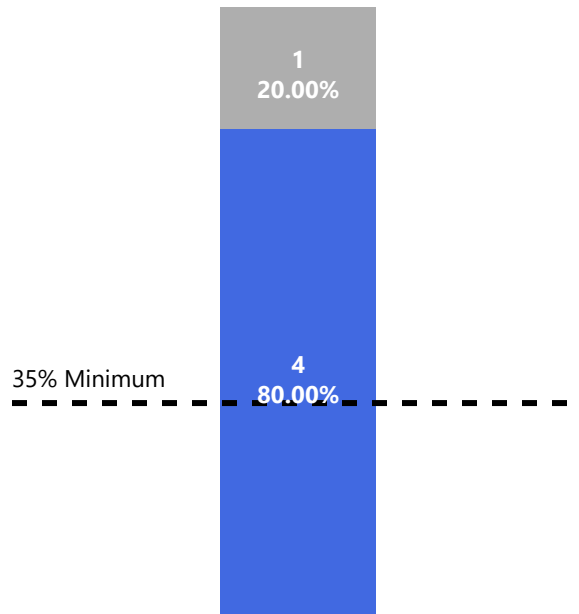
- Currently Enrolled
- Permanent
- Temporary



## Employment and Income Growth

(SPM Metric 4.6)

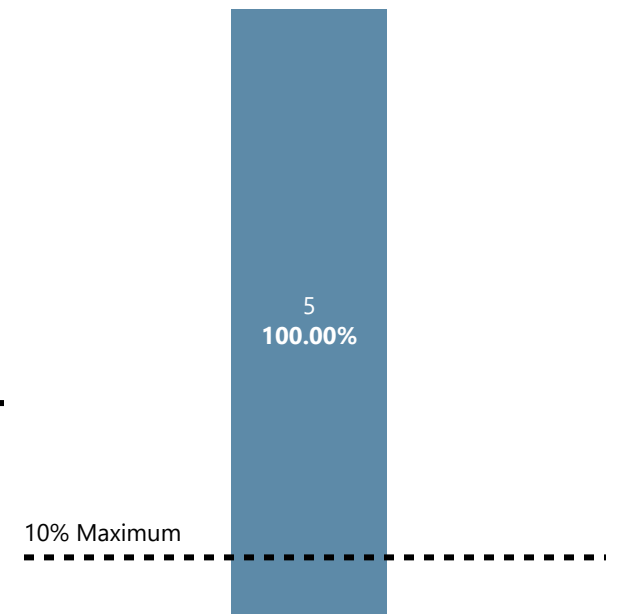
- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

- Did Not Return





# Quarter 3 - Rapid Rehousing

Rapid Rehousing (RRH): Short to medium term rental assistance paired with case management. Households compete for housing in the open market as any other potential tenant.  
Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Families Rapid Rehousing  
**HMIS Name:** CC--RRH--Families--HHOS

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** Families Rapid Rehousing (ESG)  
**HMIS Name:** CC--RRH--Families--HHOS-ESG

**Grants:**

- HUD: Emergency Solutions Grant (ESG) - Rapid Rehousing (RRH)



**Public Name:** Singles Rapid Rehousing  
**HMIS Name:** SNAP--RRH--Singles--HHOS

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** HEN Foundational Community Support (FCS) Bridge  
**HMIS Name:** GI--RRH--HEN FCS Bridge

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Housing and Essential Needs (HEN)
- WA Dept. Commerce: System Demonstrations Grant (SDG) - Housing and Essential Needs (HEN) Foundational Community Support (FCS)



# Quarter 3 - Rapid Rehousing

Rapid Rehousing (RRH): Short to medium term rental assistance paired with case management. Households compete for housing in the open market as any other potential tenant.  
Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Housing and Essential Needs  
**HMIS Name:** GI--RRH--HEN

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Housing and Essential Needs (HEN)



# Spend Down - Rapid Re-Housing

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

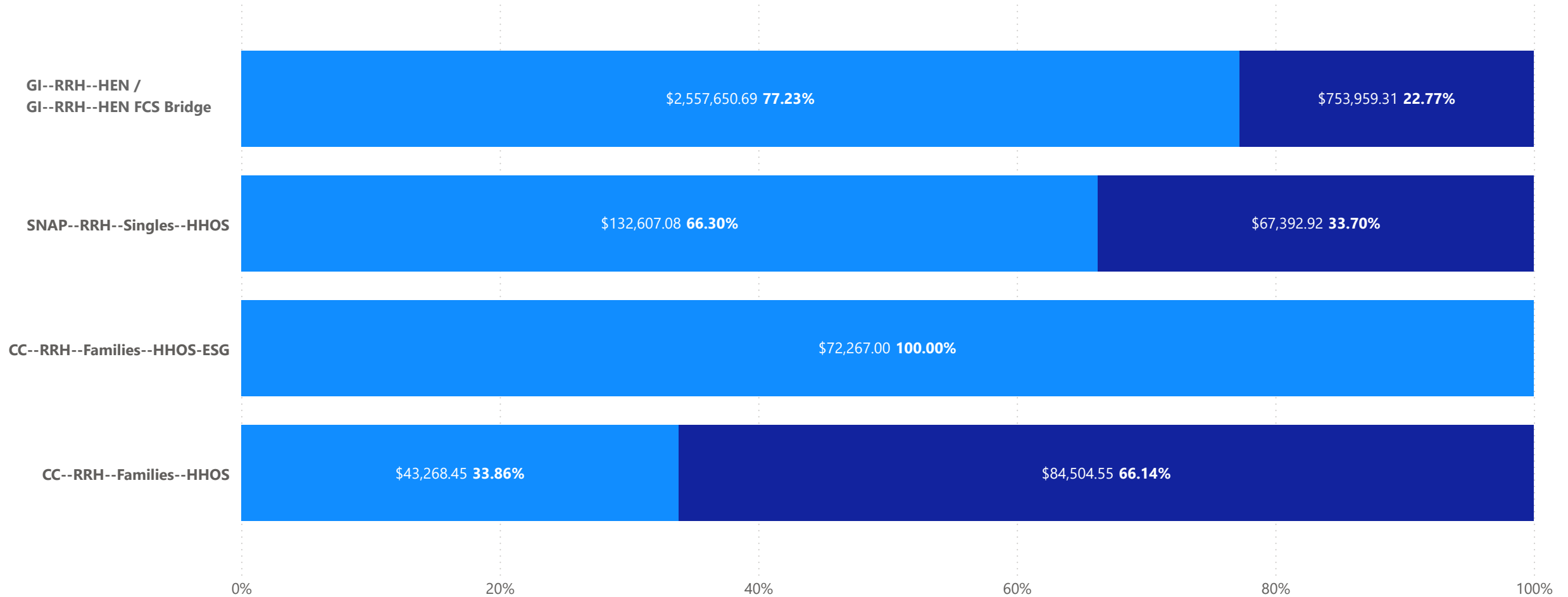
March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining





# Quarter 3 - Rapid Rehousing Performance Overview

Number of Households Served

# 249

Households Served Moved into Housing  
(Currently Housed - May be Receiving Subsidy)

# 195

Rapid Placement into Permanent Housing  
(Custom Metric - Days)

# 111

Max: 60 Days

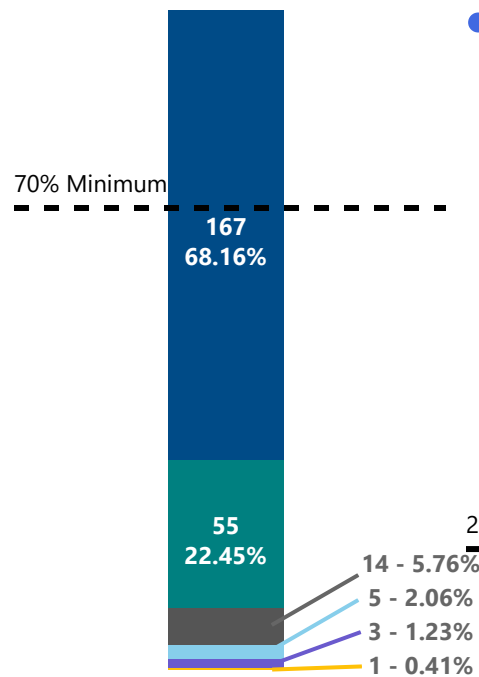
## Households Served Moved into Housing (Currently Housed - May Be Receiving Subsidy)

● Moved-In ● Not Moved-In



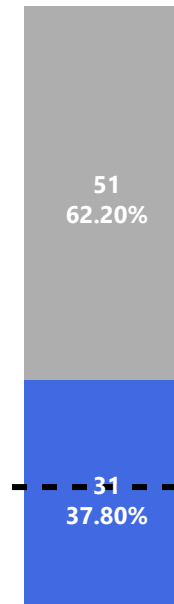
## Exits to Permanent Housing (SPM Metric 7b.1 - All Clients)

● Currently ...  
 ● Institutional  
 ● Permanent  
 ● Sheltered  
 ● Temporary  
 ● Unshelter...



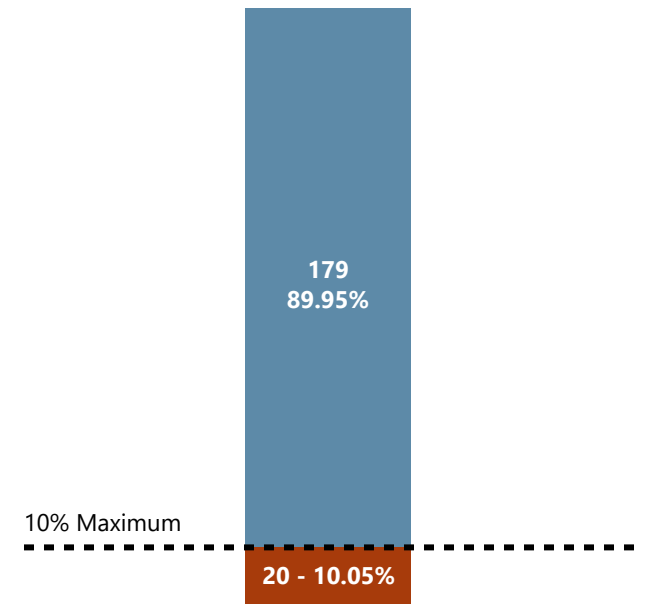
## Employment and Income Growth (SPM Metric 4.6)

● Increase ● No Increase



## Returns to Homelessness (SPM Metric 2b)

● Did Not Return ● Returned





# Quarter 3 - Rapid Rehousing Catholic Charities - Families Rapid Rehousing

Number of Households Served

Projected Households Served: 25

# 13

Households Served Moved into Housing

(Currently Housed - May be Receiving Subsidy)

# 7

Rapid Placement into Permanent Housing

(Custom Metric - Days)

# 16

Max: 60 Days

## Households Served Moved into Housing

(Currently Housed - May Be Receiving Subsidy)

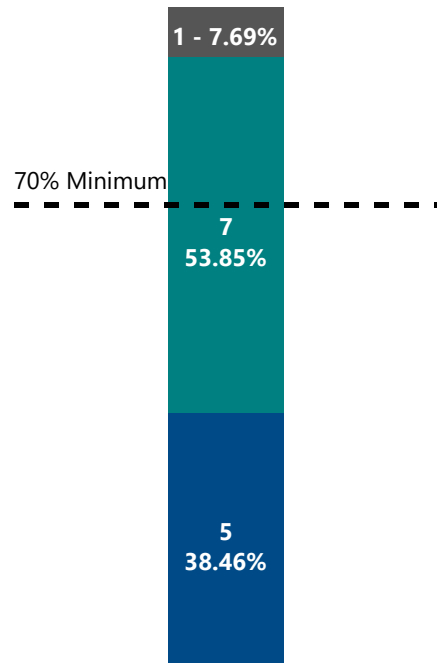
● Moved-In ● Not Moved-In



## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

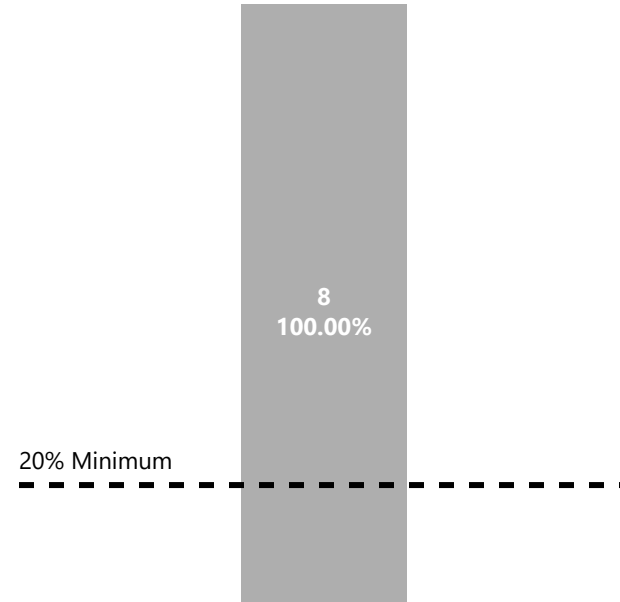
● Currently ...  
● Permanent  
● Unshelter...



## Employment and Income Growth

(SPM Metric 4.6)

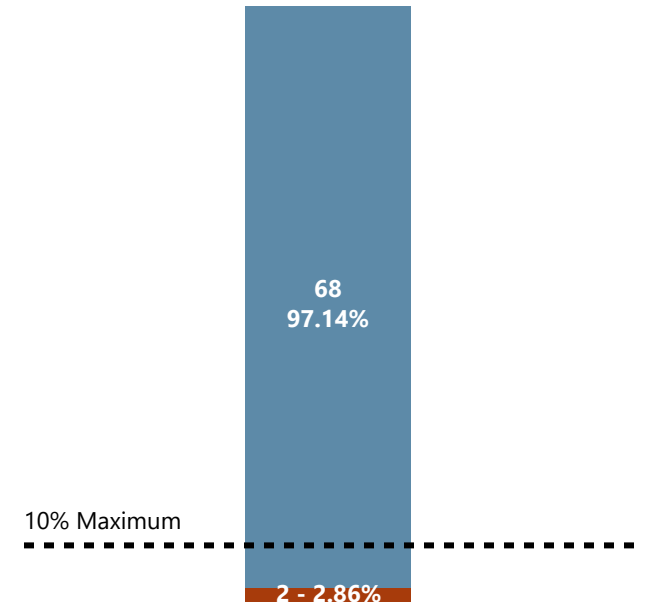
● No Increase



## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned





# Quarter 3 - Rapid Rehousing Catholic Charities - Families Rapid Rehousing (ESG)

Number of Households Served

Projected Households Served: 14

12

Households Served Moved into Housing

(Currently Housed - May be Receiving Subsidy)

11

Rapid Placement into Permanent Housing

(Custom Metric - Days)

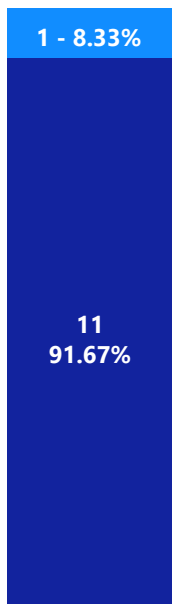
10

Max: 60 Days

## Households Served Moved into Housing

(Currently Housed - May Be Receiving Subsidy)

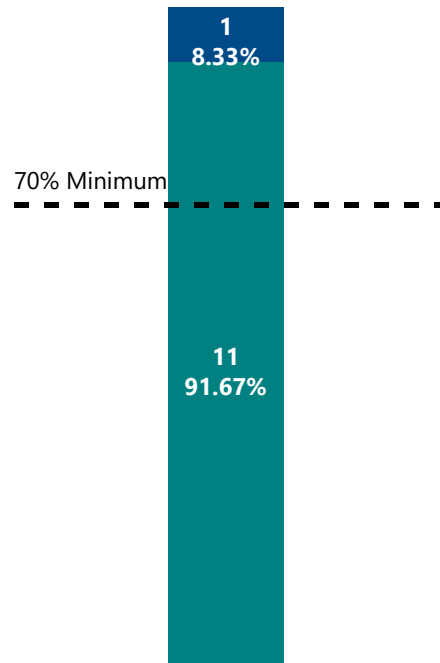
● Moved-In ● Not Moved-In



## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

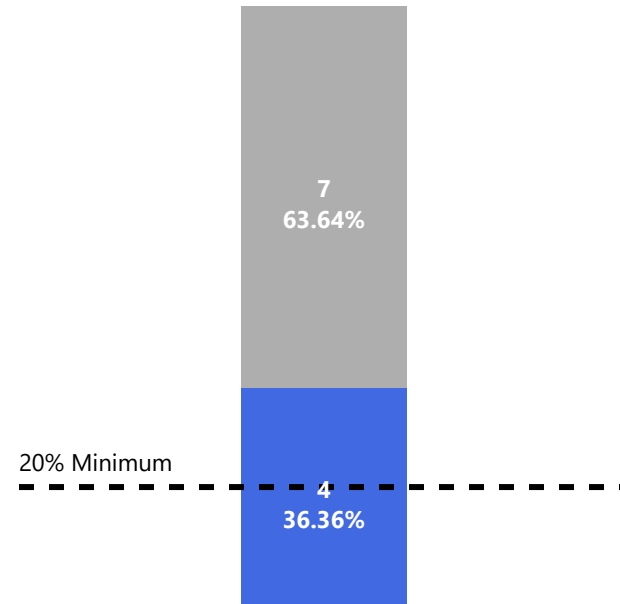
● Currently ... ● Permanent



## Employment and Income Growth

(SPM Metric 4.6)

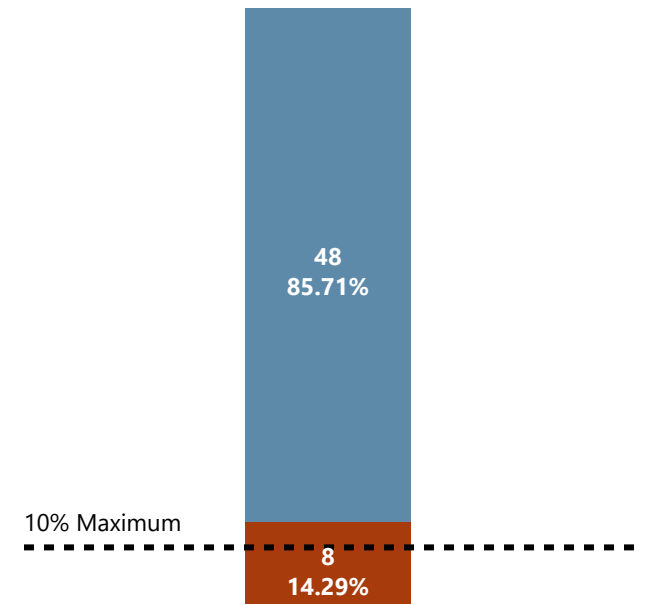
● Increase ● No Increase



## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned





# Quarter 3 - Rapid Rehousing SNAP - Singles Rapid Rehousing

Number of Individuals Served

Projected Individuals Served: 33

# 39

Households Served Moved into Housing

(Currently Housed - May be Receiving Subsidy)

# 22

Rapid Placement into Permanent Housing

(Custom Metric - Days)

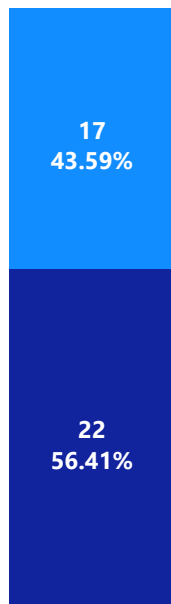
# 14

Max: 60 Days

## Households Served Moved into Housing

(Currently Housed - May Be Receiving Subsidy)

● Moved-In ● Not Moved-In

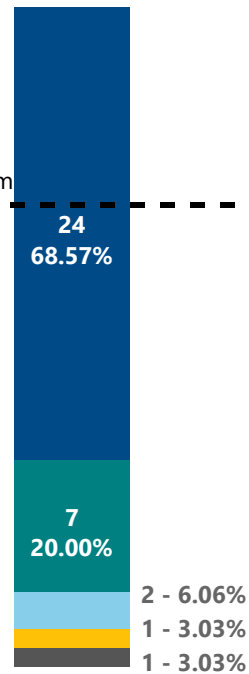


## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently ...  
 ● Permanent  
 ● Sheltered  
 ● Temporary  
 ● Unshelter...

70% Minimum

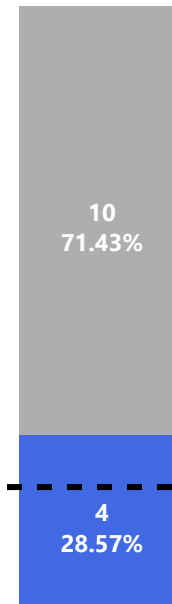


## Employment and Income Growth

(SPM Metric 4.6)

● Increase ● No Increase

20% Minimum

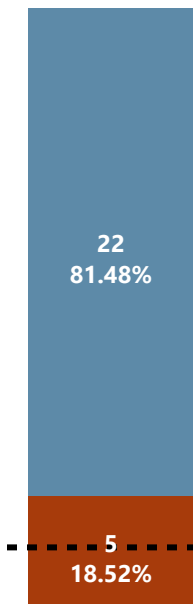


## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned

10% Maximum





# Quarter 3 - Rapid Rehousing Goodwill - HEN Foundational Community Support (FCS) Bridge

Number of Individuals Served  
Projected Households Served: 787

Households Served Moved into Housing  
(Currently Housed - May be Receiving Subsidy)

Rapid Placement into Permanent Housing  
(Custom Metric - Days)

1

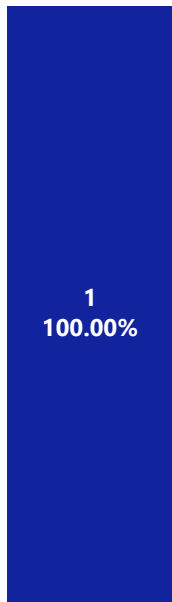
1

183

Max: 60 Days

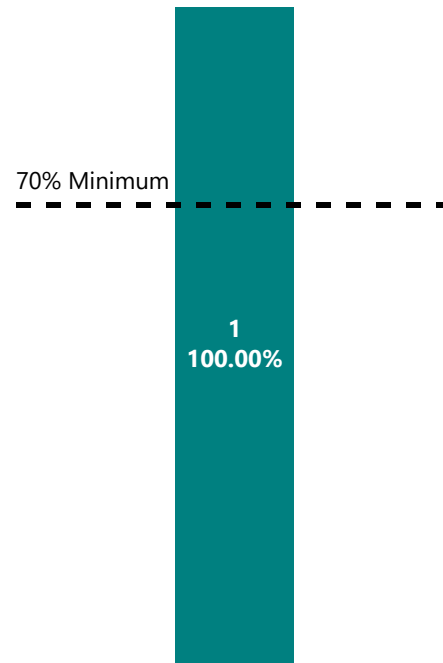
### Households Served Moved into Housing (Currently Housed - May Be Receiving Subsidy)

● Moved-In



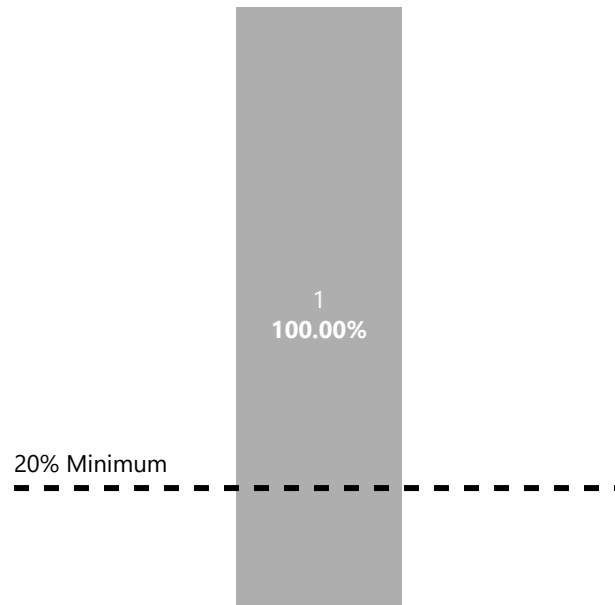
### Exits to Permanent Housing (SPM Metric 7b.1 - All Clients)

● Permanent



### Employment and Income Growth (SPM Metric 4.6)

● No Increase



### Returns to Homelessness (SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

10% Maximum



# Quarter 3 - Rapid Rehousing Goodwill - Housing and Essential Needs (HEN)

Number of Individuals Served

Projected Households Served: 787

# 184

Households Served Moved into Housing

(Currently Housed - May be Receiving Subsidy)

# 154

Rapid Placement into Permanent Housing

(Custom Metric - Days)

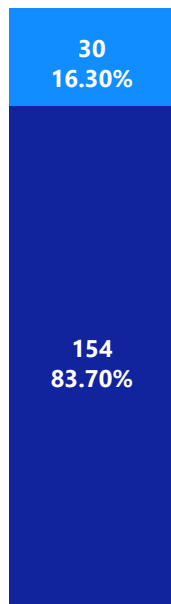
# 164

Max: 60 Days

## Households Served Moved into Housing

(Currently Housed - May Be Receiving Subsidy)

● Moved-In ● Not Moved-In

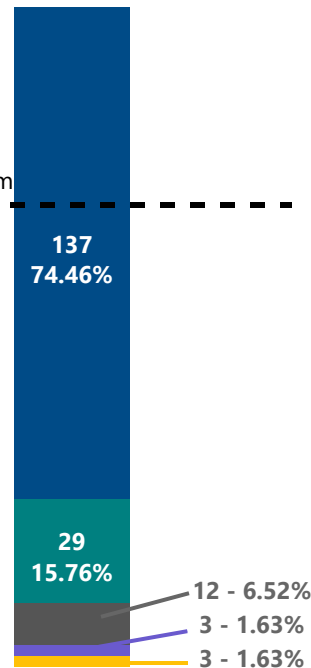


## Exits to Permanent Housing

(SPM Metric 7b.1 - All Clients)

● Currently ...  
 ● Institutional  
 ● Permanent  
 ● Temporary  
 ● Unshelter...

70% Minimum



## Employment and Income Growth

(SPM Metric 4.6)

● Increase ● No Increase

20% Minimum

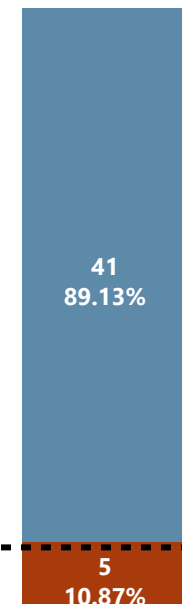


## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned

10% Maximum





# Quarter 3 - Permanent Supportive Housing

Permanent Supportive Housing (PSH): Permanent subsidy paired with case management. Most PSH units offer a Housing Choice Voucher after one-year of successful tenancy. Units are pre-identified.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Home Yard Cottages  
**HMIS Name:** TPW--PSH--Home Yard Cottages  
**Inventory:** 50 Beds / 14 Units (Households with at least one adult and one child), 7 Beds / 7 Units (Households without children)

**Grants:**  
◦ WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** PSH - Scattered Sites  
**HMIS Name:**  
▪ VOA--PSH--The Marilee Apts  
▪ VOA--PSH--WA0130  
▪ VOA--PSH--Hope House East (Consolidated Into WA0130)  
▪ VOA--PSH--Hope House West (Consolidated Into WA0130)  
▪ VOA--PSH--WA0111 (Consolidated Into WA0130)  
▪ VOA--PSH--WA0457 (Consolidated Into WA0130)  
▪ VOA--PSH--WA0511 (Consolidated Into WA0130)  
**Inventory:** 156 Beds / 156 Units (Households without children)

**Grants:**  
◦ WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)  
◦ HUD: Continuum of Care (CoC) - Permanent Supportive Housing (PSH)  
◦ WA Dept. Commerce: Permanent Supportive Housing (PSH) - Operating, Maintenance, and Services (OMS)



**Public Name:** PHS Units  
**HMIS Name:** REV--PHS--Units--ROW  
**Inventory:** 22 Beds / 22 Units (Households without children)

**Grants:**  
◦ WA Dept. Commerce: Right of Way (ROW)



# Quarter 3 - Permanent Supportive Housing

Permanent Supportive Housing (PSH): Permanent subsidy paired with case management. Most PSH units offer a Housing Choice Voucher after one-year of successful tenancy. Units are pre-identified.

Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Integrated Case Management (ICM)  
**HMIS Name:** CC--PSH--HHOS  
**Inventory:** 50 Beds / 50 Units (Households without children)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard
- WA Dept. Commerce: Permanent Supportive Housing (PSH) - Operations, Maintenance, and Services (OMS)



**Public Name:** ICM for Chronically Homeless Families  
**HMIS Name:**  

- CC--PSH--CHF--HHOS
- CC--PSH--PSH for Families CHG (Consolidated into CHF--HHOS)
- CC--PSH--PSH for Families County CHG (Consolidated into CHF--HHOS)

**Inventory:** 30 Beds / 10 Units (Households with at least one adult and one child)

**Grants:**

- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Permanent Supportive Housing for Chronically Homeless Families (CHF)
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Standard



# Spend Down - Permanent Supportive Housing

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

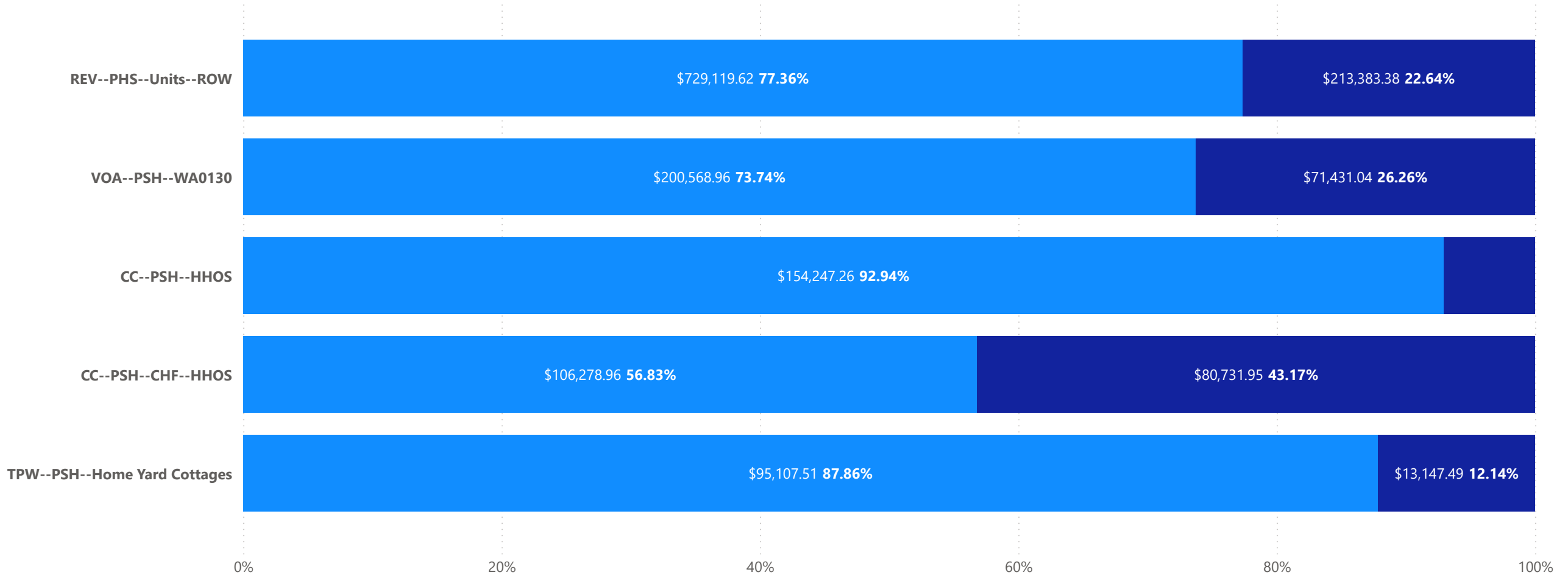
March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining





# Quarter 3 - Permanent Supportive Housing Performance Overview

Number of Households Served

# 257

Average Rate of Utilization  
(Bed)

# 83%

Min: 85%

Average Rate of Utilization  
(Unit)

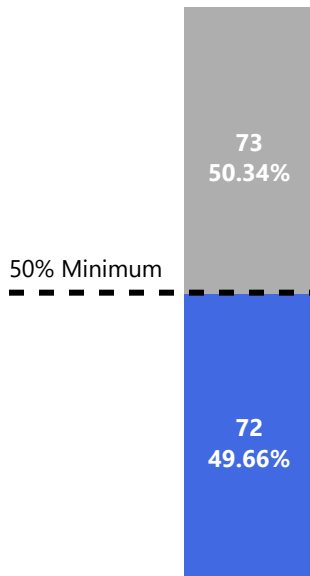
# 79%

Min: 85%

## Employment and Income Growth for Stayers

(SPM Metric 4.3)

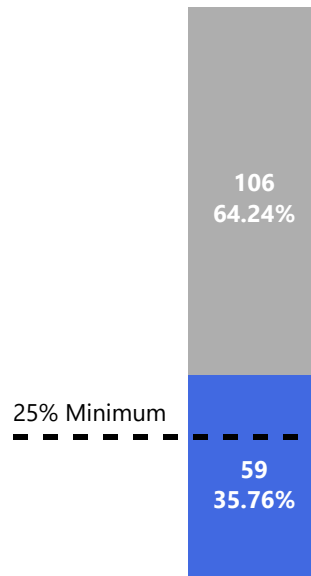
● Increase ● No Increase



## Annual Income and/or Non-Cash Benefits Growth

(Local Measure)

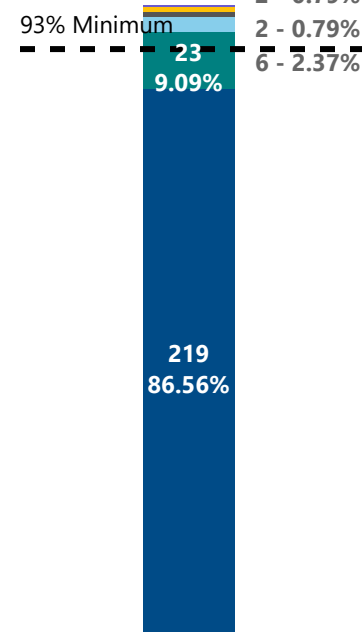
● Increase ● No Increase



## Exits to or Retention of Permanent Housing

(SPM Metric 7b.2)

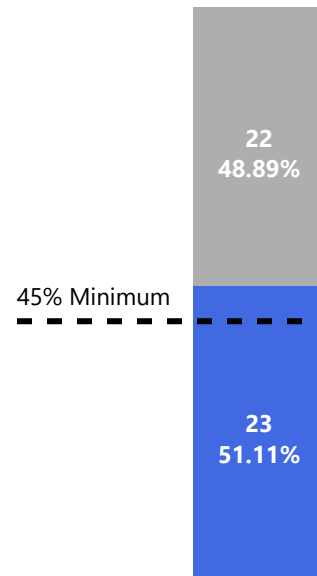
- Institut...
- Perma...
- Retenti...
- Shelter...
- Tempo...
- Unshel...



## Employment and Income Growth for Leavers

(SPM Metric 4.6)

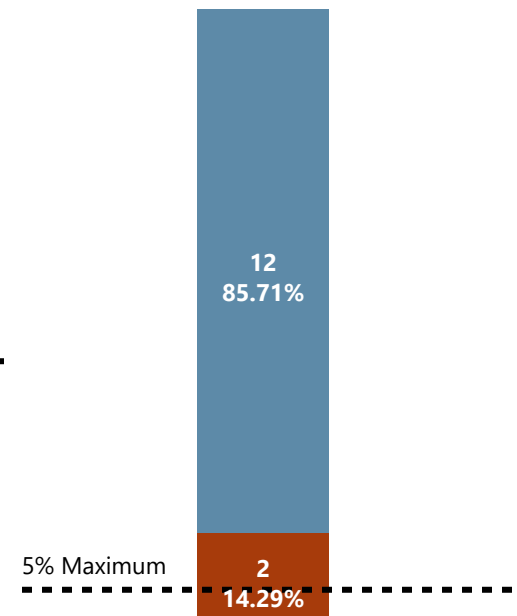
● Increase ● No Increase



## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned





# Quarter 3 - Permanent Supportive Housing Transitions - Home Yard Cottages

Number of Households Served

Projected Households Served: 24

# 24

Average Rate of Utilization

(Bed)

# 86%

Min: 85%

Average Rate of Utilization

(Unit)

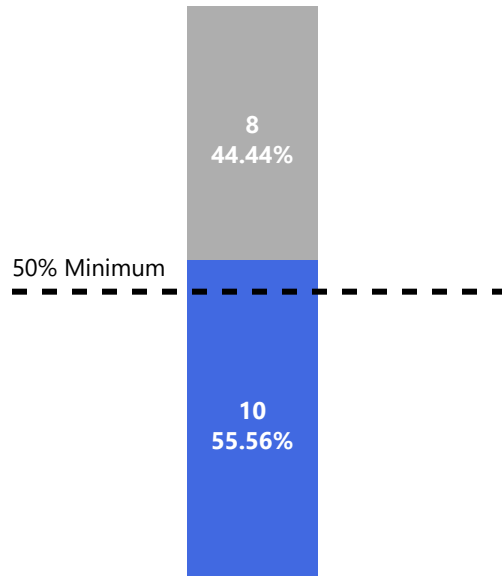
# 100%

Min: 85%

## Employment and Income Growth for Stayers

(SPM Metric 4.3)

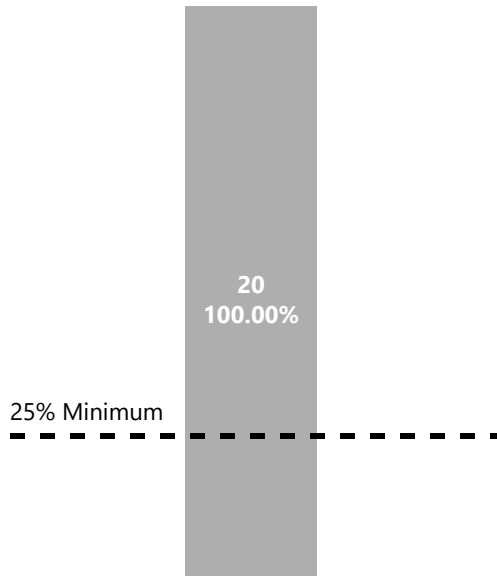
● Increase ● No Increase



## Annual Income Growth and/or Non-Cash Benefits

(Local Measure)

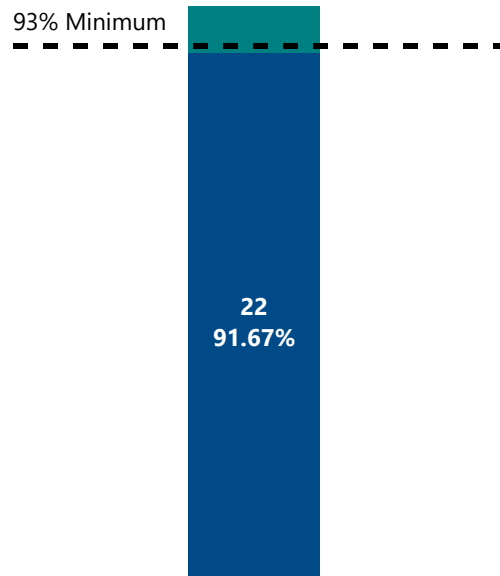
● No Increase



## Exits to or Retention of Permanent Housing

(SPM Metric 7b.2)

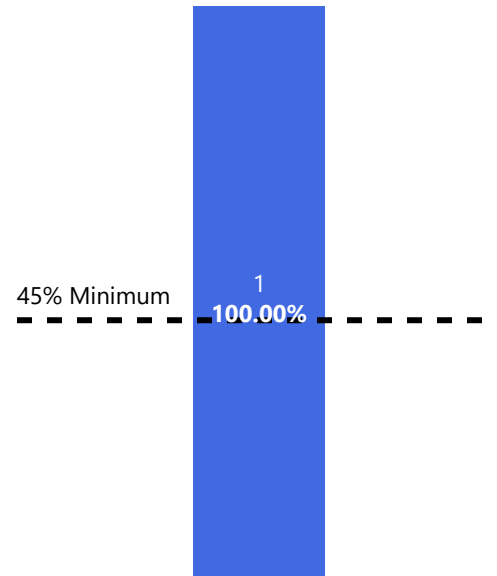
● Permanent ● Retention



## Employment and Income Growth for Leavers

(SPM Metric 4.6)

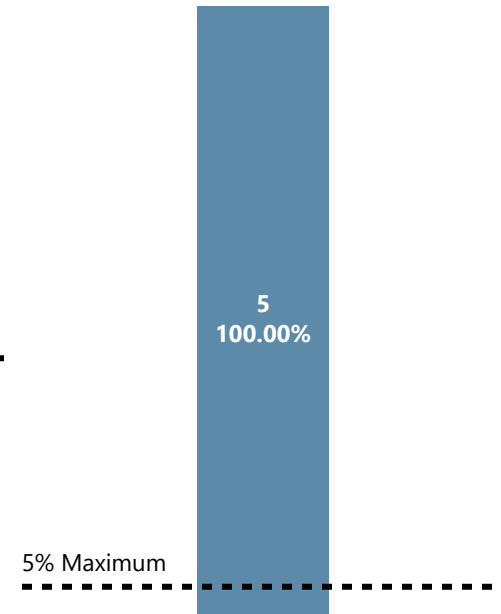
● Increase



## Returns to Homelessness

(SPM Metric 2b)

● Did Not Return





# Quarter 3 - Permanent Supportive Housing Volunteers of America - PSH Scattered Sites WA0130

Number of Households Served

Projected Households Served: 208

# 159

Average Rate of Utilization

(Bed)

# 70%

Min: 85%

Average Rate of Utilization

(Unit)

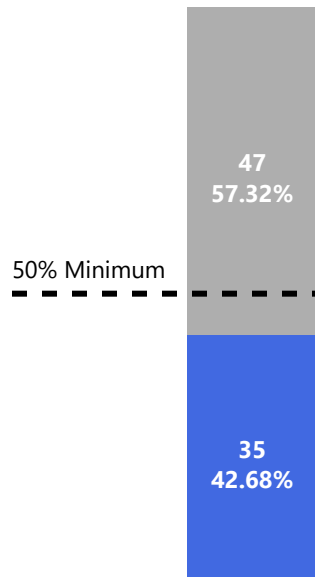
# 69%

Min: 85%

### Employment and Income Growth for Stayers

(SPM Metric 4.3)

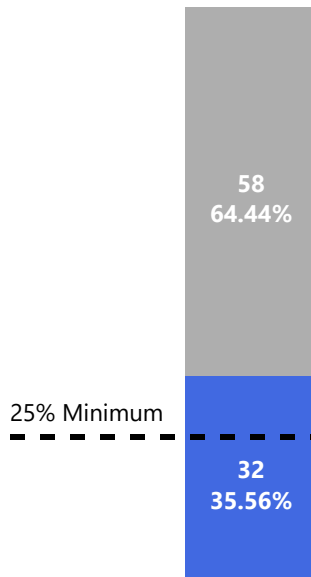
● Increase ● No Increase



### Annual Income Growth and/or Non-Cash Benefits

(Local Measure)

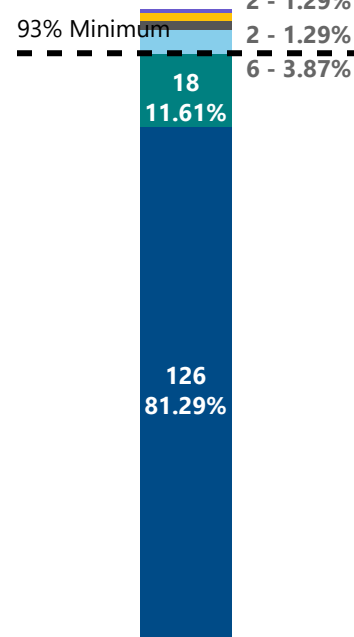
● Increase ● No Increase



### Exits to or Retention of Permanent Housing

(SPM Metric 7b.2)

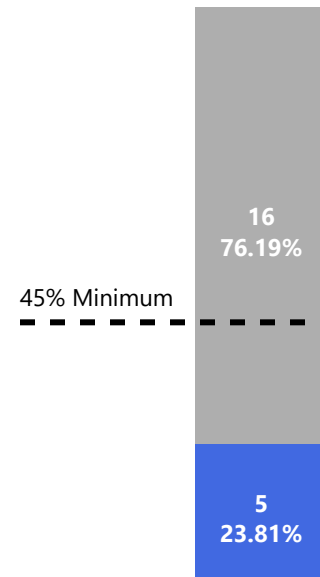
- Institut...
- Perma...
- Retenti...
- Shelter...
- Tempo...
- Unshel...



### Employment and Income Growth for Leavers

(SPM Metric 4.6)

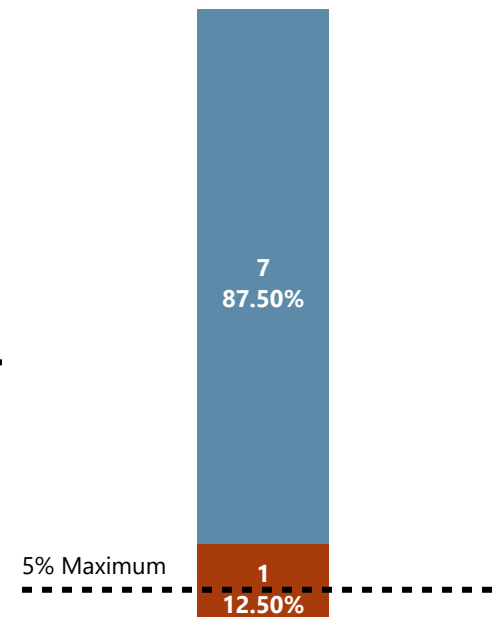
● Increase ● No Increase



### Returns to Homelessness

(SPM Metric 2b)

● Did Not Return ● Returned





# Quarter 3 - Permanent Supportive Housing Revive Counseling - PHS Units

Number of Households Served

14

Average Rate of Utilization  
(Bed)

62%

Min: 85%

Average Rate of Utilization  
(Unit)

51%

Min: 85%

**Employment and Income Growth for Stayers**  
(SPM Metric 4.3)

*During the reporting period, no clients who stayed demonstrate growth in income. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

**Annual Income Growth and/or Non-Cash Benefits**  
(Local Measure)

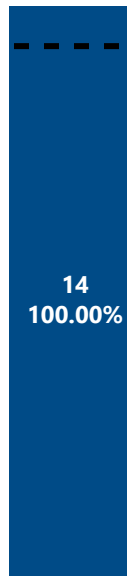
*During the reporting period, no clients who have an annual assessment demonstrate growth in income between each annual assessment. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

**Exits to or Retention of Permanent Housing**  
(SPM Metric 7b.2)

● Retention

93% Minimum



**Employment and Income Growth for Leavers**  
(SPM Metric 4.6)

*During the reporting period, no clients who exited demonstrate growth in income at exit. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

**Returns to Homelessness**  
(SPM Metric 2b)

*No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.*

-- HMIS Team

50% Minimum

25% Minimum

45% Minimum

5% Maximum



# Quarter 3 - Permanent Supportive Housing Catholic Charities - Integrated Case Management (ICM)

Number of Households Served

Projected Households Served: 52

# 52

Average Rate of Utilization

(Bed)

# 111%

Min: 85%

Average Rate of Utilization

(Unit)

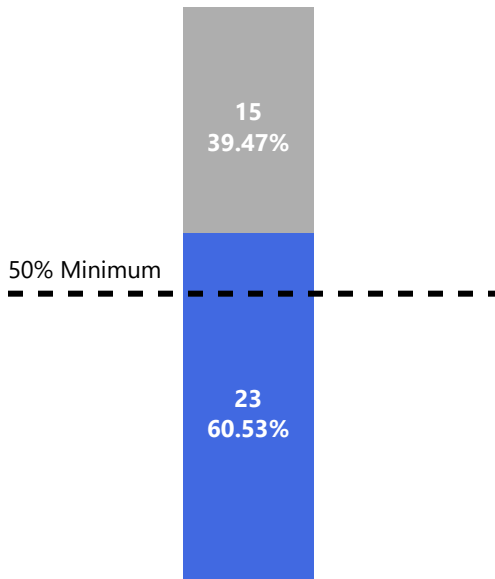
# 96%

Min: 85%

## Employment and Income Growth for Stayers

(SPM Metric 4.3)

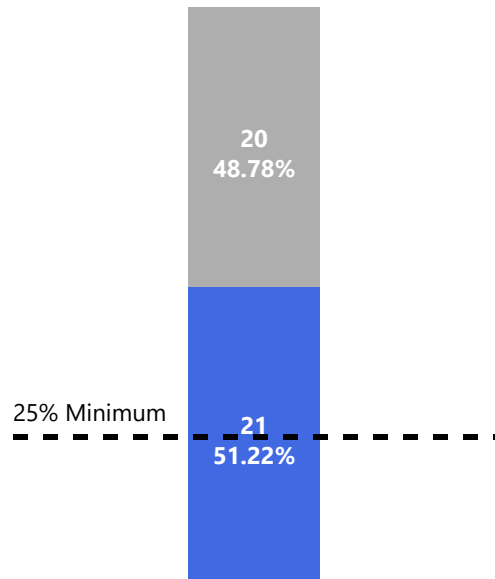
● Increase ● No Increase



## Annual Income Growth and/or Non-Cash Benefits

(Local Measure)

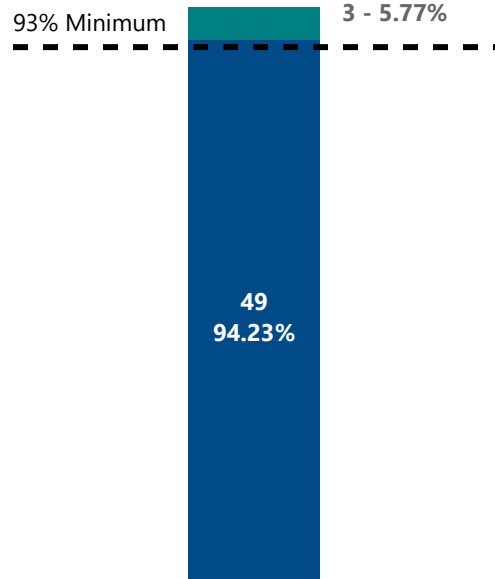
● Increase ● No Increase



## Exits to or Retention of Permanent Housing

(SPM Metric 7b.2)

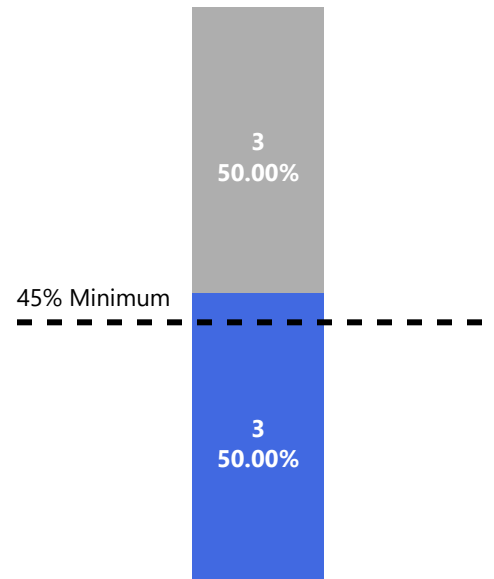
● Permanent ● Retention



## Employment and Income Growth for Leavers

(SPM Metric 4.6)

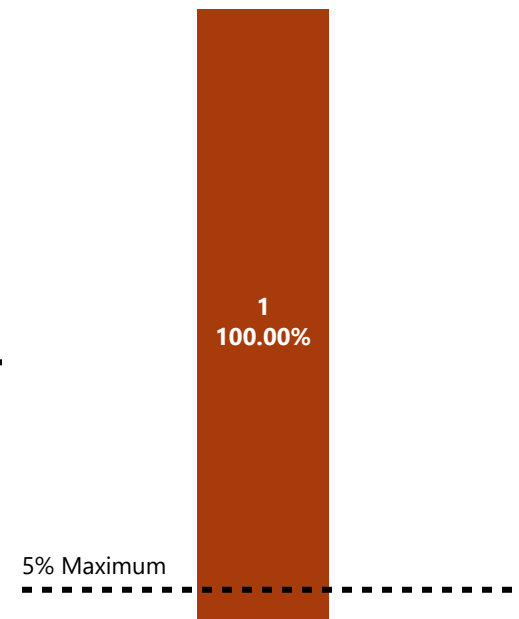
● Increase ● No Increase



## Returns to Homelessness

(SPM Metric 2b)

● Returned





# Quarter 3 - Permanent Supportive Housing Integrated Case Management for Chronically Homeless Families (CHF)

Number of Households Served

Projected Households Served: 10

8

Average Rate of Utilization

(Bed)

88%

Min: 85%

Average Rate of Utilization

(Unit)

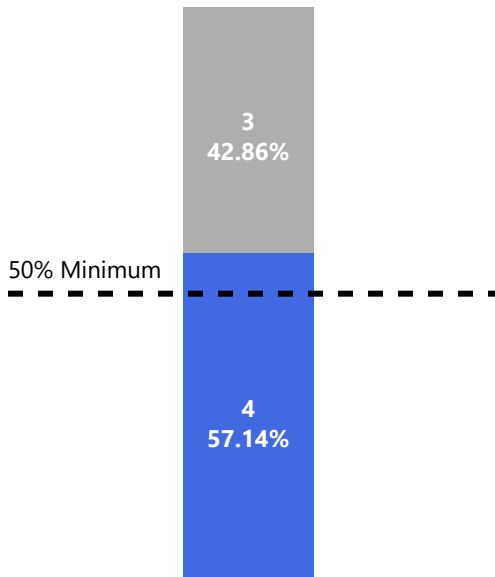
79%

Min: 85%

### Employment and Income Growth for Stayers

(SPM Metric 4.3)

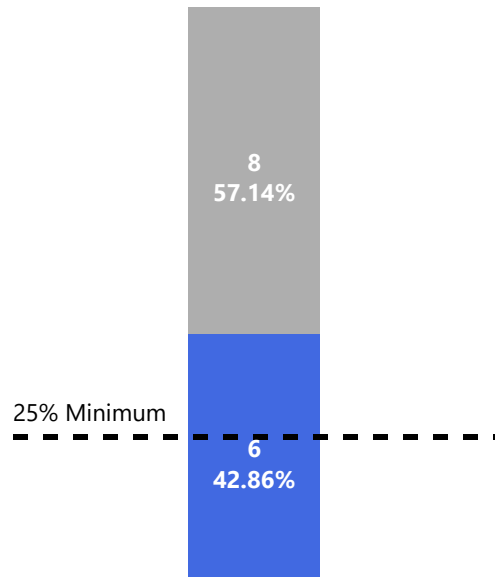
● Increase ● No Increase



### Annual Income Growth and/or Non-Cash Benefits

(Local Measure)

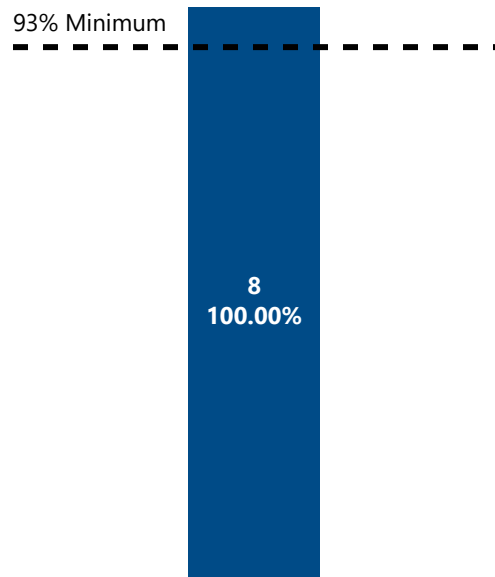
● Increase ● No Increase



### Exits to or Retention of Permanent Housing

(SPM Metric 7b.2)

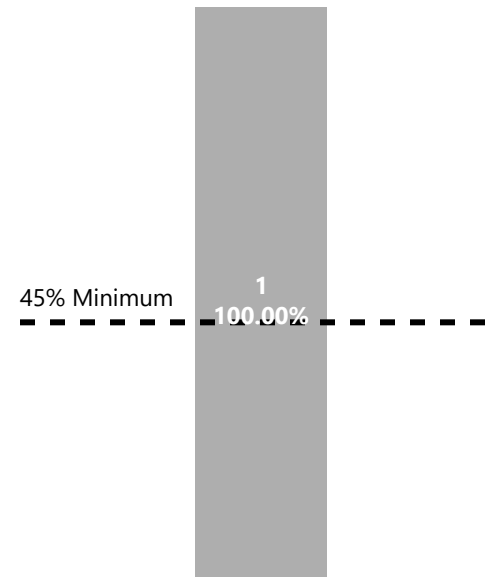
● Retention



### Employment and Income Growth for Leavers

(SPM Metric 4.6)

● No Increase



### Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

5% Maximum



# Quarter 3 - Supportive Services Only

Supportive Services Only (SSO): Providing stand-alone supportive services to specific populations.  
Reporting Period: 07/1/2025 - 03/31/2026



**Public Name:** Children and Family Supportive Services  
**HMIS Name:** FPS--SSO--Children and Family Supportive Services

**Grants:**

- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



**Public Name:** Transitions - Women's Hearth  
**HMIS Name:**

- TPW--SSO--Womens Hearth
- TPW--SO--Womens Hearth

**Grants:**

- WA Dept. Commerce: System Demonstrations Grant (SDG) - Standard
- WA Dept. Commerce: Consolidated Homeless Grant (CHG) - Emergency Housing (EH)
- WA Dept. Commerce: Homeless Housing Assistance Act (HHAA)



# Spend Down - Supportive Services Only

Q1

Q2

Q3

Q4

July

August

September

October

November

December

January

February

March

April

May

June

● Sum of Total Spent ● Sum of Total Remaining

TPW--SSO--Womens Hearth

\$54,972.41 84.20%

\$10,311.84 15.80%

FPS--SSO--Children and Family Supportive Services

\$49,523.48 97.10%

CCS--SSO--Hot Spotters

\$47,547.98 17.98%

\$216,835.17 82.02%

0%

20%

40%

60%

80%

100%



# Quarter 3 - Supportive Services Only Performance Overview

Number of Households Served

624

Average time from Date of Engagement to Successful Exit

2

Max: 60 Days

Clients with a Date of Engagement

130

Serving those with Long Length of Homelessness

● No ● Yes

253 61.16%

159 38.84%

64% Minimum

## Exits

(All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Temporary
- Unsheltered



## Exits

(Only W/ Date of Engagement)

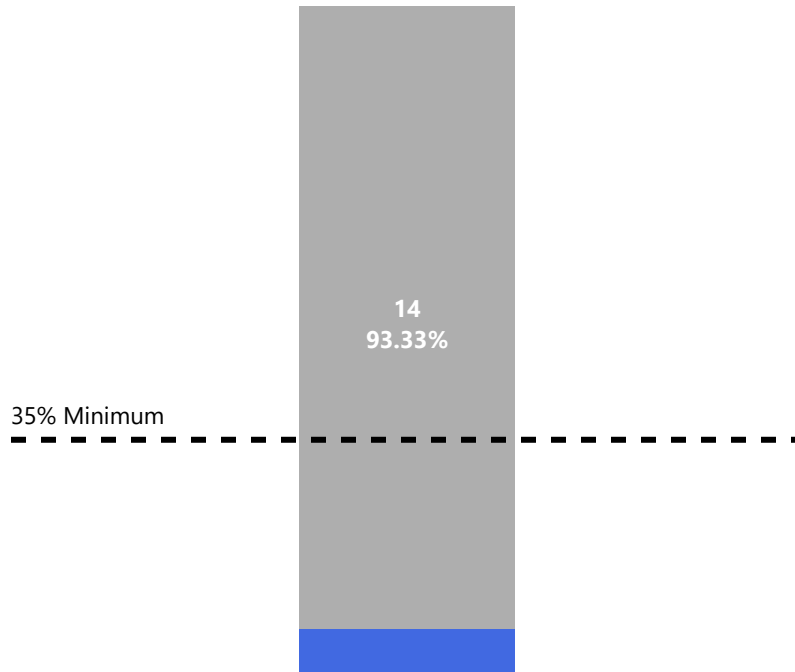
- Currently Enrolled
- Institutional
- Permanent
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6 - Only W/ Date of Engagement)

- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team



# Quarter 3 - Supportive Services Only Family Promise of Spokane - Children and Family Supportive Services

Number of Households Served

Projected Households Served: 30

48

Average time from Date of Engagement to Successful Exit

3

Max: 60 Days

Clients with a Date of Engagement

8

Serving those with Long Length of Homelessness

No Yes

3 15.25%

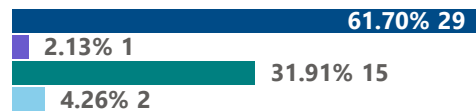
7 84.75%

64% Minimum

## Exits

(All Clients)

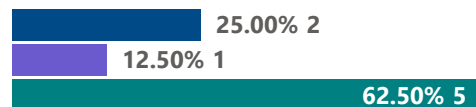
- Currently Enrolled
- Institutional
- Permanent
- Temporary



## Exits

(Only W/ Date of Engagement)

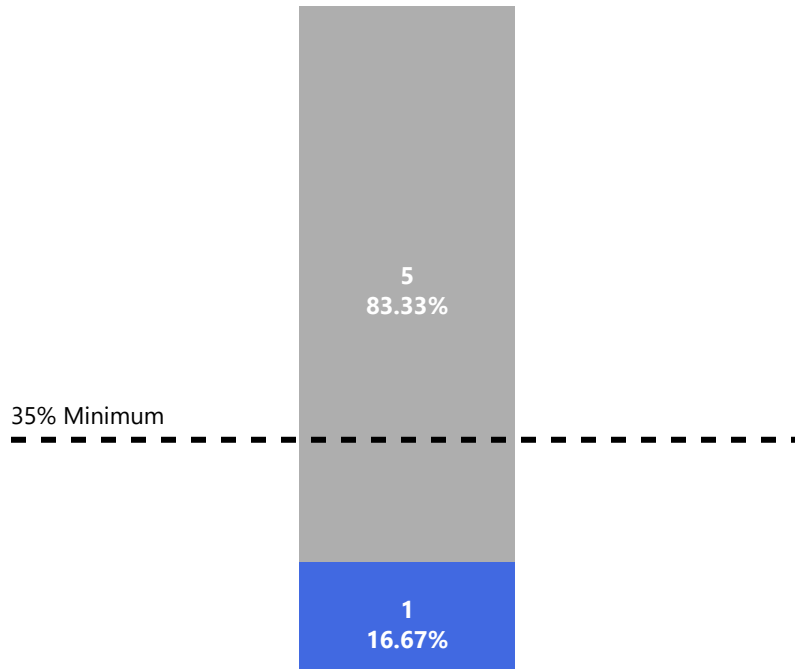
- Currently Enrolled
- Institutional
- Permanent



## Employment and Income Growth

(SPM Metric 4.6 - Only W/ Date of Engagement)

- Increase
- No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team



# Quarter 3 - Supportive Services Only Transitions - Women's Hearth

Number of Individuals Served

Projected Individuals Served: 473

# 419

Average time from Date of Engagement to Successful Exit

# 0

Max: 90 Days

Clients with a Date of Engagement

# 93

Serving those with Long Length of Homelessness

● No ● Yes



## Exits

(All Clients)

- Currently Enrolled
- Permanent
- Temporary
- Unsheltered



## Exits

(Only W/ Date of Engagement)

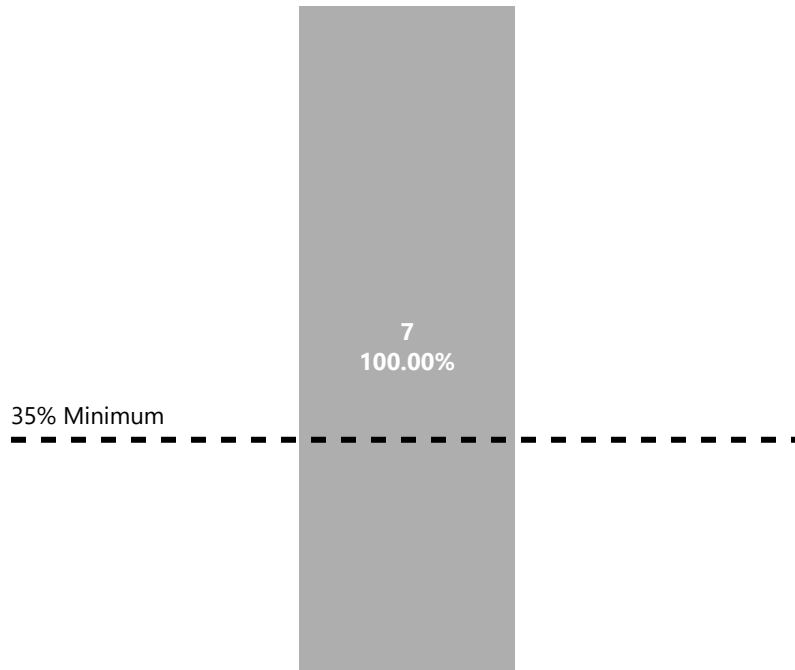
- Currently Enrolled
- Temporary
- Unsheltered



## Employment and Income Growth

(SPM Metric 4.6 - Only W/ Date of Engagement)

- No Increase



## Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team

20% Maximum



# Quarter 3 - Supportive Services Only Consistent Cares - Hot Spotters

### Number of Individuals Served

Projected Individuals Served: 240

# 165

### Average time from Date of Engagement to Successful Exit

No Client exited successfully from this project that had a Date of Engagement.  
-- HMIS Team

### Clients with a Date of Engagement

# 29

### Serving those with Long Length of Homelessness

● No ● Yes



### Exits

(All Clients)

- Currently Enrolled
- Institutional
- Permanent
- Unsheltered



### Exits

(Only W/ Date of Engagement)

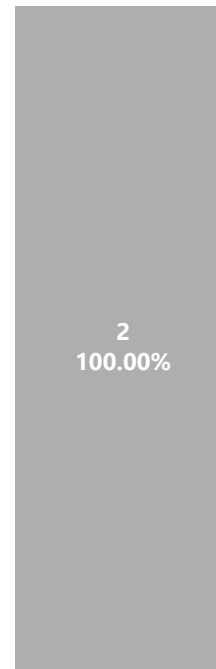
- Currently Enrolled
- Institutional
- Permanent
- Unsheltered



### Employment and Income Growth

(SPM Metric 4.6 - Only W/ Date of Engagement)

- No Increase



### Returns to Homelessness

(SPM Metric 2b)

No clients exited from this project during the reporting period (shifted two years back). As a result, there is no data available for Returns to Homelessness. This is not an error, but a reflection of the project's activity during this timeframe.

-- HMIS Team



# Quarter 3 - Unknown Exits

## All Projects

Unknown Exits refer to situations where a client's destination cannot be determined, including categories such as "Client Doesn't Know," "Client Prefers Not to Answer," "Data Not Collected," or "No Exit Interview Completed." These exit types are not used to evaluate organization's performance.

Program Name	CC--SSO--City Diversion--HHOS		SNAP--SSO--Singles Diversion		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>			6	1.19%	<b>6</b>	<b>1.19%</b>
Institutional	1	0.20%	1	0.20%	<b>2</b>	<b>0.40%</b>
Permanent	312	61.66%	21	4.15%	<b>333</b>	<b>65.81%</b>
Sheltered	3	0.59%	10	1.98%	<b>13</b>	<b>2.57%</b>
Still Enrolled	67	13.24%	19	3.75%	<b>86</b>	<b>17.00%</b>
Temporary	46	9.09%	2	0.40%	<b>48</b>	<b>9.49%</b>
Unsheltered	14	2.77%	4	0.79%	<b>18</b>	<b>3.56%</b>
<b>Total</b>	<b>443</b>	<b>87.55%</b>	<b>63</b>	<b>12.45%</b>	<b>506</b>	<b>100.00%</b>

Program Name	CC--HP--Families--CHG-HP		CMC--HP--Carl Maxey Housing--CHG-HP		GI--HP--HEN		GI--HP--HEN FCS Bridge		NRCC--HP--Esperanza--CHG-HP		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>					1	0.38%					<b>1</b>	<b>0.38%</b>
Currently Enrolled	25	9.58%	152	58.24%	40	15.33%	5	1.92%	4	1.53%	<b>226</b>	<b>86.59%</b>
Permanent					18	6.90%	3	1.15%			<b>21</b>	<b>8.05%</b>
Temporary					3	1.15%	1	0.38%			<b>4</b>	<b>1.53%</b>
Unsheltered					9	3.45%					<b>9</b>	<b>3.45%</b>
<b>Total</b>	<b>25</b>	<b>9.58%</b>	<b>152</b>	<b>58.24%</b>	<b>71</b>	<b>27.20%</b>	<b>9</b>	<b>3.45%</b>	<b>4</b>	<b>1.53%</b>	<b>261</b>	<b>100.00%</b>



# Quarter 3 - Unknown Exits All Projects

Program Name	NRCC--HP--Esperanza--HHOS		SNAP--HP--Singles--CHG-HP		TPW--HP--Singles--CHG-HP		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>			1	2.86%			<b>1</b>	<b>2.86%</b>
Currently Enrolled	12	34.29%	7	20.00%	2	5.71%	<b>21</b>	<b>60.00%</b>
Permanent	12	34.29%	1	2.86%			<b>13</b>	<b>37.14%</b>
<b>Total</b>	<b>24</b>	<b>68.57%</b>	<b>9</b>	<b>25.71%</b>	<b>2</b>	<b>5.71%</b>	<b>35</b>	<b>100.00%</b>



# Quarter 3 - Unknown Exits All Projects

Program Name	CC--SO--City Street Outreach		TPW--SO--Womens Hearth		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>	1	0.27%	15	4.11%	<b>16</b>	<b>4.38%</b>
Currently Enrolled	105	28.77%	167	45.75%	<b>272</b>	<b>74.52%</b>
Permanent	3	0.82%			<b>3</b>	<b>0.82%</b>
Sheltered	15	4.11%			<b>15</b>	<b>4.11%</b>
Temporary	49	13.42%	1	0.27%	<b>50</b>	<b>13.70%</b>
Unsheltered	5	1.37%	4	1.10%	<b>9</b>	<b>2.47%</b>
<b>Total</b>	<b>178</b>	<b>48.77%</b>	<b>187</b>	<b>51.23%</b>	<b>365</b>	<b>100.00%</b>

Program Name	CAT--ES--Recovery Options Center		CC--ES--HOC Shelter		FPS--ES--Families Shelter		FPS--ES--Scattered Site		JHH--ES--Churches--Scattered Site		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>			181	15.70%					1	0.09%	<b>182</b>	<b>15.78%</b>
Currently Enrolled	28	2.43%	183	15.87%	51	4.42%	12	1.04%	66	5.72%	<b>339</b>	<b>29.40%</b>
Institutional	5	0.43%	1	0.09%	6	0.52%	1	0.09%	12	1.04%	<b>24</b>	<b>2.08%</b>
Permanent	7	0.61%	23	1.99%	138	11.97%	30	2.60%	59	5.12%	<b>257</b>	<b>22.29%</b>
Sheltered	7	0.61%	1	0.09%	21	1.82%	5	0.43%	43	3.73%	<b>76</b>	<b>6.59%</b>
Temporary	8	0.69%	1	0.09%	68	5.90%	13	1.13%	27	2.34%	<b>117</b>	<b>10.15%</b>
Unsheltered	39	3.38%			64	5.55%	21	1.82%	73	6.33%	<b>192</b>	<b>16.65%</b>
<b>Total</b>	<b>94</b>	<b>8.15%</b>	<b>390</b>	<b>33.82%</b>	<b>348</b>	<b>30.18%</b>	<b>82</b>	<b>7.11%</b>	<b>281</b>	<b>24.37%</b>	<b>1153</b>	<b>100.00%</b>



# Quarter 3 - Unknown Exits All Projects

Program Name	JHH--ES--Aurora Center		JHH--ES--Womens Shelter--Scattered Site		VOA--ES--YAS		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>					43	9.47%	<b>43</b>	<b>9.47%</b>
Currently Enrolled	21	4.63%	45	9.91%	97	21.37%	<b>162</b>	<b>35.68%</b>
Institutional	2	0.44%			1	0.22%	<b>3</b>	<b>0.66%</b>
Permanent			13	2.86%	19	4.19%	<b>32</b>	<b>7.05%</b>
Sheltered			22	4.85%	2	0.44%	<b>24</b>	<b>5.29%</b>
Temporary	2	0.44%	4	0.88%	15	3.30%	<b>21</b>	<b>4.63%</b>
Unsheltered	10	2.20%	163	35.90%	10	2.20%	<b>183</b>	<b>40.31%</b>
<b>Total</b>	<b>35</b>	<b>7.71%</b>	<b>247</b>	<b>54.41%</b>	<b>187</b>	<b>41.19%</b>	<b>454</b>	<b>100.00%</b>

Program Name	CC--ES--Catalyst--ROW		JHH--ES--Healing Hearts Medical Respite		REV--ES--Homes--ROW		TSA--ES--The Way Out Center		VOA--ES--Crosswalk Youth Shelter		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>	6	1.01%							6	1.01%	<b>12</b>	<b>2.01%</b>
Currently Enrolled	52	8.72%	16	2.68%	8	1.34%	52	8.72%	88	14.77%	<b>216</b>	<b>36.24%</b>
Institutional	6	1.01%	28	4.70%			9	1.51%			<b>43</b>	<b>7.21%</b>
Permanent	22	3.69%	14	2.35%	11	1.85%	40	6.71%	5	0.84%	<b>92</b>	<b>15.44%</b>
Sheltered			10	1.68%	2	0.34%	11	1.85%	3	0.50%	<b>26</b>	<b>4.36%</b>
Temporary	2	0.34%	11	1.85%	4	0.67%	52	8.72%	2	0.34%	<b>71</b>	<b>11.91%</b>
Unsheltered	12	2.01%	33	5.54%	13	2.18%	83	13.93%	1	0.17%	<b>140</b>	<b>23.49%</b>
<b>Total</b>	<b>100</b>	<b>16.78%</b>	<b>112</b>	<b>18.79%</b>	<b>38</b>	<b>6.38%</b>	<b>247</b>	<b>41.44%</b>	<b>105</b>	<b>17.62%</b>	<b>596</b>	<b>100.00%</b>



# Quarter 3 - Unknown Exits All Projects

Program Name	YWCA--ES--DV Shelter		<b>Total</b>	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>	9	18.37%	<b>9</b>	<b>18.37%</b>
Currently Enrolled	24	48.98%	<b>24</b>	<b>48.98%</b>
Permanent	13	26.53%	<b>13</b>	<b>26.53%</b>
Temporary	3	6.12%	<b>3</b>	<b>6.12%</b>
<b>Total</b>	<b>49</b>	<b>100.00%</b>	<b>49</b>	<b>100.00%</b>

Program Name	CC--TH--SMS--CoC-WA0109		TPW--TH--Miryams House		TPW--TH--TLC		VOA--TH--Alexandrias House--CoC-WA0126		<b>Total</b>	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>					6	3.53%	1	0.59%	<b>7</b>	<b>4.12%</b>
Currently Enrolled	30	17.65%	4	2.35%	16	9.41%	6	3.53%	<b>56</b>	<b>32.94%</b>
Institutional					1	0.59%			<b>1</b>	<b>0.59%</b>
Permanent	56	32.94%	6	3.53%	7	4.12%	2	1.18%	<b>71</b>	<b>41.76%</b>
Sheltered	3	1.76%							<b>3</b>	<b>1.76%</b>
Temporary	12	7.06%	1	0.59%	2	1.18%	7	4.12%	<b>22</b>	<b>12.94%</b>
Unsheltered	10	5.88%							<b>10</b>	<b>5.88%</b>
<b>Total</b>	<b>111</b>	<b>65.29%</b>	<b>11</b>	<b>6.47%</b>	<b>32</b>	<b>18.82%</b>	<b>16</b>	<b>9.41%</b>	<b>170</b>	<b>100.00%</b>



# Quarter 3 - Unknown Exits

## All Projects

Program Name	CC--RRH--Families--HHOS		CC--RRH--Families--HHOS-ESG		GI--RRH--HEN		GI--RRH--HEN FCS Bridge		SNAP--RRH--Singles--HHOS		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>									4	1.28%	<b>4</b>	<b>1.28%</b>
Currently Enrolled	19	6.09%	3	0.96%	138	44.23%			24	7.69%	<b>184</b>	<b>58.97%</b>
Institutional					3	0.96%					<b>3</b>	<b>0.96%</b>
Permanent	21	6.73%	41	13.14%	29	9.29%	1	0.32%	7	2.24%	<b>99</b>	<b>31.73%</b>
Sheltered									1	0.32%	<b>1</b>	<b>0.32%</b>
Temporary					3	0.96%			2	0.64%	<b>5</b>	<b>1.60%</b>
Unsheltered	3	0.96%			12	3.85%			1	0.32%	<b>16</b>	<b>5.13%</b>
<b>Total</b>	<b>43</b>	<b>13.78%</b>	<b>44</b>	<b>14.10%</b>	<b>185</b>	<b>59.29%</b>	<b>1</b>	<b>0.32%</b>	<b>39</b>	<b>12.50%</b>	<b>312</b>	<b>100.00%</b>

Program Name	CC--PSH--CHF--HHOS		CC--PSH--HHOS		TPW--PSH--Home Yard Cottages		VOA--PSH--WA0130		Total	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients
<b>Unknown</b>							4	1.29%	<b>4</b>	<b>1.29%</b>
Institutional							1	0.32%	<b>1</b>	<b>0.32%</b>
Permanent	3	0.96%	5	1.61%	2	0.64%	19	6.11%	<b>29</b>	<b>9.32%</b>
Retention	26	8.36%	56	18.01%	54	17.36%	128	41.16%	<b>264</b>	<b>84.89%</b>
Sheltered							2	0.64%	<b>2</b>	<b>0.64%</b>
Temporary					3	0.96%	6	1.93%	<b>9</b>	<b>2.89%</b>
Unsheltered							2	0.64%	<b>2</b>	<b>0.64%</b>
<b>Total</b>	<b>29</b>	<b>9.32%</b>	<b>61</b>	<b>19.61%</b>	<b>59</b>	<b>18.97%</b>	<b>162</b>	<b>52.09%</b>	<b>311</b>	<b>100.00%</b>



# Quarter 3 - Unknown Exits All Projects

Program Name	CCS--SSO--Hot Spotters		FPS--SSO--Children and Family Supportive Services		TPW--SSO--Womens Hearth		<b>Total</b>	
Exit Destination	# of Clients	% of Clients	# of Clients	% of Clients	# of Clients	% of Clients	<b># of Clients</b>	<b>% of Clients</b>
<b>Unknown</b>	20	2.59%	5	0.65%	19	2.46%	<b>44</b>	<b>5.71%</b>
Currently Enrolled	137	17.77%	115	14.92%	393	50.97%	<b>645</b>	<b>83.66%</b>
Institutional	5	0.65%	2	0.26%			<b>7</b>	<b>0.91%</b>
Permanent	2	0.26%	56	7.26%	1	0.13%	<b>59</b>	<b>7.65%</b>
Temporary			9	1.17%	2	0.26%	<b>11</b>	<b>1.43%</b>
Unsheltered	1	0.13%			4	0.52%	<b>5</b>	<b>0.65%</b>
<b>Total</b>	<b>165</b>	<b>21.40%</b>	<b>187</b>	<b>24.25%</b>	<b>419</b>	<b>54.35%</b>	<b>771</b>	<b>100.00%</b>

# Homeless Service Provider Narrative Response Worksheet

**Instructions**

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

**Project Information**

Project Name: CC—CA--HFCA	Service Type: Coordinated Entry	Reporting Period: 07/01/2025- 03/31/2026	Date Submitted: 4/26/26
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**Metric(s) Not Meeting Minimum Performance Standards**

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Percentage of Referrals with Successful Outcomes	40%	14.94%	-25.06%

**Explanation of the Variance**

Describe why the project has not met the minimum performance standard for each listed metric.

*Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

- The percentage of referrals with successful outcomes was 14.94% resulting in a variance of -25.06. There continue to be referrals left in HMIS with no result recorded. HFCA decentralized with satellite sites becoming responsible for their own data entry. While this provides the opportunity potentially for more households to be served it requires HFCA to provide additional oversight to satellites to ensure complete and accurate data entry in HMIS.

**Steps Taken to Improve Performance**

Provide a detailed description of actions your program has taken to address the performance gap.

*Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

- In the next quarter, we will ensure that all staff and satellite sites consistently utilize the CE Event and record referral outcomes in a timely manner. Bi-weekly reports will be generated to monitor data accuracy and completion. Additional training will be provided to intake staff and satellite partners who are not consistently entering required information.
- A one-page reference guide outlining how to accept and record referrals will be included with each referral sent to support compliance and consistency.
- We will implement a process of distributing bi-weekly reports to all assessors identifying outstanding referrals without recorded outcomes in HMIS. Each report will include a clear deadline for completion to improve accountability and data timeliness.

### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

*Identify any milestones or specific dates by which key actions or improvements are expected.*

- The above will immediately implemented.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

*If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

- Click or tap here to enter text.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: Catalyst	Service Type: Continuous Stay Emergency Shelter	Reporting Period: Q3 2025-26	Date Submitted: 4/30/26
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### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Rate of Utilization (Local Measure)	85%	71%	-14%
Length of Time Homeless in ES (SPM Metric 1a.1)	90 days	330days	+240days
Employment and Income Growth (SPM Metric 4.6)	40%	31.25%	-9.75%
Return to Homelessness (SPM Metric 2b)	20% max	58%	-38%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Rate of Utilization- This metric is not met this quarter due to 16 rooms being offline due to water damage remediation. Additionally, with the requirement for all vacancies being filled through designated ERP sites, the frequency of these designations impacts our overall occupancy rate. Rooms are now back online and the current ERP process—partnering with the newly funded City Outreach Team—has significantly increased our ability to fill vacancies, and should ensure that we maintain a much higher Rate of Utilization moving forward.
- Length of time- 330 days; we have continued to use a progressive programmatic approach to support moving individuals through the program; however, Commerce was originally very clear that length of stay was not a factor for exiting a participant from the program. Due to this structure, we have several very long-term participants we are working with diligently to get housed, with the goal of being able to achieve an overall shorter length of stay through a motivational interviewing/progressive engagement approach. Our average decreased 20 days during this quarter, and we anticipate further decreases in that average over the next quarter.
- Employment or Income Growth at Time of Exit - We are currently at 31.25%, which is 9.75% below our performance target and reflects a 6% decline over the last quarter. We recognize that this indicates a gap in both our outcomes and the consistency of our approach to employment and income planning. While Care Coordinators have been actively supporting participants through in-house pre-employment training and connecting them to community-based resources, these efforts have not yet translated into the level of measurable income growth we are targeting. To address this, we are strengthening our approach by implementing more structured employment planning earlier in the participant's stay, improving coordination with workforce partners, FCS, and increasing accountability around tracking and documenting income outcomes. We are also evaluating the effectiveness of our current training pathways to ensure they are directly aligned with job placement and income generation.
- Return to Homelessness - Our target goal is 20%; however, between January and March 2024, our return to homelessness rate was 58%. Of the 24 individuals who exited the program during that period, 10 have retained their housing. We recognize that this outcome does not meet our standards and reflects a need to strengthen our approach to long-term housing stability. While many participants entered the program with significant barriers—including behavioral health needs, substance use, and complex medical conditions—this underscores the importance of ensuring our model is equipped to support sustained success beyond placement. This period also coincided with the early development of our ERP encampment response, which highlighted gaps in post-exit support. In response, we have continued 90-day follow-up engagement and are expanding our model by adding an Aftercare Coordinator position to provide more consistent, long-term support and improve housing retention outcomes.

## Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Current rate of Utilization (71%) should continue to increase based upon the newly activated Outreach teams and the resumption of activating of encampments, which will lead to more referrals to fill our current vacancies and lead to achieving our 85% benchmark. \*ERP Legislative funds require that all ERP units be filled through ERP designated sites.
- Length of time in ES will decrease from 330 to closer to 90 days via the following actions: (1) Informing/educating participants as to new guidelines for length of stay expectations and moving them into the newly available ERP PSH units (Revive) the soon to be activated units at El Estero, and into units in the Ridpath with our new partnership with OSHS (2) and continuing to connect to other housing resources as available in the community.
- Employment and Income Growth at time of exit- In order to increase from our current rate of 31.25% to 40%, Catalyst Housing Care Coordinators will continue emphasizing the need to increase income for household sustainability and providing specific resources to support growth in this area. We will also continue to provide Employment opportunities and training. We continue to partner with Dignified Workday and to seek out additional opportunities for our participants in this area.
- We increased focus on engaging SUD and Behavioral Health on-site prior to graduation (still on a voluntary basis). Catalyst implemented a phased approach to help direct Care Coordination with participants- focusing on Behavioral and Physical Health needs initially and then moving to rental education and budgeting education as the program became more established. We are also bringing on-board an Aftercare Coordinator, whose role will be to maintain engagement with participants after exiting and support efforts to remain housed. This position will continue to engage with clients on a voluntary basis past our traditional 90-day mark.

## Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Rate of Utilization- with the new ERP outreach team and referrals coming online, we should increase our utilization to align more closely with funder mandates.
- Length of time- will decrease over the next quarter and should near or in compliance prior to **the end of Q4**
- Employment and Income Growth at time of exit- this has increased 20.5% since the 1<sup>st</sup> quarter and we are better able to track participants benefits and move away from self-reporting and we should continue to have increases in this area over the next quarter.
- Returns to Homelessness should decrease as the results of these programmatic changes begin to show. Q4 should display movement towards coming into alignment with the 20% expectation.

## Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

## Homeless Service Provider Narrative Response Worksheet

### Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: CC—ES—HOC Shelter	Service Type: Night by Night.	Reporting Period: 7/1/2025-3/31/2026	Date Submitted: Click or tap to enter a date.
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### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Length of Time Homeless ES (SPM Metric 1a.1)	90 Days Max.	137 Days	47+
Average Length of Time to Date of Engagement (Days)	Max 30 Days	70 Days	40+
Returns to Homelessness (SPM Metrics 2B)	Max 20%	24.24%	4.24+
Exits to Permanent Housing (All Clients SPM Metrics 7b.1)	Min. 40%	11%	+29%
Exits to Permanent Housing (SPM Metrics 7b.1-Only W/ Date of Engagement)	Mon. 40%	8.77%	+31.33%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Length of Time Homeless ES (SPM Metric 1a.1)

Proportion of clients lacking housing assistance resources and community. Clients are remaining in our shelter longer because of limited housing availability, high screening standards, and limited behavioral health services.

Exits to Permanent Housing (SPM Metrics 7b.1)

There are insufficient PSH options for clients, longer wait times for low-income housing, and clients are requiring more support before housing placement is possible. Increasing out of state shelter population who lack key housing documents leads to loss in housing readiness.

Returns to Homelessness (SPM Metrics 2B)

Low-income clients who don't have a stable rental subsidy or ongoing rental assistance are constantly at risk of becoming homeless again if they lose their income, because it's typically not sufficient to set aside savings in case of emergency. Lack of post housing assistance and supportive services.

Exits to Permanent Housing (*All Clients SPM Metrics 7b.1*)

Lack of affordable housing options for client population with high barriers to housing. Lack of natural housing options and supports through friends and family. A shrinking rental assistance pool for clients. The majority of our patrons do not qualify for rental assistance with their current barriers.

Average Length of Time to Date of Engagement (*Days*)

Staff struggling with HMIS, leading to inconsistent data entry for date of engagement.

### Steps Taken to Improve Performance

**Provide a detailed description of actions your program has taken to address the performance gap.**

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

Length of Time Homeless ES (*SPM Metric 1a.1*)

We have seen improvements since Q2 due to increased relationships with landlords, we will maintain these relationships and improve them. We will work more closely with SSVF, TrueBlood, FHArps, and DV victim services to ensure clients who are eligible for these programs have access to their benefits.

Returns to Homelessness (*SPM Metrics 2B*)

As part of our pre-housing process, we will increase our efforts to more consistently connect clients with ongoing housing services and supports once they are housed.

Exits to Permanent Housing (*All Clients SPM Metrics 7b.1*)

The Spokane housing authority PSH waitlists and PBV waitlists have remained closed, and lack available PSH units remains a broad barrier for a large proportion of our population. However, we will continue to look for affordable options for our clients to support them with transition into permanent housing. We plan to launch FCS to assist client with income and permanent housing assistance.

Average Length of Time to Date of Engagement (*Days*)

We will more frequently/ consistently train our Case Manager staff to record date of engagement in HMIS. We will also better document the date of engagement to more accurately reflect the date they engaged with our housing services during their shelter stay.

### Timeline for Improvement

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Length of Time Homeless ES (*SPM Metric 1a.1*)

We have improved and will continue to improve our landlord and community partner relations this quarter.

Exits to Permanent Housing (*SPM Metrics 7b.1*)

We will ensure clients are housing ready this quarter as we are assisting them with finding appropriate options. We have increased our number of services staff at the shelter this quarter.

Exits to Permanent Housing (*All Clients SPM Metrics 7b.1*)

We will ensure clients are housing ready this quarter as we are assisting them with finding appropriate options. We have increased our number of services staff at the shelter this quarter.

Average Length of Time to Date of Engagement (*Days*)

This quarter we will be training new services staff in HMIS, and have re-trained current staff on HMIS with the HMIS team.

Returns to Homelessness (*SPM Metrics 2B*)

This quarter we are going to improve relationships with supportive housing providers who can support clients while they are housed.

**Additional Support or Resources Needed**

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*
- More frequent updates from the Spokane Housing Authority, as they control the waitlist for tenant based and PBV voucher programs for PSH.
  - Increased partnership with other housing providers in Spokane city and County.
  - City of Spokane continue to change zoning codes so that more affordable housing units can be built quickly.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
PSH - HHOS	PSH	7/1/2025-3/31/2026	5/7/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Returns to Homelessness	5%	100% (n=1)	95%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Over the past two years, we have had one person exit from this program who eventually returned to the homeless system. This client moved from one of our PSH properties to an apartment complex outside of our agency on 08/01/23, and had requested to work with another provider

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

Because this individual elected to move into permanent housing outside of our agency and pursue services with another SH provider, we were unable to maintain services for them.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

N/a

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

N/a

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
PSH - CHF	PSH	7/1/2025-3/31/2026	5/7/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Average Rate of Utilization (Units)	85%	79%	6%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

We are below our number of families for this project. We are working with HFCA to receive one or two referrals before the end of Q4.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

We will continue to work with HFCA to ensure that if there is a qualifying family, we can enroll into this project.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

By the end of Q4.

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

N/a

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: CC-RRH- Families- HHOS	Service Type: .Rapid Rehousing	Reporting Period: 7/1/25-3/31/2026	Date Submitted: 4/27/26
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### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits to Permanent Housing	70%	53.85%	-16.15%

### Explanation of the Variance

**Describe why the project has not met the minimum performance standard for each listed metric.**

- The project did not meet the minimum standard of 70% exiting to permanent housing, by a variance of -16.15%. This shortfall is primarily due to families who are currently enrolled but do not qualify for this exit measure. These families have not exceeded their allowable time in the program. Case Managers are actively engaging with families to achieve successful placement into permanent housing.

### Steps Taken to Improve Performance

**Provide a detailed description of actions your program has taken to address the performance gap.**

Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

This measure will improve when we are able to exclude families that are currently enrolled and have not exited the program.

We are actively working with families to address the barriers preventing them from obtaining housing. This includes assisting with establishing payment plans for outstanding debt, supporting efforts to increase household income, and encouraging participation in the *Road to Renting* class to demonstrate their commitment to becoming stably housed to potential landlords.

### Timeline for Improvement

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- Identify any milestones or specific dates by which key actions or improvements are expected.

The above direct strategies and continued discussion to adjust the system level measurement of this metric will dramatically improve measures once implemented.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

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# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
City Street Outreach	SO	10/1/2025-3/31/2026	5/7/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Employment and Income Growth	35%	2.78%	32.22%
Exits from Street Outreach – Permanent Housing	40%	4.17%	35.83%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

Employment and Income Growth – we’re looking into how income is tracked on subsequent enrollments and assessments. Because the street outreach program is primarily connecting clients to immediate shelter options, we want to ensure income changes are being tracked.

Permanent Housing Exits – we are working to connect street outreach clients to the most immediately available housing or shelter option. If we cannot quickly connect to permanent housing, we will connect with temporary housing or emergency shelter options. We are expecting that over time, a higher percentage of clients will eventually end up in permanent housing from the shorter-term options we’ve connected clients to.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

Employment Income and Growth – we will work to ensure up-to-date income assessments in HMIS when clients have an income change while we are working with them. We will work to connect interested clients with income options, including FCS, as requested.

Permanent Housing – we will continue to work to connect our clients as often as possible with permanent housing options when available. We will continue to prioritize immediate solutions, but are working to help make sure clients have access to permanent housing, including making sure clients have access to different grants or funding opportunities that will help clients access that housing.

### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Through Q4.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

None identified at this time.

## Homeless Service Provider Narrative Response Worksheet

### Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
CC—TH—SMS- CoC- WA0109	Transitional Housing	07/01/2025-3/31/26	04/27/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
<i>Returns to Homelessness</i>	10%	23.91%	-13.91%
<i>Employment and Income Growth</i>	35%	29.63%	-5.37%

The rate of returns to homelessness is 23.91%, exceeding the 10% goal. This increase is attributed to five families who reentered the homeless system during the reporting period. These families experienced unanticipated unsafe home environments. One family was able to re-engage in a permanent housing solution through a community partner agency.

The rate of increased income was 29.63%, falling below the 35% performance target and resulting in a variance of 5.37%. This shortfall is primarily due to several participants facing temporary barriers to employment. All families are now actively engaged in increasing their income.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

*Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

- Case managers have received and will continue to receive ongoing training on domestic violence awareness, safety planning, and trauma-informed practices to better support clients in identifying and transitioning into safe, stable housing environments. Strengthening staff competency in this area is a key priority.
- We have started working with Freedom Consulting employment specialists to increase income for clients.
- We are engaging in community conversations regarding the need to support families with increased income and daycare options.

### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards. Identify any milestones or specific dates by which key actions or improvements are expected.**

- This will be implemented immediately; improvements should be made in the next quarter.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

*If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*



# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: FPS ES      Service Type: HHOS      Reporting Period: QTR 3      Date Submitted: 05/07/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits	25%	21.05%	-3.95%
Return to homelessness	20%	22%	+2%
Income Growth	35%	15.87%	-19.13%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Exits for all clients: Case management staffing turnover and reduction of funding sources were major contributors in not meeting minimum performance standards.

Return to homelessness: Clients did not stay in the program to engage in services effectively

Income growth: Data entry was not consistent in reporting.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

➤ Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

Training of new case managers to partner with families for income growth and transparent intake procedures to establish continuous engagement to utilize services for housing stability.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

➤ Identify any milestones or specific dates by which key actions or improvements are expected.

Timeline to achieve positive metrics to meet minimum standard goals by the end of QTR4

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

➤ If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

N/A.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: FPS-SSO	Service Type: HHOS	Reporting Period: QTR 3	Date Submitted: 05/07/2026
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### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits All Clients	25%	31.91%	+6.91%
Income Growth	35%	16.67%	-18.33
Long Length of Homelessness	64%	15.25%	-48.75

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Exits for all clients: This is a referral project from District 81 schools. The engagement with these families are sparse due to living in cars/outside. The high exit to temporary housing is due to doubled up families to increase housing stability.

Income growth: The lack of income growth is because the majority of the families work in this project and are in need of move-in/rental assistance to obtain housing stability.

Long length of homelessness: The SSO projects objective is to provide housing stability without having the family enter shelter programs. This is reflected from the average time of engagement to exit: 3 days.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

➤ Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

Improvement steps for this program would be working with the families to increase income for housing stability. Focus would be on increasing income if necessary for housing stability.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

➤ Identify any milestones or specific dates by which key actions or improvements are expected.

Time is to meet the minimum metric standards by the end of QTR 4.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

N/A

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
FPS Scattered Sites	Pilot Program	QTR 3	05/07/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Average Rate of Utilization	85%	79%	-6%
Exits All Clients	25%/40%	16%/34%	-6%/-6%
IncomeGrowth	35%	13%	-22%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Average Rate of Utilization: An error was found between the FPS database and HMIS which resulted of under utilization of this grant.

Exits of all clients: Families did not engage in services to maintain stability.

Income Growth: Due to the non engagement of services, income was not a priority due to physical and behavioral health issues.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

100% quality control going forth of all information within HMIS. Knowledge of the check and balances reports in HMIS allows to ensure accurate data. Retraining of staff to ensure we are meeting families where they are currently at to maintain stability within the program.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

Improve of metrics by the end of QTR4

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

Click or tap here to enter text.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Housing Navigation Center	Day Shelter	Q3	4/24/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Employment and Income Growth	35%	0%	35%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

The Housing Navigation Center is a **daytime shelter focused primarily on crisis response and connecting people to emergency shelter** and is serving a population whose immediate needs are safety, stabilization, and basic survival—not employment or income growth. Because the program’s core function is rapid access to shelter beds and daytime sheltering, rather than long-term case management, workforce development, or benefits navigation, many participants engage only briefly and are in crisis when served. That limits the time and capacity needed to secure employment, increase wages, or complete public benefit applications within the reporting period. We do have partner agencies with whom we try to get folks engaged with for employment help as well as FCS and some do choose to [engage. We](#) also have other providers as well.

Additional factors often include high barriers faced by participants such as, not communicating when they get housed or employed due to no longer needing HNC services, untreated health conditions, mental health needs, substance use disorders, lack of identification, transportation issues, criminal history, and limited access to childcare or technology. In many communities, there are also broader economic barriers such as low wages, limited job availability, and long wait times for benefits.

The Housing Navigation Center “HNC” is still highly effective at its intended purpose—getting folks into available shelter beds, increasing safety, and connecting people to service providers who partner with the HNC—even while falling short on the specific HUD income-growth metric.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

Communicate more effectively with participants and other service providers on progress with participant taking positive steps towards improved life situations so we can capture that data.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Plan to do so immediately.

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

Additional staff

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Aurora Center	Emergency Shelter	Q3	4/26/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
<i>Utilization</i>	85%	76%	9%
Exits	25% Temporary	5.71%	19.29%
<i>Employment and income growth</i>	35%	0%	35%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

For utilization rate I Believe we are closer to 80%. We are a newer shelter and serve the LGBTQ community. For utilization we are a low capacity shelter so if one or 2 people don't check in we fall below 85% due to only having 14 beds

For Exits we haven't been open that long but are making progress with the individuals.

For the employment and income growth we again have not been open very long and factors often include high barriers faced by participants such as, not communicating when they get housed or employed due to no longer needing HNC services, untreated health conditions, mental health needs, substance use disorders, lack of identification, transportation issues, criminal history, and limited access to childcare or technology. In many communities, there are also broader economic barriers such as low wages, limited job availability, and long wait times for benefits.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

For Utilization we plan on continuing to fill beds and have folks show up consistently.

For exits we are having other service providers come in and engage with folks to try and help exit folks to better situations.

For employment and income growth we are having other service providers come in and try and engaging with folks to try and give them the opportunity to get employment or some other kind of income.

### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

We Should see improvements by end of q4

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Scattered Sites- Churches	Night by Night	7/1/2025 - 3/31/2026	4/24/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits Permanent	40%	21.07%	19%
<i>Employment and Income Growth</i>	35%	7.76%	27.24%
<i>Returns to homelessness</i>	20%	16.67%	3.33%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

Exits to permanent housing barriers are people self exiting without giving any explanation.  
 Employment and income growth challenges are guests not letting us know when they receive an income change

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

For exits to permanent housing we have developed exit sheets to better keep track for data purposes to input when someone is exiting to housing

For employment and income growth weve set up 30,60 and 90 day shelter wide meetings with guests individually with peer support shelter supervisor and scattered site manager to set and reach goals

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

We just started the 30,60 90 program so were hopeful to see results in about 3 months

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

Click or tap here to enter text.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Healing Hearts	Medical Respite	7/1/2025 - 3/31/2026	4/24/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
<i>Exits to permanent</i>	55%	12.50%	42.50%
<i>Employment and income growth</i>	40%	10.31%	29.69%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

Exits to permanent housing should be considered to be adult family home which is where most of the guests from healing hearts leave to. Instead of living on their own, it should be considered permanent housing.

Employment and income growth, residents are there focusing on healing not gaining employment

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

I feel that this is the wrong data to be keeping track of for income growth when guests at healing hearts are there to recover not job search. And the exits to permanent housing, adult family homes should count as permanent housing.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Click or tap here to enter text.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

Click or tap here to enter text.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Womens Scattered Site	Overnight Shelter	7/1/2025 - 3/31/2026	4/24/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits to permanent	40%	5.26%	34.74%
Employment and income growth	35%	3.62%	31.38%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Exits to permanent challenges are the women only get exited if they don't show up or can't maintain overnight in the shelter.

Employment and income growth challenges are that the women are their to sleep so we don't always know what their working on during the daytime when there out and away from our facility

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

Click or tap here to enter text.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

Click or tap here to enter text.

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

Click or tap here to enter text.



# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: ERP ES Homes      Service Type: Homeless Services      Reporting Period: 07/01/2025-03/31/2026      Date Submitted: Click or tap to enter a date.

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
7b.1	55%	29.95%	-25.05%
1a.1	90 days	291 days	-201 days
Average Utilization Rate	85%	51%	-34%
4.6	40%	33.33%	-6.67%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Exits to permanent housing continue to fall short of expected targets due to multiple contributing factors. Overall housing availability remains limited in the region, and delays in obtaining required documentation, a lack of HCVs for individuals with no or low income, and supporting clients with complex needs further extend the length of stay. Our program prioritizes client stability and long-term success, which often requires additional time before clients are fully prepared to transition to permanent housing. Another primary challenge is the limited number landlords willing to rent to individuals with some of the barriers faced by our ERP population. On top of the individuals' significant housing barriers—such as prior evictions, income restrictions, poor rental history, and criminal backgrounds—many individuals are taking time to recover and build a strong foundation in recovery with the community in our ES houses, which has led to many not wanting to feel rushed to move on to permanent housing where they would potentially be living alone. Revive plans to do better with these metrics in the future, as we have implemented a “phase” approach to housing stability that is inspiring house guests to work with their case manager to achieve the measurable goals and steps outline in the phases.

Low ERP eligible referral volume also created a barrier with being able to meet the utilization rate metric. The increase in encampment deeming in the last 2 months of the year helped to fill the beds. We should be meeting this metric presently and will continue to meet it through next reporting period.

Employment and income growth have also been affected by client barriers, including various disabilities that make it difficult for clients to begin working or the impact that their substance use disorders have had on their employment goals. Many new clients who entered our beds in the last month of the year did not have any income

or resources but have started working with our employment specialists to engage in employment. Additionally, our case managers are working closely with individuals to increase their disability income through DSHS and SSA programs as they are stabilizing in the houses.

Returns to homelessness have primarily been associated with clients who exited the program prior to giving our case managers enough time to help with stabilization needed to enter permanent housing.

### Steps Taken to Improve Performance

**Provide a detailed description of actions your program has taken to address the performance gap.**

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

Strengthen housing access and landlord engagement, increase support for clients with significant housing barriers, reduce returns to homelessness related to behavioral issues by working towards increased access to mental health services and crisis intervention supports, work with local employers and agencies to help with employment, work towards strengthening communication with referral partners, provide updated program information. Working with clients to prioritize stability support for clients with complex needs who have recently come in from encampments while supporting clients who have more quickly met phased goals toward permanent housing faster.

### Timeline for Improvement

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Improvements should be seen over the next reporting period. New referrals are coming in from encampments, the new phased approach to house stability has engaged clients who have not recently been interested in engaging in the housing process and we are building a stronger team of case managers/housing specialists who will increase landlord development outreach.

### Additional Support or Resources Needed

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

It was mentioned at a recent meeting that additional funds may be available to support facility or program needs. If additional funding is available to support staff training, our team would love to learn more about housing and behavioral health topics from outside facilitators or city trainers.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: ERP PHS Units      Service Type: Homeless Services      Reporting Period: 07/01/2025-03/31/2026      Date Submitted: Click or tap to enter a date.

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Average Rate of Utilization (Bed)	85%	62%	-23%
Average Rate of Utilization (Unit)	85%	51%	-34%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Acknowledgement that the stats fell short on the expected targets due to multiple contributing factors, the primary contributors to the lower-than-expected bed and unit utilization were a lack of consistent referrals and delays related to the opening and lease-up of the Maxwell units. During this period, referrals were more limited than anticipated, which significantly constrained our ability to fully utilize available capacity. Additionally, unanticipated delays in unit readiness postponed the availability of several units. While these circumstances were influenced by external and transitional factors, we recognize that the resulting underutilization reflects a gap in performance for which we are accountable.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

➤ Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

To correct this issue, the program has strengthened coordination with coordinated entry and referral partners to improve referral flow and placement timing. These actions reflect our commitment to corrective improvement and to meeting system performance expectations moving forward.

### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Improvements should be seen over the next reporting period. New referrals are coming in from coordination with coordinated entry and referral partners.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

It was mentioned at a recent meeting that additional funds may be available to support facility or program needs. If additional funding is available to support staff training, our team would love to learn more about housing and behavioral health topics from outside facilitators or city trainers.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Homeless Prevention SNAP-Singles-HP	Prevention	7/1/2025-3/31/2026	5/4/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
<i>Employment and Income Growth</i>	20%	0%	20%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Started serving clients in March 2026, we have not done a recertification for any clients or exited them. Only counting income at exit will be a challenge with this metric.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

We are tracking clients' income at 90-day recertification and focusing on income growth with their Housing Stability Plans.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

Within 6 months we should see data on the metric of employment and income growth. This should give at least 2 recertifications for the first clients and may see some exits depending on the client.

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

Going to County and City joint HP meetings will help us to talk to other providers about exiting clients and strategies to improve income. Looking at the income at 90-day recerts instead of just at exit would allow us to look at clients who are currently enrolled.



## Homeless Service Provider Narrative Response Worksheet

### Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Singles Rapid Rehousing (HHOS)	Rapid Rehousing	7/1/2026-3/31/2026	5/4/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
SPM Metric 2b Returns to Homelessness	<i>10% Maximum</i>	18%	8%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

This project has seen an increase in returns to homelessness. Of the 5 returns recorded, 4 returned in 2024 while one returned in early 2026. Clients were housed for an average of 386 days before returning. One client returned to another permanent housing project while four returned to shelter or outreach projects.

In conversation with HMIS staff we have noted system changes such as the removal of Permanent Supportive Housing from the coordinated entry waiting pool, the loss of housing voucher allotments for providers, and programmatic changes in state guidelines. We must also recognize the potential that shallow-subsidy Rapid Rehousing (i.e. 'deposit-only') has contributed to increased recidivism. Such interventions have been scaled back dramatically in recent funding years, with both external and internal caps placed on the number of 'deposit only' interventions allowed. While we still believe shallow subsidy is an important part of the housing mix, we will be monitoring this closely and looking at adding additional guardrails and support to clients, including an automatic 90 and 180-day post-exit check-in to assess housing stability.

### **Steps Taken to Improve Performance**

**Provide a detailed description of actions your program has taken to address the performance gap.**

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

We will be monitoring returns closely, particularly those served with lighter subsidy. We will consider imposing additional checks to ensure that clients who receive such assistance represent a low risk of recidivism .

### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

The monitoring of returns will be an ongoing process throughout the remainder of the project term.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Singles Diversion	Diversion	7/1/25-3/31/2026	5/4/2025

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
SPM Metric 2b – Returns to Homelessness	6% Maximum	7%	+1%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

Three returns to system are recorded in the project period of 38 households diverted who were exited to permanent housing in the past 24 months.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

Diversion conversations often involve stepping into the unknown with clients. Because it leverages creative problem-solving, often utilizing existing client resources such as social ties, family relationships or friendships, these interventions may work for a period of time but the client may find they are in need of additional system resources. While we always strive to minimize recidivism and help clients realize solutions that permanently resolve their homelessness, we also encourage case managers to explore bold and creative solutions with clients in crisis.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Our project has hired a dedicated Diversion Specialist as a case manager who will be devoted to this project.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

Though Diversion is recognized as a supportive-services project type, with shorter enrollments and typically no client direct assistance, the reporting targets for recidivism—no more than 7%-- are stricter than projects with lengthy enrollments, case management and direct assistance such as Rapid Rehousing, which would see 10% or fewer system returns. This is somewhat counterintuitive given the lighter touch and problem-solving nature of Diversion compared to more intensive interventions, and may foster an unhealthy risk aversion in providers.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: TPW-PSH-Home Yard Cottages	Service Type: PSH	Reporting Period: 7/1/2025 - 3/31/2026	Date Submitted: 4/30/2026
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### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Annual Income Growth and/or Non-Cash Benefits	25%	0%	25%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Many households rely on fixed income sources such as SSI/SSDI and face significant barriers to employment or income expansion, limiting opportunities for measurable growth within the reporting period. In addition, supportive services, including case management and income-focused interventions, are voluntary, and not all residents elected to report income or benefit changes during this quarter. No data collection or reporting issues were identified; performance accurately reflects participant circumstances and service engagement choices.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

Staff continue to provide information on employment supports, benefit programs, and community resources while respecting participant choice. The program has strengthened coordination with external benefits and employment partners and reinforced staff training on benefit retention, recertification, and documentation to improve identification and tracking of qualifying outcomes.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

**Q4 2026:** Staff will continue voluntary income and benefit screenings during routine contacts and ensure accurate documentation of any changes.

**Ongoing:** Performance will be reviewed quarterly, with continued referrals to employment and benefits resources as residents choose to engage.

### **Additional Support or Resources Needed**

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

➤ *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

No additional funding or staffing is required at this time to address performance related to Annual Income Growth and/or Non-Cash Benefits. Continued access to benefits advocacy resources, employment service partnerships, and technical assistance related to income documentation and reporting would support incremental improvement. In addition, ongoing Trauma-Informed Care (TIC) training for staff supports effective, participant-centered engagement, helping build trust and increase readiness for voluntary income or benefit-related activities over time. At a system level, expanded access to specialized employment and benefits supports for high-acuity PSH participants would further enhance opportunities for measurable outcomes while maintaining housing stability and participant choice.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
TPW—SSO--Womens Hearth	Supportive Services Only	7/1/2025 - 3/31/2026	4/24/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

To better reflect the work done here at Transition’s Women’s Hearth, staff has met with the City and County to recording methods. It was determined that “date of engagement” was used instead of “date of check in,” which caused the metrics to appear skewed.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

The Hearth staff is on the same page as the City and County and will do this new metric going forward.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

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### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

Click or tap here to enter text.



# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Miryam's House	Transitional Housing	7/1/25- 3/31/26	4/30/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits to Permanent Housing	70%	54.55%	15.45%
Returns to Homelessness	10%	16.67%	6.67%
Average Utilization Rate	85%	84%	1%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

**Exits to Permanent Housing:** Miryam's House had no unsuccessful exits during this reporting period. The one exit to temporary housing was to TLC so the client could reunify with her minor child. Of the 4 still enrolled, 1 has since moved into permanent housing and the other 3 have been in the program less than 6 months and are not ready to move into permanent housing yet.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

We are continuing to provide wrap-around case management services in an effort to help the newer participants get ready to move into permanent housing.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

We are hoping to have 2 additional move-outs by the end of the next reporting period.

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
TPW-TH-TLC	Transitional Housing	7/1/25- 3/31/26	4/30/26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits to Permanent Housing	70%	28.57%	41.43%
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]
[Enter Metric]	[Enter Standard]	[Enter Performance]	[Enter Variance]

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Only two participants obtained permanent housing during this reporting period. Of the 4 who remain in the program, 2 are ready to exit the program but are facing difficulties finding affordable permanent housing, while the other 2 are new to the program and not yet ready for permanent housing.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

We have been building relationships with property management companies and private landlords, as well as working with clients to increase their income through employment and educational opportunities.

### Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- Identify any milestones or specific dates by which key actions or improvements are expected.

We are hoping to have two additional move-outs to permanent housing by the end of the next quarter.

### Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.

More affordable permanent housing options for households of 2-3.

## Homeless Service Provider Narrative Response Worksheet

### Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name: VOA— ES—Crosswalk Youth Shelter	Service Type: Continuous Stay Emergency Shelter.	Reporting Period: Q3	Date Submitted: 05/07/26.
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### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Returns to Homelessness	20% Minimum	31.82%	11.82%
Average Rate of Utilization	85%	60%	25%
Length of time Homeless	90 Days	167 Days	77 Days
Employment and Income Growth	40% Minimum	0%	40%
Exits To Permanent Housing	55% (Permanent)	5.05% (Permanent)	49.95%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Returns to homelessness and exits to permanent housing continue to be impacted by several factors related to youth engagement, data quality, and the unique challenges faced by unaccompanied young people experiencing homelessness. Many returns to homelessness occur when clients exit shelter unexpectedly without informing staff of their plans or destination, limiting our ability to track housing outcomes or provide continued follow-up support as they do not have access to phones. Additionally, we have identified clients who remained enrolled in the program despite no longer actively staying in shelter overnight, but engaged in drop-in services and are currently working to appropriately exit clients after 30 days without a housing check-in to improve data accuracy and reporting.

As a youth shelter, Crosswalk supports young people with employment, housing, education, and other individualized needs, while striving to meet each client where they are. Participation in case management services and program incentives remains voluntary, which can impact length of stay, engagement, employment participation, and overall housing outcomes. Due to the limited availability of housing options for unaccompanied youth, staff often explore alternative placements with very few choices available. We strongly encourage education completion as a pathway toward long term employment and housing stability and maintain an open-door policy so youth who exit can safely return and reengage in services when ready.

Our utilization rate has also been affected by ongoing HMIS data-quality reconciliation efforts and as records continue to be reviewed and corrected, we anticipate our data entry to improve with housing checkins and that will in turn continue to improve and more accurately reflect actual shelter utilization for Crosswalk Youth Shelter.

### Steps Taken to Improve Performance

**Provide a detailed description of actions your program has taken to address the performance gap.**

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

To strengthen exits to permanent housing and improve overall service delivery within emergency shelter programs, we have implemented several new strategies focused on coordination, accountability, and client engagement. A dedicated supervisor now supports case managers and shelter staff in maintaining consistent communication and accurate information sharing with participants, including tracking destination information to the extent possible prior to client exits, particularly in cases of abrupt or unplanned departures. We have also introduced a case management tracking sheet to better monitor each client's individual needs, goals, and progress, supporting a more tailored and accountable approach to care. In addition, VOA housing program teams and shelter case managers are participating in ongoing case conferencing meetings to coordinate next steps, strengthen service alignment, and support clients in successfully transitioning to permanent housing or safely reconciling with family supports when appropriate. Alongside these efforts, we continue training new floor staff and keeping case managers informed of HMIS updates and reporting expectations. A dedicated team is actively reconciling shelter utilization data, and additional HMIS training is being provided to improve the accuracy of employment and income outcome reporting. We also continue to refine engagement strategies and program incentives to better support client participation and enhance service delivery, while recognizing that voluntary engagement can at times impact overall progress and outcomes.

### Timeline for Improvement

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

We anticipate measurable improvements in exits to permanent housing over the next 60 days. During this time, our focus will be on strengthening case management practices, improving communication and engagement with youth and enhancing follow-up efforts to better track client destinations in cases where youth exit abruptly or without notifying staff.

In addition, we expect to resolve key data-quality concerns by next quarter through ongoing HMIS reconciliation efforts, staff training, and strengthened documentation practices. We will continue implementing best practices and refining our client-centered approach to better support youth engagement, service delivery, and long-term housing stability.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

Click or tap here to enter text.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
Young Adult Shelter	Emergency Shelter	Q3	05/07/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Average Rate of Utilization	85%	74%	11%
Return to Homelessness	20% Max	58.33%	38.33%
Employment and Income Growth	35%	7.84%	27.16
Exits	40% (Permanent)	13.19% (Permanent)	26.81% (Permanent)

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

Because this is a low-barrier, night-by-night program, clients may exit at any time by choice (e.g., staying with friends, reuniting with family, or returning to unsheltered situations). Many clients remain enrolled, which affects our exit outcomes and contributes to variance in exit destinations. We also find that clients will also just leave and not remain in contact with us. Client choice also influences homelessness and progress on employment/income goals; some clients engage with case management to pursue jobs or benefits, while others do not.

Average utilization is temporarily understated as we reconcile bed-night stay data. But as we work to get that corrected, we do expect bed night utilization and date of engagement to go up.

### Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.

We're strengthening our bed-night documentation by training floor staff to record every stay, so our reporting accurately reflects the support clients receive each night. At the same time, we continue to offer consistent, relationship-based engagement and invite each client to connect with case management at their own pace for employment support and other resources they identify as priorities. We emphasize client choice by making case managers and other staff readily available whenever clients want help navigating services, benefits, housing options, or other needs.

### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

We hope to have all our staff trained in HMIS data quality and access over the next quarter to account for turnover and hiring stints. We anticipate resolving key data-quality concerns by next quarter through continued HMIS reconciliation efforts and ongoing staff training. Over the next quarter, we also aim to ensure all staff receive training related to HMIS access, data quality standards, and reporting expectations to support onboarding, staff turnover, and newly hired team members.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

## Homeless Service Provider Narrative Response Worksheet

### Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

Project Information			
Project Name: VOA—PSH—WA0130	Service Type: PSH.	Reporting Period: Click or tap here to enter text.	Date Submitted: Click or tap to enter a date.

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Average Rate of Utilization (Bed and Unit)	85%]	70% and 69% respectively	15% and 16% respectively
Returns to Homelessness	5%	12.50%	<b>7.5%</b>
Employment and Income Growth for Leavers	45%	23.81%	21.19%
Number of Households Served	208	159	49
Employment and Income Growth for Stayers	50%	42.68%	7.32%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

During the first three quarters of the 2025–2026 fiscal year, the PSH Scattered Site (WA0130) project did not meet minimum performance standards across five key metrics. The contributing factors are outlined below.

#### **Bed and Unit Utilization Rates:**

The project did not meet the 85% utilization standard, falling short by 15% for beds and 16% for units. This variance is primarily attributed to extended unit turnover timelines. Units are frequently vacated in significantly deteriorated condition, requiring substantial maintenance and repair prior to re-occupancy. These conditions often exceed standard turnover expectations and delay the ability to house new participants in a timely manner.

#### **Returns to Homelessness:**

The project exceeded the allowable threshold for returns to homelessness by 7.5%. This variance is largely due to the small number of total exits during the reporting period. Of the eight individuals who exited the project, one returned to homelessness. Due to the limited sample size, a single return has a disproportionate impact on overall performance rates.

**Projected Number of Households Served:**

The project fell short of its projected household service target by 49 households. Similar to utilization challenges, this variance is directly tied to delays in unit readiness. Both internal maintenance staff and partners, including Catholic Charities maintenance teams, require additional time to address the extensive repairs needed in vacated units. In many cases, unit conditions are impacted by participants experiencing significant barriers, including behavioral health challenges, which can result in difficulty maintaining safe and sanitary living environments. Limited engagement with case management services further contributes to these conditions, as participants may feel overwhelmed and decline supportive interventions.

**Employment and Income Growth (Leavers and Stayers):**

The project did not meet minimum performance standards for employment and income growth among both leavers and stayers. This is primarily due to incomplete data collection, as a number of participants did not complete annual assessments or exit interviews with case managers. As a result, income changes and employment gains may be underreported, impacting overall performance outcomes.

**Steps Taken to Improve Performance**

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

**Forward-Looking Improvement Plan:**

The PSH Scattered Site (WA0130) project has developed a targeted improvement plan to address the identified performance gaps and strengthen outcomes for the remainder of the 2025–2026 fiscal year and beyond.

**Unit Turnover and Utilization:**

To reduce unit vacancy time and improve utilization rates, the project will implement enhanced coordination between property management, maintenance teams, and case management staff. This includes establishing standardized unit turnover timelines, conducting pre-move-out inspections when possible, and increasing proactive engagement with participants around unit care. Additionally, the project will explore the use of unit preservation strategies, such as routine housekeeping support and skill-building interventions, to minimize the severity of unit damage at exit. These efforts are expected to decrease turnaround time and improve occupancy rates by the end of the fiscal year.

**Returns to Homelessness:**

To reduce returns to homelessness, the project will strengthen discharge planning and post-exit follow-up protocols. Case managers will begin transition planning earlier in the participant's program engagement, ensuring connections to ongoing supports, income stability, and appropriate housing options prior to exit. The project will also implement a 30-, 60-, and 90-day follow-up process to support housing stability after exit. These strategies aim to mitigate risk factors and improve long-term housing outcomes.

**Households Served:**

To increase the number of households served, the project will focus on minimizing unit downtime and improving referral-to-move-in timelines. This includes strengthening partnerships with referral agencies, maintaining an active and prioritized waitlist, and ensuring documentation processes are completed efficiently.

Increased collaboration with maintenance partners, including Catholic Charities, will also support faster unit readiness and turnover.

### **Employment and Income Growth:**

To improve performance in employment and income growth, the project will prioritize completion of annual assessments and exit interviews through enhanced participant engagement strategies. Case managers will receive additional training on documentation requirements and motivational interviewing techniques to increase participation in assessments. The project will also strengthen partnerships with employment and mainstream benefit providers to support participants in accessing income opportunities. Monthly internal data quality reviews will be conducted to ensure completeness and accuracy of HMIS data.

### **Data Quality and Performance Monitoring:**

The project will implement ongoing performance monitoring through monthly data review meetings to track progress toward HUD/CoC benchmarks. Identified data gaps will be addressed in real time, and corrective actions will be implemented as needed. Leadership will regularly review performance metrics to ensure accountability and continuous quality improvement.

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### **Timeline for Improvement**

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**  
➤ *Identify any milestones or specific dates by which key actions or improvements are expected.*

#### **Timeline for Improvement:**

Through these combined efforts, the project anticipates measurable and incremental improvements in utilization, service delivery, and participant outcomes over the remainder of the 2025–2026 fiscal year.

- **Short-Term (0–3 Months):**

Immediate actions will focus on operational efficiencies and data quality. The project will implement standardized unit turnover protocols, increase coordination with maintenance partners, and begin monthly performance and data quality review meetings. Case managers will prioritize completion of overdue annual assessments and exit interviews to address current data gaps. Early improvements are expected in data completeness, more accurate performance reporting, and modest reductions in unit vacancy days.

- **Mid-Term (3–6 Months):**

During this period, the project expects to see measurable improvements in unit utilization and households served as turnover timelines decrease and waitlist processes are streamlined. Enhanced participant engagement strategies, including more consistent case management contact and supportive interventions around unit maintenance, are expected to reduce unit damage at exit and improve housing stability. Strengthened discharge planning and follow-up protocols will begin to positively impact returns to homelessness.

- **Long-Term (6–12 Months):**

Sustained implementation of these strategies is expected to result in the project meeting or exceeding HUD/CoC performance benchmarks. Utilization rates are anticipated to stabilize at or above 85%, and the number of households served will align more closely with projections. Returns to homelessness are expected to decrease as a result of improved housing stability supports and follow-up practices.

Employment and income growth outcomes are also expected to improve due to more consistent data collection and stronger connections to mainstream resources.

The project will continue to monitor progress through ongoing performance reviews and will make data-informed adjustments as needed to ensure continuous quality improvement and alignment with HUD/CoC expectations.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

N/A

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
VOA—TH—Alexandrias— CoC WA0126	Transitional Housing.	Q3.	5.5.26

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
<i>Employment and Income Growth</i>	35% Minimum	No Increase	35%
<i>Average Utilization Rate (Unit)</i>	85% Minimum	26%	
<i>Average Utilization Rate (Bed)</i>	85% Minimum	16%	
<i>Exits to Perm Housing</i>	70% Minimum	5 Currently Enrolled & 5 in Temporary Housing	70%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

#### Exits to Permanent Housing:

Many participants transition to our sister program, Aston Bleck, upon turning 18. While this does not count as permanent housing, it is an intentional step within our continuum of care that allows young mothers to maintain consistent support systems while continuing to build independent living and parenting skills.

#### Utilization Rate (Unit & Bed):

Utilization declined following 2024 licensing changes limiting eligibility to youth up to age 21 only if enrolled in extended foster care. As most referrals are 17+ and not in foster care, this significantly reduced eligible referrals and led to periods of low or zero occupancy. VOA has since increased statewide outreach and is advocating for WAC language changes. Referrals have begun to increase, with projected occupancy at four clients as of March 2nd. Bed utilization is also impacted by family composition, as the program serves both pregnant and parenting youth.

#### Employment & Income Growth:

During this reporting period, the program did not meet Employment and Income growth metrics due to staffing disruptions and reduced bed capacity. An extended vacancy in the Case Manager position prior to and during the start of the contract year significantly limited service delivery and delayed key functions such as housing stabilization planning, employment and income support, and documentation compliance, resulting in decreased participant engagement and measurable progress toward outcomes. Although staffing is starting to stabilize, it is important to note that the program prioritizes education, parenting, and life skills

development, as most participants are school aged and first time parents, therefore, employment is encouraged but not required.

### Steps Taken to Improve Performance

**Provide a detailed description of actions your program has taken to address the performance gap.**

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*
- 

We are continuing to strengthen referral pathways and program visibility through intentional outreach efforts, including ongoing engagement with community partners, participation in local and statewide resource fairs such as those hosted by community colleges and Spokane Valley Connect, and utilization of the Youth Subcommittee and other community forums to promote the program and increase participation. To address low utilization related to licensure and eligibility changes, staff have increased communication with referral partners and system stakeholders across the state to clarify program criteria and referral processes. Internally, staff turnover created challenges in fostering a consistent sense of community; in response, we are implementing structured groups and activities to improve engagement and connection within the house, bringing back the community feeling. We are working on stabilization with hiring for a Case Manager and retention strategies are in place to support continuity. Additionally, a formal onboarding process has been implemented, including CHG checklist compliance and HMIS training, along with clear performance expectations tied to contract metrics. Supervisory oversight has been strengthened through increased check-ins and technical support to ensure consistency in documentation, service delivery, and outcome tracking, and internal workflows, templates, and tracking tools have been standardized to improve efficiency and compliance.

### Timeline for Improvement

**Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.**

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Over the next few months, we are implementing a series of program enhancements focused on strengthening structure, increasing community engagement, and better aligning services with the needs of our residents. This includes updating expectations and guidelines for both staff and clients to support consistency and clarity. We have also refined the enrollment process for Alexandria's House to gather more comprehensive information about client needs and expectations, while establishing clear plans for long-term success from the point of entry into the program.

### Additional Support or Resources Needed

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

As we work toward reaching full utilization, continued support at the local, regional, and state levels remains critical to the success of Alexandria's House. We also seek broader recognition across these levels, as one of the few maternity group homes serving young mothers, particularly as the program is currently underutilized and has the capacity to serve more families in need.

# Homeless Service Provider Narrative Response Worksheet

## Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
YWCA- DV Shelter	Continuous Stay ES	7/1/2025-3/31/2026	5/26/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits to Permanent Housing	55%	56%	+1%
Employment and Income Growth	40%	25%	-15%

### Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

➤ Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.

While the Emergency DV Shelter Project did not meet the 40% income growth benchmark during this reporting period, the project did successfully exceed the permanent housing exit threshold, with 56% of households exiting to permanent housing. This outcome reflects the significant housing stabilization work being achieved through ongoing survivor-centered shelter services.

The lower income growth outcome is influenced by several factors related to the population served and the realities of domestic violence shelter programming, including:

- **High barriers to employment and income growth:** Many households served include survivors with disabilities, participants receiving fixed-income benefits such as SSI/SSDI, and single-parent households with significant childcare responsibilities that limit workforce participation and income advancement.
- **Safety-related barriers:** Survivors fleeing abuse frequently experience disrupted employment, economic abuse, legal system involvement, trauma-related impacts, and ongoing safety concerns that affect financial stability and employment opportunities.
- **Economic conditions and affordability challenges:** Rising housing costs and inflation continue to outpace wage growth, making measurable income increases difficult even for participants who obtain or maintain employment.
- **Administrative and data tracking adjustments:** The recent division of shelter services into separate General Shelter and ED projects created additional administrative and data tracking complexities as staff continue refining workflows and reporting practices.

Despite not meeting the 40% income growth threshold, the GS project continues to demonstrate strong outcomes related to housing stability and survivor safety. In addition to exceeding the permanent housing placement benchmark, 25% of participating households increased income during the reporting period, reflecting meaningful progress toward long-term financial stability for survivors facing significant systemic and safety-related barriers.

## Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

➤ *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

To address the identified income growth gap, the Emergency DV Shelter Project has implemented several strategies focused on strengthening survivor access to financial stabilization, employment, education, and public benefits while maintaining a strong focus on safety and housing stability.

- **Agency Resource Fair initiative:** In April, our agency hosted its first resource fair connecting survivors with employment resources, educational opportunities, workforce programs, public benefits, and community-based support services. Due to positive engagement, an additional resource fair is planned for September.
- **Enhanced benefits and employment referrals:** Staff continue strengthening referrals and advocacy related to SSI/SSDI, TANF, SNAP, workforce development programs, and educational opportunities when appropriate and safe for participants.
- **Increased focus on financial stabilization within case management:** Advocates incorporate individualized financial goal-setting, budgeting support, and economic advocacy into ongoing shelter services to support longer-term stability.
- **Improved coordination and data tracking practices:** Following the division of shelter services into separate General Shelter and ED projects, staff have continued refining data workflows, documentation practices, and internal coordination to improve reporting accuracy and consistency.
- **Continued survivor-centered support services:** Shelter advocates continue providing individualized safety planning, housing navigation, emotional support, and systems advocacy to address the complex barriers survivors face related to employment and economic stability.

These efforts reflect the program's commitment to continuous improvement while recognizing the significant systemic and safety-related barriers impacting survivor income growth.

## Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

➤ *Identify any milestones or specific dates by which key actions or improvements are expected.*

To continue strengthening income growth outcomes within the Emergency DV Shelter project, the following improvement activities will occur during the remaining project period:

- **Ongoing through project end:** Continue enhanced referrals to employment programs, educational opportunities, public benefits, and financial stabilization resources through survivor-centered case management.
- **September 2026:** Host a second agency resource fair focused on connecting survivors to workforce development, educational supports, public benefits, and community resources.
- **Ongoing:** Continue refining HMIS workflows and internal documentation practices following the division of shelter services into separate General Shelter and ED projects to improve reporting accuracy and consistency.
- **Ongoing:** Continue incorporating individualized financial goal-setting and economic advocacy into shelter case management services while maintaining a strong focus on survivor safety and housing stability.

These efforts reflect the program's commitment to continuous improvement while recognizing the significant systemic and safety-related barriers impacting survivor income growth.

### **Additional Support or Resources Needed**

**Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).**

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

Additional community-based resources would strengthen long-term housing and economic stability outcomes for survivors served through the Emergency DV Shelter project. We continue to recommend a City-facilitated DV provider workgroup to support collaboration around survivor-centered housing strategies, performance measures, and system coordination. Increased access to affordable childcare, flexible financial assistance, supportive housing resources, and employment programs designed for survivors would further improve stabilization and income growth opportunities for participating households.

## Homeless Service Provider Narrative Response Worksheet

### Instructions

Complete this worksheet for each project that does not meet the minimum performance standard for any metric in accordance with the Spokane Regional 5-Year Plan. Submit worksheet to the assigned program professional(s) listed in the email.

### Project Information

Project Name:	Service Type:	Reporting Period:	Date Submitted:
YWCA – Emergency Declaration	Continuous Stay ES	7/1/2025-3/30/2026	5/26/2026

### Metric(s) Not Meeting Minimum Performance Standards

Please list and explain which specific metrics for the project are not meeting the minimum performance standards.

Metric	Performance Standard	Current Performance	Variance from Standard
Exits to Permanent Housing	55%	47%	-8%
Employment and Income Growth	40%	10%	-30%
Rate of Utilization	85%	100%	+15%

## Explanation of the Variance

Describe why the project has not met the minimum performance standard for each listed metric.

- *Include any challenges, barriers, or external factors that may have contributed to the underperformance (e.g., funding shortages, staffing challenges, changes in local demographics, etc.). If applicable, explain whether any data collection or reporting issues may have impacted performance.*

The Emergency Declaration (ED) Shelter Project did not meet the minimum performance thresholds for permanent housing exits or income growth during this reporting period due to the unique role of the project within our community's domestic violence response system. The ED project provides 24/7 immediate access to hotel shelter for high-risk DV survivors and families in crisis, with the primary goal of immediate safety and stabilization.

Additional factors contributing to lower performance outcomes include:

- **Crisis-focused intervention:** Many households enter in acute danger and require immediate safe shelter rather than longer-term housing or employment intervention at the point of entry.
- **Short-term hotel placements and rapid turnover:** ED-funded hotel stays are often brief and intended to address emergency safety needs, limiting the timeframe available to secure permanent housing or demonstrate measurable income growth during project enrollment.
- **High barriers to income growth:** Many households served include survivors with disabilities, participants receiving fixed-income benefits such as SSI/SSDI, and single-parent households with significant childcare responsibilities that limit immediate workforce participation.
- **Safety-related barriers:** Survivors fleeing abuse frequently experience disrupted employment, economic abuse, legal system involvement, and ongoing safety concerns that impact financial stability and housing outcomes.
- **Project enrollment and data tracking challenges:** Households remain enrolled in the ED project based on their point of entry, even if they later transition into congregate shelter services for ongoing stabilization and housing support. Additionally, the recent division of shelter services into separate Shelter and ED projects created additional administrative and data tracking complexities as staff continue adjusting workflows and reporting practices.

Despite not meeting the identified thresholds, the ED project remains essential to ensuring that high-risk survivors and families are able to access immediate safe shelter at any time, day or night, within our community.

## Steps Taken to Improve Performance

Provide a detailed description of actions your program has taken to address the performance gap.

- *Include any adjustments to strategies, new practices, or interventions being implemented. Outline any staffing changes, training initiatives, or partnerships that have been developed to improve performance.*

To address the identified performance gaps, our program has implemented several strategies focused on increasing survivor access to employment, education, and financial stabilization resources while maintaining a strong focus on safety and crisis response.

- **Agency Resource Fair initiative:** In April, our agency hosted its first resource fair connecting survivors with employment resources, educational opportunities, workforce programs, public benefits, and community-based support services. Due to positive engagement, an additional resource fair is planned for September.
- **Enhanced benefits and resource connections:** Staff continue strengthening referrals and advocacy related to public benefits, income supports, employment services, and educational opportunities when appropriate and safe for participants.
- **Improved coordination across shelter projects:** Since the division of shelter services into General Shelter and ED projects, staff have been working to strengthen internal workflows, improve data tracking practices, and ensure more accurate reporting across both projects.
- **Continued survivor-centered case management:** Advocates continue incorporating individualized housing stabilization, safety planning, and economic support conversations into ongoing service delivery, recognizing the complex barriers survivors face related to employment and income growth.

These efforts reflect our commitment to continuous improvement while maintaining immediate access to safe shelter and stabilization services for survivors in crisis.

## Timeline for Improvement

Provide a clear timeline outlining the steps you plan to take to bring the project into compliance with the minimum performance standards.

- *Identify any milestones or specific dates by which key actions or improvements are expected.*

Given the short-term and crisis-focused nature of the ED Shelter Project, improvement efforts during the remaining project period will focus on strengthening resource connections, data accuracy, and survivor stabilization services.

- **Ongoing through project end:** Continue enhanced referrals to employment, education, public benefits, and housing resources through survivor-centered case management and advocacy services.
- **September 2026:** Host a second agency resource fair to connect survivors with workforce programs, educational opportunities, public benefits, and community support services.
- **Ongoing:** Continue refining data workflows and internal tracking practices following the division of shelter services into separate ES Shelter and ED projects to improve reporting accuracy and consistency.

These efforts reflect our commitment to continuous improvement while maintaining immediate access to safe shelter and crisis stabilization services for survivors and families.

## Additional Support or Resources Needed

Identify any resources, support, or assistance you may need to improve performance (e.g., additional funding, technical assistance, increased staffing, etc.).

- *If applicable, provide recommendations for how the program or system could be better supported at a local, regional, or state level to achieve success.*

We continue to recommend a City-facilitated DV provider workgroup to support collaboration around survivor-centered housing strategies, performance measures, and crisis response needs. Additional access to supportive housing, childcare resources, and flexible financial assistance would further strengthen long-term stabilization outcomes for survivors and families.

