

Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.
2. Ensuring all questions are answered completely.
3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.
4. Ensuring all imported responses in the application are fully reviewed and updated as needed.
5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.
6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.

- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.

- All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click [here](#).

1A. Continuum of Care (CoC) Identification

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: MI-506 - Grand Rapids, Wyoming/Kent County CoC

1A-2. Collaborative Applicant Name: Heart of West Michigan United Way

1A-3. CoC Designation: CA

1A-4. HMIS Lead: The Salvation Army

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organization(s) and/or person(s) that participate in CoC meetings. Using the drop-down boxes, indicate if the organization(s) and/or person(s): (1) participate in CoC meetings; and (2) vote, including selection of CoC Board members. Responses should be for the period from 5/1/16 to 4/30/17.

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	No
Local Jail(s)	No	No
Hospital(s)	Yes	No
EMT/Crisis Response Team(s)	No	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Other:(limit 50 characters)		

Applicant must select Yes, No or Not Applicable for all of the listed organization/person categories in 1B-1.

1B-1a. Describe the specific strategy(s) the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness. (limit 1000 characters)

Bi-monthly CoC meetings are open to the public and all attendees are invited to speak on any topic on the agenda, as well as an open agenda item at the end of each meeting. Following meetings, attendees are surveyed on whether they felt comfortable to speak at the meeting and ideas for improvement of future meetings. This is reviewed by CoC staff and incorporated into future meetings. During the Strategic Plan times of the CoC, public meeting times are announced in advance and all are invited to give input on the plan goals and objectives during the process. The final plan is voted on by all CoC members. Membership is free and open to any agencies, governments, businesses or individuals who are or have been homeless. All committee agendas and minutes are available on the CoC website and the meetings are open to anyone who may wish to attend. Steering Council meetings have two public comment times on every meeting agenda, which have been put to use by non-Steering Council members.

1B-2. Describe the CoC's open invitation process for soliciting new members, including any special outreach. (limit 1000 characters)

The CoC is clear that new members are always welcome to join the CoC with membership information having prominent placement on the website. Annually there is a concerted effort to recruit new members with public posting, email, and personal appeals to agencies identified as having particular import. The CoC Executive Committee recommends entities that have not been members in the past and should have special invitations extended to them. To ensure that homeless or formerly homeless persons are engaged in the leadership of the CoC, a transportation stipend is provided to Steering Council members in either a monthly bus pass or a gas card of equal value. CoC Staff meets regularly with formerly homeless Steering members to explain upcoming agenda items and identify other areas of involvement (PIT Count, website blogs, etc). Finally, agencies that do not wish to become voting members are still engaged in specialized committees such as Outreach and can participate to the extent they wish.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must

**include the date(s) the CoC made publicly knowing they were open to proposals.
(limit 1000 characters)**

The local application process opened on August 4, 2017 and all interested organizations were welcome to apply for funding. The applications were distributed via email to >100 CoC members and community partners and posted on the CoC website. It was also shared on social media via the CoC's Facebook page. The Facebook announcement reached an additional 233 people. The local application includes a document with directions for applicants and links to HUD created instructions on completing eSnaps applications as well as threshold requirements all entities must pass. A scorecard for the applications is also included so all applicants are clear on the scoring criteria that will be considered. Finally, the CoC hosted a meeting on August 7, 2017 for all interested applicants to attend and ask questions about the application. This year, an applicant new to HUD funding attended the meeting and submitted a new project application that was considered and rated by the Funding Review committee.

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Using the chart below, identify the Federal, State, Local, Private and Other organizations that serve homeless individuals, families, unaccompanied youth, persons who are fleeing domestic violence, or those at risk of homelessness that are included in the CoCs coordination; planning and operation of projects. Only select "Not Applicable" if the funding source(s) do not exist in the CoC's geographic area.

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	No
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

1C-2. Describe how the CoC actively consults with Emergency Solutions Grant (ESG) recipient's in the planning and allocation of ESG funds. Include in the response: (1) the interactions that occur between the CoC and the ESG Recipients in the planning and allocation of funds; (2) the CoCs participation in the local Consolidated Plan jurisdiction(s) process by providing Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions; and (3) how the CoC ensures local homelessness information is clearly communicated and addressed in Consolidated Plan updates. (limit 1000 characters)

The City of Grand Rapids is the only local jurisdiction receiving ESG funds at this time. They work with the CoC Funding Review committee to review the outcomes of current and past awardees according to the locally established

performance standards of the CoC. The City of Grand Rapids consults the CoC Funding Review committee in award decisions and takes the funding recommendations of the CoC to their Board of Commissioners for final approval. The CoC also works with the City of Grand Rapids to provide data for the CAPER report and provides PIT and HMIS data regularly. In the last Consolidated Plan update, the consortia of jurisdictions working on the plan together hired consultants that held focus groups with CoC members to inform the plan.

1C-3. CoCs must demonstrate the local efforts to address the unique needs of persons, and their families, fleeing domestic violence that includes access to housing and services that prioritizes safety and confidentiality of program participants. (limit 1000 characters)

Whether or not Domestic Violence is the direct cause of a current episode of homelessness, the CoC recognizes it is critical to address this experience through a trauma-informed perspective and to quickly establish safety. The Coordinated Entry entity accomplishes this by screening for DV early in the process, using language advised by DV service providers. If DV is identified, the household is connected with DV service providers for further risk assessment and safety planning, as needed. Based on the assessment and level of risk, several outcomes are possible: Entry into emergency domestic violence shelter, entry into DV-specific transitional housing, a housing/safety plan that utilizes the survivor’s natural resources, or referral to general housing resources with wrap-around DV supportive services offered. Those fleeing DV are able to access housing and services that are DV specific (DOJ funded) as well as general housing and services funded by CoC Program, ESG, and DHHS.

1C-3a. CoCs must describe the following: (1) how regular training is provided to CoC providers and operators of coordinated entry processes that addresses best practices in serving survivors of domestic violence; (2) how the CoC uses statistics and other available data about domestic violence, including aggregate data from comparable databases, as appropriate, to assess the scope of community needs related to domestic violence and homelessness; and (3) the CoC safety and planning protocols and how they are included in the coordinated assessment. (limit 1,000 characters)

Coordinated Entry (CE) engages with DV service providers on a quarterly basis (at minimum) to discuss CE needs for those experiencing DV. This collaboration has also identified and committed to supporting training needs for CE staff on DV. Three times each year, the YWCA West Central Michigan provides training to community partners on the dynamics of domestic and sexual violence and how to respond to and support survivors. DV providers maintain statistical data on survivors utilizing emergency shelter (ES) and transitional housing. This data is provided on an aggregate level and client level in a de-identified format to the CoC for determining community need and strategy. At CE a safety screening assesses for immediate safety needs, if any is identified, an immediate referral to a DV provider is made to create a safety plan and access DV ES. When survivors have initial contact with a DV provider seeking shelter mainstream housing resources may still be accessed.

1C-4. Using the chart provided, for each of the Public Housing Agency’s (PHA) in the CoC’s geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA’s that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.

Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Grand Rapids Housing Commission	13.20%	Yes-HCV
Michigan State Housing Development Authority	100.00%	Yes-HCV
Kent County Housing Commission	96.00%	No
Wyoming Housing Commission	25.00%	Yes-Both
Rockford Housing Commission		

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 1000 characters)

The CoC has engaged in conversations with the largest local PHAs, Grand Rapids Housing Commission (GRHC) and the Kent County Housing Commission (KCHC), to discuss the benefits of instituting a homeless preference, and CoC Staff presented to the KCHC Board to this effect. The KCHC has begun researching ways to include a homeless preference for their vouchers. The CoC has also worked with the Michigan State Housing and Development Authority (MSHDA) in their continuing practice of a general homeless preference. MSHDA has been working with HUD to create a process that could allow other PHAs to use the waiting list infrastructure they have already developed to ease the difficulty of instituting a homeless preference.

1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy. (limit 1000 characters)

Upon the release from HUD of the Equal Access Rule in 2016, the CoC included these materials in the October CoC Meeting, reviewed the information contained in the rule and the training materials created by HUD and encouraged each agency to use the materials in trainings within their agencies. The Coordinated Entry organization conducted a staff wide training with these materials shortly after. The CoC has been involved in a community group focused on youth LGBTQ homelessness and recently began work with the True Colors Fund as a selected community to end LGBTQ youth homelessness. While all adult shelters in the community are faith-based and privately funded, these organizations have sought out additional training and have begun processes to better serve the LGBT population. The CoC implemented a CoC-wide anti-discrimination policy in August 2016.

1C-6. Criminalization: Select the specific strategies implemented by the CoC to prevent the criminalization of homelessness in the CoC’s geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Discharge Planning-State and Local: Select from the list provided, the systems of care the CoC coordinates with and assists in state and local discharge planning efforts to ensure those who are discharged from that system of care are not released directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>
Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1D-1a. If the applicant did not check all the boxes in 1D-1, provide: (1) an explanation of the reason(s) the CoC does not have a discharge policy in place for the system of care; and (2) provide the actions the CoC is taking or plans to take to coordinate with or assist the State and local discharge planning efforts to ensure persons are not discharged to the street, emergency shelters, or other homeless assistance programs. (limit 1000 characters)

1D-2. Discharge Planning: Select the system(s) of care within the CoC’s geographic area the CoC actively coordinates with to ensure persons who have resided in any of the institutions listed below longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply.

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>

Mental Health Care:	<input checked="" type="checkbox"/>
Correctional Facilities:	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1E. Continuum of Care (CoC) Project Review, Ranking, and Selection

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1E-1. Using the drop-down menu, select the appropriate response(s) that demonstrate the process the CoC used to rank and select project applications in the FY 2017 CoC Program Competition which included (1) the use of objective criteria; (2) at least one factor related to achieving positive housing outcomes; and (3) included a specific method for evaluating projects submitted by victim service providers.

Attachment Required: Public posting of documentation that supports the process the CoC used to rank and select project application.

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	Yes

1E-2. Severity of Needs and Vulnerabilities

CoCs must provide the extent the CoC considered the severity of needs and vulnerabilities experienced by program participants in their project ranking and selection process. Describe: (1) the specific vulnerabilities the CoC considered; and (2) how the CoC takes these vulnerabilities into account during the ranking and selection process. (See the CoC Application Detailed Instructions for examples of severity of needs and vulnerabilities.)
(limit 1000 characters)

This year the CoC updated the specific vulnerabilities considered in the rating process, using criteria in the HUD Rating and Ranking tool as a guide. The specific areas scored were: chronically homeless, two or more disabilities, and zero income at entry. The extent to which projects are serving hard to serve populations was weighted at 24% of the total points allowable, second only to project performance. The CoC works to ensure that projects are incentivized to house the households that coordinated entry has identified as the most vulnerable in the community.

1E-3. Using the following checklist, select: (1) how the CoC made publicly

available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

Attachment Required: Documentation demonstrating the objective ranking and selections process and the final version of the completed CoC Consolidated Application, including the CoC Application with attachments, Priority Listing with reallocation forms and all project applications that were accepted and ranked, or rejected (new and renewal) was made publicly available. Attachments must clearly show the date the documents were publicly posted.

Public Posting	
CoC or other Website	<input checked="" type="checkbox"/>
Email	<input checked="" type="checkbox"/>
Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input checked="" type="checkbox"/>

1E-4. Reallocation: Applicants must demonstrate the ability to reallocate lower performing projects to create new, higher performing projects. CoC’s may choose from one of the following two options below to answer this question. You do not need to provide an answer for both.

Option 1: The CoC actively encourages new and existing providers to apply for new projects through reallocation.

Attachment Required - Option 1: Documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC’s ARD between FY 2013 and FY 2017 CoC Program Competitions.

No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 1

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps. 08/28/2017

Attachment Required: Copies of the written notification to project applicant(s) that their project application(s) were rejected. Where a project application is being rejected or reduced, the CoC must indicate the reason(s) for the rejection or reduction.

1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps. 08/28/2017

Attachment Required: Copies of the written notification to project applicant(s) their project application(s) were accepted and ranked on the Priority listing.

Reallocation Supporting Documentation

Attachment Required - provide documentation that shows the CoC actively encouraged new and existing providers to apply for new projects through reallocation.

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No		

Attachment Details

Document Description:

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Does the CoC have in place a Governance Charter or other written documentation (e.g., MOU/MOA) that outlines the roles and responsibilities of the CoC and HMIS Lead? Yes

Attachment Required: If "Yes" is selected, a copy of the sections of the Governance Charter, or MOU/MOA addressing the roles and responsibilities of the CoC and HMIS Lead.

2A-1a. Provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA. 1-2 of Joint Charter, 2 of Governance Charter

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? Attachment Required: If the response was "Yes", attach a copy of the HMIS Policies and Procedures Manual. Yes

2A-3. What is the name of the HMIS software vendor? Mediware

2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area. Statewide HMIS (multiple CoC)

2A-5. Per the 2017 HIC use the following chart to indicate the number of beds in the 2017 HIC and in HMIS for each project type within the CoC. If a particular project type does not exist in the CoC then enter "0" for all cells

in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	672	53	619	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	206	116	90	100.00%
Rapid Re-Housing (RRH) beds	274	0	274	100.00%
Permanent Supportive Housing (PSH) beds	890	0	890	100.00%
Other Permanent Housing (OPH) beds	142	0	142	100.00%

2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months.

(limit 1000 characters)

NA

2A-6. Annual Housing Assessment Report (AHAR) Submission: How many Annual Housing Assessment Report (AHAR) tables were accepted and used in the 2016 AHAR? 12

2A-7. Enter the date the CoC submitted the 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). 05/05/2017
(mm/dd/yyyy)

2B. Continuum of Care (CoC) Point-in-Time Count

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Indicate the date of the CoC's 2017 PIT count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception. 01/25/2017

2B-2. Enter the date the CoC submitted the PIT count data in HDX. (mm/dd/yyyy) 05/05/2017

2C. Continuum of Care (CoC) Point-in-Time (PIT) Count: Methodologies

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Describe any change in the CoC’s sheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specifically, how those changes impacted the CoCs sheltered PIT count results. (limit 1000 characters)

Supplemental PIT night surveys were conducted by volunteers and staff at the largest community shelter in order to verify and update HMIS data and collect additional information to help determine housing needs and qualification for resources.

2C-2. Did your CoC change its provider coverage in the 2017 sheltered count? No

2C-2a. If “Yes” was selected in 2C-2, enter the change in provider coverage in the 2017 sheltered PIT count, including the number of beds added or removed due to the change.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-3. Did your CoC add or remove emergency shelter, transitional housing, or Safe-Haven inventory because of funding specific to a Presidentially declared disaster resulting in a change to the CoC's 2017 sheltered PIT count? No

2C-3a. If "Yes" was selected in 2C-3, enter the number of beds that were added or removed in 2017 because of a Presidentially declared disaster.

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017? Yes

CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.

2C-4a. Describe any change in the CoC's unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017. Specify how those changes impacted the CoC's unsheltered PIT count results. See Detailed Instructions for more information. (limit 1000 characters)

Changes included more intense focus on youth through existing outreach staff, greater reliance on relevant government department staff (Downtown Ambassadors, parking services, county parks department, municipal police and county sheriff). Also new this year, Coordinated Entry staff worked to identify persons who reported being unsheltered on PIT count night during intakes over the following three days.

2C-5. Did the CoC implement specific measures to identify youth in their PIT count? Yes

2C-5a. If "Yes" was selected in 2C-5, describe the specific measures the CoC; (1) took to identify homeless youth in the PIT count; (2) during the planning process, how stakeholders that serve homeless youth were engaged; (3) how homeless youth were engaged/involved; and (4) how the CoC worked with stakeholders to select locations where homeless youth are most likely to be identified. (limit 1000 characters)

Youth outreach staff were deeply engaged in planning for the unsheltered count and identified both sleeping locations for the night of the count and day-after gathering locations (food kitchens, drop-in locations) where youth were asked about their sleeping location. Outreach staff interviewed several unsheltered youth about to best ways to connect with the young people.

2C-6. Describe any actions the CoC implemented in its 2017 PIT count to better count individuals and families experiencing chronic homelessness, families with children, and Veterans experiencing homelessness. (limit 1000 characters)

Several efforts helped count persons in subpopulations, including supplemental surveys at the largest private shelter (asking about veteran status, last time housed), notification from Coordinated Entry to PIT staff (families), and information to and requests for data from McKinney-Vento school homelessness liaisons.

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**3A-1. Performance Measure: Reduction in the Number of First-Time Homeless. Describe: (1) the numerical change the CoC experienced; (2) the process the CoC used to identify risk factors of becoming homeless for the first time; (3) the strategies in place to address individuals and families at risk of becoming homeless; and (4) the organization or position that is responsible for overseeing the CoC's strategy to reduce or end the number of individuals and families experiencing homelessness for the first time.
(limit 1000 characters)**

The number of first time homeless increased this year, but their percentage of homeless entries remained the same. A major factor to this is the area's fast population growth (1%) without corresponding increases in housing options, with vacancy rates reaching as low as 1.6%. The CoC saw many people becoming homeless for the first time were priced out of rapidly increasing rentals; with a 9.4% increase in rents from 2015-2016. In response, the CoC has been involved in local efforts to increase affordable housing access and increase resources for eviction prevention, including the expansion of eviction prevention programs within the local District Courts after reviewing the favorable outcomes of the first program implemented. The CoC coordinates closely with the Essential Needs Task Force within the county which coordinates systems of care for workforce development, food access, utility and weatherization, and transportation. The Steering Council is responsible with staff support.

**3A-2. Performance Measure: Length-of-Time Homeless. CoC 's must demonstrate how they reduce the length-of-time for individuals and families remaining homeless. Describe (1) the numerical change the CoC experienced; (2) the actions the CoC has implemented to reduce the length-of-time individuals and families remain homeless; (3) how the CoC identifies and houses individuals and families with the longest length-of-time homeless; and (4) identify the organization or position that is responsible for overseeing the CoC's strategy to reduce the length-of-time individuals and families remain homeless.
(limit 1000 characters)**

The average and median length of time homeless decreased from 2015 to 2016. This took extraordinary work on the part of housing project staff in the face of a difficult housing market. Strategies that the CoC has used to more rapidly house individuals and families include methods of increasing access to supports in the housing search process. The CoC has also worked to focus

outreach to those households who have been identified as being homeless the longest through partnerships between coordinated entry and the local mission. The CoC uses a prioritization process for housing which considers length of time homeless, as well as follows the Chronic Homeless Order of Priority, working to ensure that those longest homeless, most vulnerable households are prioritized for housing. The Steering Council of the CoC is responsible for this strategy with support of staff. Additionally there is a special Chronic Homeless committee working to end chronic homelessness.

3A-3. Performance Measures: Successful Permanent Housing Placement and Retention

Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC’s strategy for retention of, or placement in permanent housing. (limit 1000 characters)

The CoC experienced very little change in exits to or retention of permanent housing between 2015 and 2016, which measures moving only 1% in either direction. The CoC strategy underway to improve performance on this metric is to study performance across the projects to determine those that are seeing positive outcomes, study what has contributed to those outcomes and seek to use these lessons to improve performance across other projects. The Steering Council is ultimately responsible for this strategy, and it has support from CoC staff and the Data Analysis committee.

3A-4. Performance Measure: Returns to Homelessness.

Describe: (1) the numerical change the CoC experienced, (2) what strategies the CoC implemented to identify individuals and families who return to homelessness, (3) the strategies the CoC will use to reduce additional returns to homelessness, and (4) the organization or position responsible for overseeing the CoC’s efforts to reduce the rate of individuals and families’ returns to homelessness. (limit 1000 characters)

The CoC saw small increases to returns to homelessness in emergency shelter and permanent housing between 2015 and 2016, but in this timeframe it also saw much larger decreases in both exits from street outreach and transitional housing. This change reflects the CoCs push in this time to reduce the number of transitional housing projects to only those that were high performing and reflects the work of the CoC to better utilize and integrate street outreach with the coordinated entry process. Most recently, the CoC identified that certain projects had a more difficult time preventing returns to homelessness due to project design, and worked with the projects to change design, or reallocated funds to different projects. With these improvements implemented, the next strategy will be to reduce unsuccessful exits from permanent housing. This strategy resides with the Steering Council for overall guidance, but is supported by CoC staff and the Data Analysis committee.

3A-5. Performance Measures: Job and Income Growth

Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC’s strategy to increase job and income growth from employment, non-employment including mainstream benefits. (limit 1000 characters)

In order to increase access to employment and mainstream benefits the CoC has coordinated closely with the county’s Essential Needs Task Force (ENTF) and its Workforce Development committee. This committee is similar in structure to the CoC and coordinates the efforts of all the employment focused services. Through this group, the largest RRH provider has been able to begin efforts at a pilot “Employment First” project that will first match those in CoC and ESG funded housing projects with employment while the employment service providers will then provide supportive services to help keep that person employed. Additionally, most housing service providers are MI Bridges sites, able to enroll consumers for mainstream benefits in their offices. The responsible entity for this outcome measure is the Steering Council, and this outcome has support from CoC Staff, ENTF Staff and the Data Analysis committee.

3A-6. Did the CoC completely exclude a geographic area from the most recent PIT count (i.e. no one counted there, and for communities using samples in the area that was excluded from both the sample and extrapolation) where the CoC determined there were no unsheltered homeless people, including areas that are uninhabitable (deserts, forests). No

3A.6a. If the response to 3A-6 was “Yes”, what was the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoCs unsheltered PIT count? (limit 1000 characters)

NA

3A-7. Enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2016. (mm/dd/yyyy) 06/05/2017

3B. Continuum of Care (CoC) Performance and Strategic Planning Objectives

Instructions

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3B-1. Compare the total number of PSH beds, CoC program and non CoC-program funded, that were identified as dedicated for yes by chronically homeless persons in the 2017 HIC, as compared to those identified in the 2016 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	282	388	106

3B-1.1. In the box below: (1) "total number of Dedicated PLUS Beds" provide the total number of beds in the Project Allocation(s) that are designated ad Dedicated PLUS beds; and (2) in the box below "total number of beds dedicated to the chronically homeless:, provide the total number of beds in the Project Application(s) that are designated for the chronically homeless. This does not include those that were identified in (1) above as Dedicated PLUS Beds.

Total number of beds dedicated as Dedicated Plus	
Total number of beds dedicated to individuals and families experiencing chronic homelessness	
Total	0

3B-1.2. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH projects as described in Notice CPD-16-11: Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing. Yes

3B-2.1. Using the following chart, check each box to indicate the factor(s) the CoC currently uses to prioritize households with children based on need during the FY 2017 Fiscal Year.

History of or Vulnerability to Victimization	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>

Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder)	<input type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

3B-2.2. Describe: (1) the CoCs current strategy and timeframe for rapidly rehousing every household of families with children within 30 days of becoming homeless; and (2) the organization or position responsible for overseeing the CoC’s strategy to rapidly rehouse families with children within 30 days of becoming homeless. (limit 1000 characters)

The CoC strategy to rehouse households with children consists of two phases. The first is to assess the household’s level of need, prioritize the household for assistance based on level of vulnerability and refer the household to an appropriate resource as quickly as one is available. The second phase begins immediately after a resource is identified and chosen by the household. Upon receiving the referral, the provider begins work with the household to quickly identify housing. Another facet of this strategy has been to use a variety of diverse funding sources to increase the amount of RRH available in the community. The CoC has access to RRH using HOME funds from the three IJs that receive them, as well as private donations. This strategy, while needing continual vigilance, has proven effective in the community. The Steering Council, through the work of CoC Staff and the Data Analysis committee monitors the effectiveness and makes recommendations for changes as necessary.

3B-2.3. Compare the number of RRH units available to serve families from the 2016 and 2017 HIC.

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	236	274	38

3B-2.4. Describe the actions the CoC is taking to ensure emergency shelters, transitional housing, and permanent supportive housing (PSH and RRH) providers within the CoC adhere to anti-discrimination policies by not denying admission to, or separating any family members from other members of their family or caregivers based on age, sex, gender, LGBT status, marital status or disability when entering a shelter or Housing. (limit 1000 characters)

The CoC created a new Non-Discrimination Policy in August 2016 that prohibits discrimination by family makeup, gender identity or expression, marital status, disability or age. All agencies receiving funding through the CoC funding review process must abide by this policy. The coordinated entry process will not screen

households out of referrals based upon any discriminatory criteria.

3B-2.5. From the list below, select each of the following the CoC has strategies to address the unique needs of unaccompanied homeless youth.

Human trafficking and other forms of exploitation?	Yes
LGBT youth homelessness?	Yes
Exits from foster care into homelessness?	Yes
Family reunification and community engagement?	Yes
Positive Youth Development, Trauma Informed Care, and the use of Risk and Protective Factors in assessing youth housing and service needs?	Yes

3B-2.6. From the list below, select each of the following the CoC has a strategy for prioritization of unaccompanied youth based on need.

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input checked="" type="checkbox"/>

3B-2.7. Describe: (1) the strategies used by the CoC, including securing additional funding to increase the availability of housing and services for youth experiencing homelessness, especially those experiencing unsheltered homelessness; (2) provide evidence the strategies that have been implemented are effective at ending youth homelessness; (3) the measure(s) the CoC is using to calculate the effectiveness of the strategies; and (4) why the CoC believes the measure(s) used is an appropriate way to determine the effectiveness of the CoC’s efforts. (limit 1500 characters)

The CoC has been working diligently at improving resources available to address youth homelessness through a youth homelessness CoC committee that is receiving HUD contracted TA and a community group formed to end LGBTQ youth homelessness that is receiving TA from the True Colors Fund. Through focus groups conducted as part of this effort, the community learned that youth would especially benefit from the new TH-RRH model HUD offered, and the youth dedicated RRH project reallocated to change to this new component type. Additional strategies being developed in these coordinated groups are working with the faith community and schools to prevent youth homelessness and increasing collaboration across systems (juvenile justice, foster care, etc). A targeted goal of the groups is to apply for funding from private sources for collaborative projects serving youth. These activities have been selected based on recommendations from national TA providers and best

practices.

3B-2.8. Describe: (1) How the CoC collaborates with youth education providers, including McKinney-Vento local educational authorities and school districts; (2) the formal partnerships the CoC has with these entities; and (3) the policies and procedures, if any, that have been adopted to inform individuals and families who become homeless of their eligibility for educational services. (limit 1000 characters)

The McKinney-Vento district leader is an active member of the CoC, participating in many committees, and has signed on as a formal member of the CoC. CoC staff meet at least annually with school liaisons to explain the system and process for addressing homeless families and youth. The CoC has adopted a policy regarding homeless youth and their educational service eligibility and each agency has a process for ensuring that youth are properly connected with these services. Housing providers and emergency shelter providers connect with school liaisons regularly.

3B-2.9. Does the CoC have any written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select “Yes” or “No”.

	MOU/MOA	Other Formal Agreement
Early Childhood Providers	No	No
Head Start	No	No
Early Head Start	No	No
Child Care and Development Fund	No	No
Federal Home Visiting Program	No	No
Healthy Start	No	No
Public Pre-K	No	No
Birth to 3	No	No
Tribal Home Visiting Program	No	No
Other: (limit 50 characters)		
KConnect: early life collective impact org	No	Yes

3B-3.1. Provide the actions the CoC has taken to identify, assess, and refer homeless Veterans who are eligible for Veterans Affairs services and housing to appropriate resources such as HUD-VASH and Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD). (limit 1000 characters)

Through the work of the ending Veteran homelessness committee, specific strategies were put into place to ensure that the community accurately identified all Veterans who were homeless through a by name list. Veteran specific outreach teams were developed that included Coordinated Entry, VA, and housing provider agency staff to make certain that outreach efforts were

comprehensive, covered a full geographic area, and included multiple settings. The outreach teams worked in coordination to quickly identify, assess, and refer homeless Veterans to VA and housing services to ensure that homelessness was rare and brief. Coordinated Entry actively partners with the VA through collaborations with SSVF and GPD service providers to ensure that Veterans are able to receive the most comprehensive and equitable access to housing resources. The community has sought and secured USICH recognition for reaching functional zero and continues to work to maintain this achievement.

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC? Yes

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness? Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran is assisted to quickly move into permanent housing using a Housing First approach? Yes

4A. Continuum of Care (CoC) Accessing Mainstream Benefits and Additional Policies

Instructions:

For guidance on completing this application, please reference the FY 2017 CoC Application Detailed Instructions and the FY 2017 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Select from the drop-down (1) each type of healthcare organization the CoC assists program participants with enrolling in health insurance, and (2) if the CoC provides assistance with the effective utilization of Medicaid and other benefits.

Type of Health Care	Yes/No	Assist with Utilization of Benefits?
Public Health Care Benefits (State or Federal benefits, e.g. Medicaid, Indian Health Services)	Yes	Yes
Private Insurers:	Yes	Yes
Non-Profit, Philanthropic:	No	No
Other: (limit 50 characters)		

4A-1a. Mainstream Benefits

CoC program funded projects must be able to demonstrate they supplement CoC Program funds from other public and private resources, including: (1) how the CoC works with mainstream programs that assist homeless program participants in applying for and receiving mainstream benefits; (2) how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for homeless program participants (e.g. Food Stamps, SSI, TANF, substance abuse programs); and (3) identify the organization or position that is responsible for overseeing the CoCs strategy for mainstream benefits. (limit 1000 characters)

The CoC maintains partnerships with health care navigator projects through Priority Health and Health Net of West Michigan to ensure consumers are connected to assistance in Medicaid and ACA enrollment. The CoC works closely with the Department of Health and Human Services to ensure quick and easy access to mainstream benefit enrollment within the housing crisis response system. As changes to the mainstream benefits occur, the CoC ensures that all providers have access to information regarding the changes, such as this year changes to Food Stamp access that would no longer waive adults without disabilities from proving they've looked for work. The CoC brought in a presenter to share the information and answer questions about the changes. These updates are the responsibility of CoC Staff and included within the CoC Strategic Plan.

4A-2. Low Barrier: Based on the CoCs FY 2017 new and renewal project applications, what percentage of Permanent Housing (PSH) and Rapid Rehousing (RRH), Transitional Housing (TH), Safe-Haven, and SSO (Supportive Services Only-non-coordinated entry) projects in the CoC are low-barrier?

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	0.00%

4A-3. Housing First: What percentage of CoC Program Funded PSH, RRH, SSO (non-coordinated entry), safe-haven and Transitional Housing; FY 2017 projects have adopted the Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	0.00%

4A-4. Street Outreach: Describe (1) the CoC's outreach and if it covers 100 percent of the CoC's geographic area; (2) how often street outreach is conducted; and (3) how the CoC has tailored its street outreach to those that are least likely to request assistance. (limit 1000 characters)

The CoC has active and collaborative outreach throughout the geographic area. The CoC coordinates a monthly meeting of agencies conducting outreach to homeless populations throughout the county. Although each agency has its own particular objective in its outreach efforts, all coordinate to ensure persons are connected to coordinated entry for housing resources. These groups target specific populations and situations for those who are less likely to seek out assistance: youth, people with mental health disorders and people choosing not to engage in services that are the general path for people to connect to housing resources.

4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach.
Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency.

(limit 1000 characters)

The CoC works to ensure that 24 CFR 578.93 is promoted through including equal housing opportunity language on websites and postings of housing providers and coordinated entry. Staff across the system have engaged in continual training from the Fair Housing Center and the Fair Housing Center staff are CoC members that serve on both Funding Review and Coordinated Assessment Committees. The CoC members engage with organizations such as the Hispanic Center, Disability Advocates, and the Association for the Blind and Visually Impaired. Providers work to make units in projects accessible with Braille and barrier free units. The Coordinated Entry has a Language Access Plan for staff working with persons who are Limited English Proficient. The plan ensures that Coordinated Entry will provide timely and professional translation/interpreting services including strategies for working with households who are deaf and for individuals that have other communication needs.

4A-6. Compare the number of RRH beds available to serve populations from the 2016 and 2017 HIC.

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	236	274	38

4A-7. Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4A-8. Is the CoC requesting to designate one or more SSO or TH projects to serve homeless households with children and youth defined as homeless under other Federal statutes who are unstably housed (paragraph 3 of the definition of homeless found at 24 CFR 578.3). No

4B. Attachments

Instructions:

Multiple files may be attached as a single .zip file. For instructions on how to use .zip files, a reference document is available on the e-snaps training site:
<https://www.hudexchange.info/resource/3118/creating-a-zip-file-and-capturing-a-screenshot-resource>

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes		
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes		
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes		
05. CoCs Process for Reallocating	Yes		
06. CoC's Governance Charter	Yes		
07. HMIS Policy and Procedures Manual	Yes		
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes		
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
11. CoC Written Standards for Order of Priority	No		
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes		
14. Other	No		
15. Other	No		

Attachment Details

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Submission Summary

Ensure that the Project Priority List is complete prior to submitting.

Page	Last Updated
1A. Identification	09/12/2017
1B. Engagement	09/12/2017
1C. Coordination	09/12/2017
1D. Discharge Planning	09/12/2017
1E. Project Review	09/12/2017
1F. Reallocation Supporting Documentation	No Input Required
2A. HMIS Implementation	08/30/2017
2B. PIT Count	08/30/2017
2C. Sheltered Data - Methods	08/30/2017
3A. System Performance	09/12/2017
3B. Performance and Strategic Planning	Please Complete

4A. Mainstream Benefits and Additional Policies	Please Complete
4B. Attachments	Please Complete
Submission Summary	No Input Required