

## **Before Starting the CoC Application**

The CoC Consolidated Application consists of three parts, the CoC Application, the CoC Priority Listing, and all the CoC's project applications that were either approved and ranked, or rejected. All three must be submitted for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for reviewing the following:

1. The FY 2018 CoC Program Competition Notice of Funding Available (NOFA) for specific application and program requirements.
2. The FY 2018 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.
6. Questions marked with an asterisk (\*), which are mandatory and require a response.

## **1A. Continuum of Care (CoC) Identification**

### **Instructions:**

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 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 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1B-1. CoC Meeting Participants.** For the period from May 1, 2017 to April 30, 2018, using the list below, applicant must: (1) select organizations and persons that participate in CoC meetings; and (2) indicate whether the organizations and persons vote, including selecting CoC Board members.

Organization/Person Categories	Participates in CoC Meetings	Votes, including selecting 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
EMS/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
Mental Illness Advocates	Yes	Yes
Substance Abuse Advocates	Yes	Yes

Other:(limit 50 characters)		
N/A	Not Applicable	No

**1B-1a. Applicants must describe the specific strategy the CoC uses to solicit and consider opinions from organizations and/or persons that have an interest in preventing or ending homelessness.  
(limit 2,000 characters)**

Full CoC membership meetings are held every two months and are open to the public. All attendees are invited to publicly comment on any item on the agenda, and time is set aside on the agenda for new items to be considered. The CoC's Steering Council (leadership board) meetings, held on a monthly basis, are also open to the public and include time for public comment. CoC Executive Committee (officers of Steering Council) members review comments and input received at full membership and Steering Council meetings and make recommendations on how to address this feedback to the full CoC membership. All meetings and times/dates/locations are posted on the CoC's website and sent to the body's email list.

CoC members and staff work to expand relationships and awareness of efforts to prevent and end homelessness across the CoC's full geographic area. During the development of the CoC's Strategic Plan, public meeting times are announced on the CoC's website and through the body's email list, and community members are recruited to give input on goals and objectives during the process. CoC staff also give presentations and hold informational meetings, where individuals and organizations with knowledge of or a vested interest in preventing or ending homelessness are personally invited to attend CoC meetings, join the CoC, and present their opinions to the CoC membership. Committee agendas and minutes are distributed at committee meetings and are available on the CoC's website or upon request. Full membership meetings and the Steering Council meetings regularly include presentations from community members regarding new initiatives and topics that align with the community's efforts around ending homelessness.

**1B-2.Open Invitation for New Members. Applicants must describe:**

- (1) the invitation process;**
  - (2) how the CoC communicates the invitation process to solicit new members;**
  - (3) how often the CoC solicits new members; and**
  - (4) any special outreach the CoC conducted to ensure persons experiencing homelessness or formerly homeless persons are encouraged to join the CoC.**
- (limit 2,000 characters)**

(1) CoC staff and members are actively engaged in inviting new community members from the geographic area to join the CoC throughout the year. This is accomplished through presentations at community meetings and individual solicitations to agency representatives. Membership information is also detailed



on the CoC website and is available via link on the CoC's Facebook page. Membership is free and open to representatives from the nonprofit sector, government, and business, as well as community residents with a vested interest in ending homelessness, including individuals who are experiencing or have experienced homelessness.

(2-3) The CoC conducts an annual effort to recruit new members via email, public postings on the CoC website and social media pages, and personal appeals to organizations and individuals involved in working to end homelessness in Kent County.

(4) CoC members actively recruit individuals who are experiencing or have experienced homelessness to join the CoC. The CoC provides a transportation stipend in the form of a monthly bus pass or a gas card of equal value to members of the Steering Council who are currently experiencing or have experienced homelessness. CoC staff also meet regularly with formerly homeless members of the Steering Council to provide context on upcoming agenda items and help facilitate their active involvement in the body. The CoC has also recently developed and seated a Youth Action Board comprised of youth who have experienced or are currently experiencing homelessness, which provides input and assistance with planning and outreach efforts focused on ending youth homelessness. Additional population-specific action boards are being currently being developed, including a Veterans Action Board; a representative from each board will have one voting seat on the Steering Council starting in FY 2018.

**1B-3.Public Notification for Proposals from Organizations Not Previously Funded. Applicants must describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding, even if the CoC is not applying for new projects in FY 2018, and the response must include the date(s) the CoC publicly announced it was open to proposals.  
(limit 2,000 characters)**

The local application process opened on July 27, 2018 to all interested organizations. The local application RFP and all application documents (including the application and scorecard for new/bonus/domestic violence projects) were distributed via email to the full CoC membership and were posted on the CoC website on this date. The email and website postings both specifically mentioned that the CoC was accepting new, bonus, and domestic violence project applications from all interested and qualified parties. A link to the local application documents was also posted to the CoC's Facebook page on the date of their release (July 27, 2018), reaching an additional 244 users.

The local application RFP included directions for new, bonus, DV bonus, and renewal applicants, as well as links to HUD-created instructions for completing e-snaps applications and meeting threshold requirements. The RFP included a contact email for questions on the application and a "Question and Answer" page was set up on the CoC's website to make all questions and responses available for interested applicants to review.

## 1C. Continuum of Care (CoC) Coordination

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1C-1. CoCs Coordination, Planning, and Operation of Projects. Applicants must use the chart below to identify the federal, state, local, private, and other organizations that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness that are included in the CoCs coordination, planning, and operation of projects.**

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
Funding Collaboratives	Yes
Private Foundations	Yes
Housing and services programs funded through U.S. Department of Justice (DOJ) Funded Housing and Service Programs	Yes
Housing and services programs funded through U.S. Health and Human Services (HHS) Funded Housing and Service Programs	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and services programs funded through State Government	Yes
Housing and services programs funded through Local Government	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
	Not Applicable
	Not Applicable

**1C-2. CoC Consultation with ESG Program Recipients. Applicants must describe how the CoC:**

- (1) consulted with ESG Program recipients in planning and allocating ESG funds; and**
  - (2) participated in the evaluating and reporting performance of ESG Program recipients and subrecipients.**
- (limit 2,000 characters)**

(1) The CoC consulted with ESG program recipients in the planning and allocation of ESG funds, including the City of Grand Rapids and Heart of West Michigan United Way, the latter of which is the fiduciary for Michigan State Housing Development Authority (MSHDA) ESG funding for the community's

Coordinated Entry agency (Salvation Army Social Services of Kent County). With respect to the City of Grand Rapids, ESG funds are allocated in support of activities identified in the CoC's Strategic Plan. The CoC's Funding Review Committee reviewed responses to the City's Request for Qualifications and selected eligible service providers based on agency performance and capacity. These recommendations were approved by the CoC's Steering Council and forwarded to the Grand Rapids City Commission for consideration and approval following a requisite public comment opportunity. CoC service standards were incorporated into contractual agreements executed between the City and service providers.

With respect to ESG funding from MSHDA, CoC staff from Heart of West Michigan United Way collaborated with the Salvation Army Social Services of Kent County to submit an application for ESG funding. The CoC's Steering Council was consulted with respect to the requested budget and project components.

(2) The CoC's Steering Council regularly reviewed the the monthly ESG Financial Assistance Report that identifies the status of ESG-funded activities. CoC staff also provided the City of Grand Rapids with data for CAPER reports, PIT counts, and HMIS data as needed. CoC staff additionally worked with staff from the Salvation Army Social Services of Kent County to evaluate and report on project performance for MSHDA ESG funding, including monthly ESG Financial Assistance Reports, with periodic updates made to the CoC Steering Council.

**1C-2a. Providing PIT and HIC Data to Consolidated Plan Jurisdictions. Did the CoC provide Point-in-Time (PIT) and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area?** Yes to both

**1C-2b. Providing Other Data to Consolidated Plan Jurisdictions. Did the CoC provide local homelessness information other than PIT and HIC data to the jurisdiction(s) Consolidated Plan(s)?** Yes

**1C-3. Addressing the Safety Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors. Applicants must describe:**

(1) the CoC's protocols, including the existence of the CoC's emergency transfer plan, that prioritizes safety and trauma-informed, victim-centered services to prioritize safety; and

(2) how the CoC maximizes client choice for housing and services while ensuring safety and confidentiality.  
(limit 2,000 characters)

(1) Survivors of domestic violence, dating violence, sexual assault, and stalking may access DV services and DV-specific housing through Coordinated Entry

(CE) and directly from DV providers. The CE agency screens for DV early in the assessment process, using screening language and safety protocols developed by DV service providers in the community. If DV needs are identified, the household is offered the option of connecting with DV service providers for further risk assessment, safety planning, and emergency shelter as needed. Those requesting services directly from DV providers participate in immediate risk assessment and safety planning, and based on the assessment, are provided with services options which may include emergency shelter or a referral to CE, with the option of wrap-around DV non-residential services. DV providers and public housing agencies also maintain Emergency Transfer Plan procedures to quickly and safely transfer clients to other units or emergency shelters in the event that significant safety concerns arise. DV providers use a database that is comparable to HMIS that maintains confidentiality of client information and data.

(2) DV survivors may access housing and services that are DV-specific as well as general housing and services. Clients are provided with autonomy in selecting services based on their unique needs, preferences, and safety concerns. Based on need and risk assessment, available DV services in the community may include entry into emergency DV shelter, scheduled entry into DV-specific transitional housing, development of a housing/safety plan, or referral back to CE for general housing resources, with wrap-around DV supportive services offered. Providers prioritize serving clients who are most at risk with the least resources for assistance.

**1C-3a. Applicants must describe how the CoC coordinates with victim services providers to provide annual training to CoC area projects and Coordinated Entry staff that addresses best practices in serving survivors of domestic violence, dating violence, sexual assault, and stalking. (limit 2,000 characters)**

Domestic violence providers are voting members of the CoC and are represented on the CoC's Steering Council. DV providers attend meetings of the full CoC membership (bimonthly meetings) and CoC Steering Council (monthly meetings), where they share expertise and insights into the needs of the community's DV populations. Each year, the CoC's Steering Council invites the community's DV providers to conduct training for the larger CoC membership on best practices and trauma-informed approaches for serving survivors of domestic violence, dating violence, sexual assault, and stalking. YWCA West Central Michigan (DV provider), Safe Haven Ministries (DV provider), the Kent County Human Trafficking Task Force (coalition of local agencies focused on combatting human trafficking in the county), and DVCCRT (Domestic Violence Community Coordinated Response Team) additionally provide specialized site-specific training to membership organizations by request on these subjects.

The CE agency (Salvation Army Social Services of Kent County) engages with DV service providers on a quarterly basis at minimum to coordinate housing needs and assessment processes for those experiencing DV, including ongoing training of CE staff by DV providers. Staff from the local 2-1-1 referral service also receive training from DV providers in best practices and screening procedures. Additionally, three times each year, YWCA West Central Michigan offers a 20-hour training open to all community partners on the dynamics of

domestic and sexual violence and how to respond to and support survivors. The Salvation Army has incorporated this YWCA training as a component of its new staff orientation process for CE.

**1C-3b. Applicants must describe the data the CoC uses to assess the scope of community needs related to domestic violence, dating violence, sexual assault, and stalking, including data from a comparable database. (limit 2,000 characters)**

DV providers maintain statistical data on survivors of domestic violence, dating violence, sexual assault, and stalking utilizing emergency shelter and transitional housing, including client-level PIT count data. This data is maintained in databases with comparable rigor and confidentiality standards to HMIS. Data is provided on an aggregate and client level in a de-identified format to the CoC – including the CoC's Steering Council, Data Analysis Committee, and general member meetings – for determining community needs and strategy. Data points considered include volume of requests for shelter compared with provider capacity, exits into permanent housing from shelter and transitional housing, all APR data for transitional housing exits, and shelter length of stay.

**1C-4. DV Bonus Projects. Is your CoC Yes  
applying for DV Bonus Projects?**

**1C-4a. From the list, applicants must indicate the type(s) of DV Bonus project(s) that project applicants are applying for which the CoC is including in its Priority Listing.**

SSO Coordinated Entry	<input type="checkbox"/>
RRH	<input type="checkbox"/>
Joint TH/RRH	<input checked="" type="checkbox"/>

**1C-4b. Applicants must describe:**

- (1) how many domestic violence survivors the CoC is currently serving in the CoC's geographic area;**
  - (2) the data source the CoC used for the calculations; and**
  - (3) how the CoC collected the data.**
- (limit 2,000 characters)**

(1) In the past year, the CoC served a total of 2,443 domestic violence survivors with housing and supportive services, including adults and children, in DV services and housing.

(2) The data provided in part 1 includes individuals tracked by the county's domestic violence providers (YWCA West Central Michigan and Safe Haven Ministries) in their respective databases, as well as individuals tracked in HMIS.

(3) Data was collected during assessments with clients during the CE process or intake process for domestic violence providers.

**1C-4c. Applicants must describe:**

**(1) how many domestic violence survivors need housing or services in the CoC's geographic area;**

**(2) data source the CoC used for the calculations; and**

**(3) how the CoC collected the data.**

**(limit 2,000 characters)**

(1) Data collected this past year showed that a total of 409 DV survivor households demonstrated a need for housing in the CoC's geographic area.

(2) The calculation in part 2 is based on data collected from the county's DV providers (YWCA West Central Michigan and Safe Haven Ministries) in their respective databases. The calculation was derived from the total number of DV survivor households presenting as homeless due to seeking emergency shelter.

(3) Data was collected by DV providers during client assessments for households seeking emergency shelter.

**1C-4d. Based on questions 1C-4b. and 1C-4c., applicant must:**

**(1) describe the unmet need for housing and services for DV survivors, or if the CoC is applying for an SSO-CE project, describe how the current Coordinated Entry is inadequate to address the needs of DV survivors;**

**(2) quantify the unmet need for housing and services for DV survivors;**

**(3) describe the data source the CoC used to quantify the unmet need for housing and services for DV survivors; and**

**(4) describe how the CoC determined the unmet need for housing and services for DV survivors.**

**(limit 3,000 characters)**

(1) Kent County currently has two shelters and one transitional housing program specifically reserved for DV survivors. The county's two DV emergency shelters, YWCA West Central Michigan's Sojourner House and Safe Haven Ministries' Ramoth House, respond to the crisis needs of households identified as fleeing domestic violence through CE. These shelters accept a combined total of 210-230 households annually, but only have the capacity to accommodate less than 50 percent of the total requests for DV shelter each year. The community's DV transitional housing program, Project HEAL (through YWCA), prioritizes survivors with high safety needs and minimal access to resources, including individuals being actively stalked, harassed, or who face significant legal and child safety challenges. Due to capacity limits, Project HEAL is only able to accommodate 19 households at any given time. Additionally, over 75 percent of survivors leave DV shelter in Kent County with no permanent housing plan and without access to a housing resource; this is due to the fact emergency shelter prioritizes safety, and is not designed to provide permanent housing to clients.

(2) In the past year, a total of 361 DV households had an unmet need for housing services. Over 90 percent of DV shelter exits are to known safe environments, but only 23 percent of these exits are to permanent housing and 10 percent are to a transitional housing program. The remainder of exits are typically to family or friends' residences or motels, with no permanent housing plan in place.

(3) Unmet needs statistics were provided by YWCA West Central Michigan and Safe Haven Ministries, both of which have databases that contribute to the annual PIT count.

(4) The unmet need data described in part 2 was determined by subtracting the total number of DV survivors that exited to permanent housing from the total number of survivors that accessed DV shelter in the community. This number therefore represents the total number of DV survivors that sought housing services but did not exit to permanent housing in the community.

**1C-4e. Applicants must describe how the DV Bonus project(s) being applied for will address the unmet needs of domestic violence survivors. (limit 2,000 characters)**

The community's proposed DV Bonus project – YWCA's Project HEAL TH-RRH – is designed to meet the diverse needs of DV survivors in the community through flexible programming. Most beds/units currently available in the community for DV survivors are at emergency shelters; however, many DV survivors need a safe place to stay but do not require the security and structure provided by DV shelters. Furthermore, 75 percent of DV survivors exit shelters without access to permanent housing. Project HEAL TH-RRH will address the needs of DV survivors who do not require emergency shelter but still need access to safe housing, while providing support to help DV survivors obtain permanent housing.

Project HEAL TH-RRH will provide a flexible framework based on each participant's unique needs. The project will include safe transitional housing units if the survivor identifies this as a need. The transitional housing units will provide DV survivors with a safe place to stay as they search for permanent housing, which has been repeatedly identified as a need among DV survivors in the community. This need is underscored by recent data showing that Grand Rapids, Kent County's largest city, has the 16th lowest vacancy rate in the nation (Trulia, 2017). Survivors will then have the option of transitioning to their own identified permanent housing or utilizing the rapid rehousing component of the project. Other survivors, however, may choose to only utilize the rapid rehousing component of the project, based on their specific needs.

All survivors will receive services from a trained Housing Resource Specialist (HRS) and linkages to domestic violence services as desired by the survivor, including but not limited to connection to mainstream benefits, mental health services, safety planning, and counseling. Additionally, the project will accommodate DV survivors with and without children and prioritize DV survivors who are living in shelters or on the streets.

**1C-4f. Applicants must address the capacity of each project applicant applying for DV bonus projects to implement a DV Bonus project by describing:**

- (1) rate of housing placement of DV survivors;
- (2) rate of housing retention of DV survivors;
- (3) improvements in safety of DV survivors; and
- (4) how the project applicant addresses multiple barriers faced by DV survivors.

**(limit 4,000 characters)**

(1) Project HEAL TH-RRH will combine the expertise of YWCA West Central Michigan in serving DV survivors and Community Rebuilders in providing permanent housing, respectively. The proposed joint transitional housing/rapid rehousing project will consist of YWCA providing transitional housing and DV support services in both project components and Community Rebuilders facilitating the management of the rapid rehousing resource. On average, 80 percent of survivors using YWCA's transitional housing services exit into independent permanent housing, with the remainder often returning to safe and financially-secure options, such as the homes of parents or friends. Additionally, 88 percent of DV survivors served by Community Rebuilders' rapid rehousing programming exited to permanent housing in 2017.

(2) Among DV survivors that participated in Community Rebuilders' rapid rehousing programming, 95 percent retained permanent housing in 2017. The YWCA's transitional housing and emergency shelters do not conduct mandatory follow-up evaluations on housing retention due to safety issues in contacting clients and the fact that DV providers do not participate in HMIS.

(3) The YWCA has provided services to survivors of domestic violence and sexual assault since 1977, including emergency shelter (since 1977) and transitional housing (since 1997), with approximately 950 survivors and 1,300 children served annually. The YWCA ensures improvements in the safety of DV survivors through safety planning and maintaining an Emergency Transfer Plan to quickly transfer survivors to new housing units in instances of significant threats to safety. In addition to CoC funding for transitional housing, the YWCA leverages other federal (DOJ, TANF, VOCA, EFSP) and state/local funds (United Way, Michigan Department of Health and Human Services, Kent County funding) to provide comprehensive non-residential services to DV survivors, with a focus on promoting immediate safety. These services – the large majority of which are available on a permanent, ongoing basis – include individual and legal advocacy (including child custody), supervised parenting time, counseling, support groups, and DV assailant treatment/prevention. The YWCA additionally conducts community advocacy on creating safety plans and safe environments for survivors and their children at schools and employers.

(4) The YWCA maintains linkages with a wide variety of community resources to address the multiple barriers faced by DV survivors. To address the legal struggles that survivors often face (custody concerns/evaluations, divorce, child support, personal protection orders, etc.), the YWCA has a legal advocate who supports survivors in court and makes direct linkages to legal support organizations including Legal Aid of West Michigan (which has office hours at the YWCA) and Justice for Our Neighbors (for immigration concerns). For child and survivor safety, the YWCA provides supervised visitation and safe child exchange through the Safe Connections program (reducing the need for assailants to know the location of the survivor's residence). Education and job training are facilitated through linkages to the Women's Resource Center and Grand Rapids Opportunities for Women, both of which are experienced in working with survivors, as well as other community employment services. The YWCA's Counseling Department, which only serves survivors of domestic and sexual violence, also provides mental health services at no cost to project households. Both YWCA advocates and the Community Rebuilders Housing Resource Specialist will additionally ensure that all survivor households have



applied for and are receiving all social support benefits for which they are eligible.

**1C-5. PHAs within CoC. Applicants must use the chart to provide information about each Public Housing Agency (PHA) in the CoC's geographic areas:**

- (1) Identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA who were experiencing homelessness at the time of admission;**
- (2) Indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV Program; and**
- (3) Indicate whether the CoC has a move on strategy. The information should be for Federal Fiscal Year 2017.**

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2017 who were experiencing homelessness at entry	PHA has General or Limited Homeless Preference	PHA has a Preference for current PSH program participants no longer needing intensive supportive services, e.g. move on?
Kent County Housing Commission	93.00%	No	No
Grand Rapids Housing Commission	21.00%	Yes-HCV	No
Wyoming Housing Commission	25.00%	No	No
Michigan State Housing Development Authority	83.00%	Yes-HCV	Yes
Rockford Housing Commission	0.00%	No	No

**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-5a. For each PHA where there is not a homeless admission preference in their written policy, applicants must identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 2,000 characters)**

The CoC has continually engaged in conversations with the largest local PHAs, the 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 on this topic. The Grand Rapids Housing Commission has integrated this approach into their procedures, while KCHC has continued to research ways to include a homeless preference for their vouchers. The CoC has also worked with the Michigan State Housing Development Authority (MSHDA) on its general homeless preference. MSHDA is in the process of working with HUD to create a process that would allow other PHAs to use the waiting list infrastructure MSHDA has developed to ease the difficulty of instituting a homeless admission preference. Information on MSHDA has shared its process with all local PHAs to begin exploring how it may be instituted within each respective organization.

**1C-5b. Move On Strategy with Affordable Housing Providers. Does the CoC have a** Yes

**Move On strategy with affordable housing providers in its jurisdiction (e.g., multifamily assisted housing owners, PHAs, Low Income Tax Credit (LIHTC) developments, or local low-income housing programs)?**

**Move On strategy description.  
(limit 2,000 characters)**

MSHDA's Move On strategy is provided to communities who have tenants in their permanent supportive housing (PSH) units that no longer need the support services that accompany their housing placements. These tenants are provided with a MSHDA HCV voucher and their PSH units are made available to other prospective tenants that require both the housing subsidy and accompanying supports.

**1C-6. Addressing the Needs of Lesbian, Gay, Bisexual, Transgender (LGBT). Applicants must describe the actions the CoC has taken to address the needs of Lesbian, Gay, Bisexual, and Transgender individuals and their families experiencing homelessness.  
(limit 2,000 characters)**

LGBTQ-serving organizations and advocacy groups are CoC members and regularly participate, attend, and vote in CoC meetings. The CoC implemented a CoC-wide anti-discrimination policy in August 2016, and provides annual training and training materials to the full CoC membership to review the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity rule (including the Equal Access in Accordance with an Individual's Gender Identity in Community Planning and Development Programs rule). All organizations are encouraged to utilize these materials to extend this training to their staff and volunteers. The CE agency, among other providers, completed a staff-wide training on HUD's Equal Access Rule.

The CoC is also currently engaged in a collaborative effort to address and reduce LGBTQ homelessness in the community based on a comprehensive report and recommendations by the True Colors Fund. This effort is centered on the principles of engaging LGBTQ individuals and families through education and inclusion, family preservation, and safe spaces for interaction with peers. This effort also works to ensure safety through street outreach, emergency and bridge housing, connection to community resources and supports, and empowerment through permanent housing and inclusion in action boards through the CoC.

Additionally, the CoC has worked closely with multiple housing providers to conduct trainings and align services to meet the needs of LGBTQ individuals and families entering temporary housing situations. This led to the establishment of a shelter space specifically for transgender individuals at Mel Trotter Ministries this past year. YWCA West Central Michigan, which has a representative on the CoC's Steering Council, additionally provides a support group for LGBTQ survivors of DV and sexual assault, including those experiencing homelessness, and conducts targeted outreach at local social service providers focused on LGBTQ populations.

**1C-6a. Anti-Discrimination Policy and Training. Applicants must indicate if the CoC implemented a CoC-wide anti-discrimination policy and conducted CoC-wide anti-discrimination training on the Equal Access Final Rule and the Gender Identity Final Rule.**

1. Did the CoC implement a CoC-wide anti-discrimination policy that applies to all projects regardless of funding source?	Yes
2. Did the CoC conduct annual 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 (Equal Access Final Rule)?	Yes
3. Did the CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access to Housing in HUD Programs in Accordance with an Individual's Gender Identity (Gender Identity Final Rule)?	Yes

**1C-7. Criminalization of Homelessness. Applicants must select the specific strategies the CoC implemented 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"/>

**1C-8. Centralized or Coordinated Assessment System. Applicants must:**

- (1) demonstrate the coordinated entry system covers the entire CoC geographic area;**
  - (2) demonstrate the coordinated entry system reaches people who are least likely to apply homelessness assistance in the absence of special outreach;**
  - (3) demonstrate the assessment process prioritizes people most in need of assistance and ensures they receive assistance in a timely manner; and**
  - (4) attach CoC's standard assessment tool.**
- (limit 2,000 characters)**

(1) The CE system covers the entirety of Kent County, which includes the cities of Grand Rapids, Kentwood, Wyoming, Grandville, and Rockford, as well as multiple rural communities.

(2) The community's outreach services to the hardest-to-reach populations are a critical part of the CE process. The CoC's outreach providers include agencies that specialize in outreach to populations including individuals with mental health and/or substance use concerns, runaway and homeless youth, veterans, and rural populations. Outreach providers work with individuals/families to complete assessments and refer them to the CE agency.

(3) The CoC utilizes the VI-SPDAT (Vulnerability Index – Service Prioritization Decision Assistance Tool) to assess individuals through CE. The VI-SPDAT tool specifically identifies risk factors including domestic violence, sexual assault, risk of harm, chronic homelessness, legal issues, physical health, substance use, mental health, and trauma. The tool is used to create a score summarizing the individual's needs, with those scoring the highest being prioritized for housing placement. The CoC's Strategic Plan requires that referrals to program openings from CE are made within 48 hours of a unit/bed becoming available. The CE agency also uses a prioritization process for housing which follows the Chronic Homeless Order of Priority, working to ensure that the longest homeless, most vulnerable households are prioritized for housing.

After completing the assessment, CE staff refer individuals to specific community supports based on their needs, such as domestic violence counseling/safety-planning (YWCA), educational programs (Kent ISD, local school districts), law enforcement for immediate safety needs, the local community mental health provider (network180), social services for food and health care needs (Kent County Department of Health and Human Services, Community Food Club), legal support (Legal Aid of West Michigan), and other services.

## 1D. Continuum of Care (CoC) Discharge Planning

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1D-1. Discharge Planning–State and Local. Applicants must indicate whether the CoC has a discharge policy to ensure persons discharged from the systems of care listed are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).**

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

**1D-2. Discharge Planning Coordination. Applicants must indicate whether the CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs. Check all that apply (note that when "None:" is selected no other system of care should be selected).**

Foster Care:	<input checked="checked" type="checkbox"/>
Health Care:	<input checked="checked" type="checkbox"/>
Mental Health Care:	<input checked="checked" type="checkbox"/>
Correctional Facilities:	<input checked="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 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**1E-1. Project Ranking and Selection. Applicants must indicate whether the CoC used the following to rank and select project applications for the FY 2018 CoC Program Competition:**

- (1) objective criteria;**
- (2) at least one factor related to achieving positive housing outcomes;**
- (3) a specific method for evaluating projects submitted by victim services providers; and**
- (4) attach evidence that supports the process selected.**

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. Applicants must describe:**

- (1) the specific severity of needs and vulnerabilities the CoC considered when reviewing, ranking, and rating projects; and**
- (2) how the CoC takes severity of needs and vulnerabilities into account during the review, rating, and ranking process.**

**(limit 2,000 characters)**

(1) Consistent with last year's local applications, the CoC integrated specific vulnerabilities into the local application rating process for renewal projects, using criteria in the Project Rating and Ranking Tool as a guide. Each renewal project was required to provide specific data on how it impacted populations including persons with zero income at entry, persons with two or more disabilities, and chronically homeless persons. The extent to which projects demonstrated that they were serving hard-to-serve populations was weighted at 24% of the total points allowable – second only to project performance. This ensured that project impact on the highest-need populations was reflected in each individual project's score. Additionally, all new and renewal projects were required to state if they focused on one of several specifically-identified target populations (based on HUD priorities and local needs), including domestic violence survivors, chronically-homeless individuals, veterans, families, and youth ages 18-24.

(2) With respect to the review, rating, and ranking process, the CoC's Funding Review Committee specifically reviewed each project based on its score (which

included the aforementioned questions on vulnerable, high-need populations), and the project's impact on the most vulnerable target populations (i.e. domestic violence survivors, chronically-homeless persons, veterans, families, and youth). The committee took multiple factors into consideration when reviewing projects, including the project's impact on outcomes for the most vulnerable individuals; total units prioritized for high-need populations; and supplemental community resources available to serve project target populations. The committee developed the final Project Priority List (with approval by the Steering Council) based on the goal of ensuring that the most vulnerable populations with the most severe needs have access to high-quality programming in the community.

**1E-3. Public Postings. Applicants must indicate how the CoC made public:**

- (1) objective ranking and selection process the CoC used for all projects (new and renewal);**
- (2) CoC Consolidated Application—including the CoC Application, Priority Listings, and all projects accepted and ranked or rejected, which HUD required CoCs to post to their websites, or partners websites, at least 2 days before the CoC Program Competition application submission deadline; and**
- (3) attach documentation demonstrating the objective ranking, rating, 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, that legibly displays the date the CoC publicly posted the documents.**

Public Posting of Objective Ranking and Selection Process		Public Posting of CoC Consolidated Application including: CoC Application, Priority Listings, Project Listings	
CoC or other Website	<input type="checkbox"/>	CoC or other Website	<input type="checkbox"/>
Email	<input type="checkbox"/>	Email	<input type="checkbox"/>
Mail	<input type="checkbox"/>	Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>	Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>	Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>	Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

**1E-4. Reallocation. Applicants must indicate whether the CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between the FY 2014 and FY 2018 CoC Program Competition Competitions.**

**Reallocation: Yes**

**1E-5. Local CoC Competition. Applicants must indicate whether the CoC:**  
**(1) established a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application**

**deadline–attachment required;  
(2) rejected or reduced project application(s)–attachment required; and  
(3) notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline–attachment required. :**

(1) Did the CoC establish a deadline for project applications that was no later than 30 days before the FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(2) If the CoC rejected or reduced project application(s), did the CoC notify applicants that their project application(s) were being rejected or reduced, in writing, outside of e-snaps, at least 15 days before FY 2018 CoC Program Competition Application deadline? Attachment required.	Yes
(3) Did the CoC notify applicants that their applications were accepted and ranked on the Priority Listing in writing outside of e-snaps, at least 15 before days of the FY 2018 CoC Program Competition Application deadline?	Yes



## 2A. Homeless Management Information System (HMIS) Implementation

### Intructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2A-1. Roles and Responsibilities of the CoC and HMIS Lead. Does your 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? Attachment Required.** Yes

**2A-1a. Applicants must:** Page 2 (Governance Charter) and page 12 (Joint Governance Charter)  
 (1) 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, and  
 (2) indicate the document type attached for question 2A-1 that includes roles and responsibilities of the CoC and HMIS Lead (e.g., Governance Charter, MOU/MOA).

**2A-2. HMIS Policy and Procedures Manual. Does your CoC have a HMIS Policy and Procedures Manual? Attachment Required.** Yes

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

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

**2A-5. Bed Coverage Rate. Using 2018 HIC and HMIS data, applicants must report by project type:**  
 (1) total number of beds in 2018 HIC;  
 (2) total beds dedicated for DV in the 2018 HIC; and

**(3) total number of beds in HMIS.**

Project Type	Total Beds in 2018 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) beds	624	53	571	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	206	116	90	100.00%
Rapid Re-Housing (RRH) beds	414	0	414	100.00%
Permanent Supportive Housing (PSH) beds	855	0	855	100.00%
Other Permanent Housing (OPH) beds	45	0	45	100.00%

**2A-5a. To receive partial credit, if the bed coverage rate is 84.99 percent or lower for any of the project types in question 2A-5., applicants must provide clear steps on how the CoC intends to increase this percentage for each project type over the next 12 months.  
(limit 2,000 characters)**

**2A-6. AHAR Shells Submission: How many 12  
2017 Annual Housing Assessment Report  
(AHAR) tables shells did HUD accept?**

**2A-7. CoC Data Submission in HDX. 04/30/2018  
Applicants must enter the date the CoC  
submitted the 2018 Housing Inventory Count  
(HIC) data into the Homelessness Data  
Exchange (HDX).  
(mm/dd/yyyy)**

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

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2B-1. PIT Count Date. Applicants must enter the date the CoC conducted its 2018 PIT count (mm/dd/yyyy).** 01/31/2018

**2B-2. HDX Submission Date. Applicants must enter the date the CoC submitted its PIT count data in HDX (mm/dd/yyyy).** 04/30/2018

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

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**2C-1. Change in Sheltered PIT Count Implementation. Applicants must describe any change in the CoC's sheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018. Specifically, how those changes impacted the CoC's sheltered PIT count results.  
(limit 2,000 characters)**

Based on suggestions from the CoC's Outreach Work Group, PIT count surveys were conducted for individuals placed in motels with motel vouchers by CPS. Community family shelter providers also worked with local media to build awareness of families and children experiencing homelessness as a way of reducing stigma and fear for families about accessing shelter.

**2C-2. Did your CoC change its provider coverage in the 2018 sheltered count?** No

**2C-2a. If "Yes" was selected in 2C-2, applicants must enter the number of beds that were added or removed in the 2018 sheltered PIT count.**

Beds Added:	0
Beds Removed:	0
Total:	0

**2C-3. Presidentially Declared Disaster Changes to Sheltered PIT Count. 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 2018 sheltered PIT count?** No

**2C-3a. If "Yes" was selected for question 2C-3, applicants must enter the number of beds that were added or removed in 2018 because of a Presidentially declared disaster.**

Beds Added:	0
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Beds Removed:	0
Total:	0

**2C-4. Changes in Unsheltered PIT Count Implementation. Did your CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2017 to 2018? If your CoC did not conduct an unsheltered PIT count in 2018, select Not Applicable.** No

**2C-5. Identifying Youth Experiencing Homelessness in 2018 PIT Count. Did your CoC implement specific measures to identify youth experiencing homelessness in its 2018 PIT count?** Yes

**2C-5a. If “Yes” was selected for question 2C-5., applicants must describe:**  
**(1) how stakeholders serving youth experiencing homelessness were engaged during the planning process;**  
**(2) how the CoC worked with stakeholders to select locations where youth experiencing homelessness are most likely to be identified; and**  
**(3) how the CoC involved youth experiencing homelessness in counting during the 2018 PIT count.**  
**(limit 2,000 characters)**

(1) Youth service providers played an integral role in the planning process for the 2018 PIT Count, including outreach staff from Arbor Circle (youth emergency shelter and housing services), HQ (homeless youth drop-in center), and Mel Trotter Ministries (local shelter with youth and LGBTQ-specific shelter space). These providers worked together to identify locations where youth congregate and used their trained, experienced staff to engage youth in the PIT Count process. Outreach staff encouraged eligible young people to enter available youth-specific shelters at Arbor Circle and Mel Trotter Ministries. Outreach staff additionally implemented youth-specific outreach efforts to identify, assess, and prioritize youth for housing, utilizing a community-developed assessment incorporating positive youth development principles, best practices from the National Alliance to End Homelessness and the local Supportive Services to Veteran Families program, and youth input. Community family shelter providers additionally worked with local media to build awareness of children experiencing homelessness as a way of reducing stigma about accessing shelter.

(2) In the months preceding the count, outreach staff collaborated to build relationships with youth and identify spaces where they congregate. This included identifying and documenting encampments on Google Maps and sharing information on interactions with homeless youth in specific locations. Locations identified included HQ's drop-in center, the Grand Rapids Public Library, local homeless shelters, Grand Rapids Pride Center, Rosa Parks Circle, and known encampments.

(3) The CoC's focus groups and listening sessions with youth over the last year helped outreach staff develop best practices and better approaches for engaging youth in the count. The outreach efforts detailed in part 1 also helped outreach staff build relationships and identify locations to engage youth in the 2018 PIT Count.

**2C-6. 2018 PIT Implementation. Applicants must describe actions the CoC implemented in its 2018 PIT count to better count:**

**(1) individuals and families experiencing chronic homelessness;**

**(2) families with children experiencing homelessness; and**

**(3) Veterans experiencing homelessness.**

**(limit 2,000 characters)**

(1) In preparation for the count, outreach providers conducted supplemental surveys at local shelters (which asked questions including last time housed) and worked closely with local shelters and law enforcement to identify known encampments. This included the use of Google Maps to document encampments and areas where outreach teams had interactions with chronically-homeless individuals. CE staff also provided outreach teams with information on areas where individuals and families reporting staying, including specific addresses, street corners, big box store parking lots, park and rides, and highway rest stops.

(2) Community family shelter providers worked with local media to build awareness of families and children experiencing homelessness as a way of reducing stigma and fear for families about accessing shelter. Additionally, the CoC further developed working relationships with McKinney-Vento homeless liaisons at local school districts, who helped identify families and children at risk of or experiencing homelessness to ensure that they were included in the count. CE staff also provided information to outreach staff on known locations where families with children were residing.

(3) The CoC's Ending Veteran Homelessness Committee worked with outreach staff to ensure that veterans experiencing homelessness were better counted in the 2018 PIT Count. The lead agency for the committee (Community Rebuilders) worked in collaboration with the largest shelter providers in the area to ensure that all shelter guests are asked about their veteran status, which helped outreach staff count veterans. Additionally, staff from the local VA health care office, VOA Supportive Services for Veteran Families, and the CE agency also met prior to the PIT Count to identify individuals who were refusing to enter shelter or housing programs to better identify them during the count. The CoC was also pleased to have achieved functional zero for veteran homelessness this past year.

## 3A. Continuum of Care (CoC) System Performance

### Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

### 3A-1. First Time Homeless as Reported in HDX. In the box below, applicants must report the number of first-time homeless as reported in HDX.

Number of First Time Homeless as Reported in HDX.	2,466
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#### 3A-1a. Applicants must:

(1) describe how the CoC determined which risk factors the CoC uses to identify persons becoming homeless for the first time;  
 (2) describe the CoC's strategy to address individuals and families at risk of becoming homeless; and  
 (3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.  
 (limit 2,000 characters)

(1) The CoC determines risk factors for first-time homelessness based on HMIS data collected from CE assessments. HMIS data is analyzed by the CoC's Data Analysis Committee to identify trends and barriers that contribute to first-time homelessness. Based on the committee's analysis this past year, the Steering Council concluded that the primary risk factors for first-time homelessness is income that does not match increases in cost of living – including for housing and basic needs such as food, transportation, and child care – as well as evictions. This is consistent with data showing that rent in Grand Rapids, Kent County's largest city, has grown by 29 percent between 2007 and 2016 (Trulia Market Trends, 2018). However, the Steering Council will continue to examine the Data Analysis Committee's ongoing analysis of community data to determine emerging trends and barriers contributing to first-time homelessness.

(2) To address individuals and families at risk of becoming homeless, the CoC partners with a variety of local systems and organizations to advocate for at-risk populations and address systemic issues contributing to first-time homelessness. This includes partnering with multiple district courts to expand eviction prevention services throughout the county and participating in the efforts of community systems impacting basic needs, including the Kent County Essential Needs Task Force (which convenes committees of local providers on basic needs including food security, transportation, employment, and environmental issues); Talent 2025 (workforce development collaborative of local employers); the Kent Intermediate School District (regional school district agency for Kent County); and other community partners.

(3) The CoC Steering Council along with CoC staff are responsible for

overseeing the CoC's strategy to reduce the number of individuals and families experiencing homelessness for the first time.

**3A-2. Length-of-Time Homeless as Reported in HDX. Applicants must:**

- (1) provide the average length of time individuals and persons in families remained homeless (i.e., the number);**
  - (2) describe the CoC's strategy to reduce the length-of-time individuals and persons in families remain homeless;**
  - (3) describe how the CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and**
  - (4) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the length of time individuals and families remain homeless.**
- (limit 2,000 characters)**

(1) The average length of time for individuals and persons and families remaining homeless was 11 for ES, 10 for ES and TH.

(2) The CoC's CE process quickly refers individuals and families to housing resources in the community, using an assessment tool (VI-SPDAT) that prioritizes individuals/families for housing placement based on level of vulnerability. The CE process also provides wrap-around services while individuals and families are in shelter or waiting for housing resources to reduce the length of time homeless; this includes referrals to basic needs programs (food assistance, health care, employment services, etc.) to resolve barriers and issues contributing to the housing crisis, as well assistance with building natural supports to self-resolve the housing issue.

The CoC also maintains standards established in its Strategic Plan to reduce the length of time individuals and families remain homeless, including:

- The CE agency must make referrals to program openings within 48 hours of each bed/unit opening.
- Outreach teams must target long-term stayers in emergency shelters (in shelter for 30 or more days) for housing assessments to determine eligibility for permanent housing programming.

(3) The VI-SPDAT assessment tool asks how long individuals/families have lacked permanent stable housing and the number of times they have been homeless in the last three years. This information, along with targeted outreach by the community's outreach teams, helps the CoC identify individuals and persons in families with the longest length of time homeless. The CE agency uses a prioritization process for housing which considers length of time homeless, and which follows the Chronic Homeless Order of Priority, working to ensure that the longest homeless, most vulnerable households are prioritized for housing.

(4) The Steering Council and CoC staff are responsible for this strategy.

**3A-3. Successful Permanent Housing Placement and Retention as Reported in HDX. Applicants must:**

- (1) provide the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid rehousing**



**that exit to permanent housing destinations; and  
(2) provide the percentage of individuals and persons in families in permanent housing projects, other than rapid rehousing, that retain their permanent housing or exit to permanent housing destinations.**

	Percentage
Report the percentage of individuals and persons in families in emergency shelter, safe havens, transitional housing, and rapid re-housing that exit to permanent housing destinations as reported in HDX.	47%
Report the percentage of individuals and persons in families in permanent housing projects, other than rapid re-housing, that retain their permanent housing or exit to permanent housing destinations as reported in HDX.	94%

**3A-3a. Applicants must:**

**(1) describe the CoC's strategy to increase the rate at which individuals and persons in families in emergency shelter, safe havens, transitional housing and rapid rehousing exit to permanent housing destinations; and  
(2) describe the CoC's strategy to increase the rate at which individuals and persons in families in permanent housing projects, other than rapid rehousing, retain their permanent housing or exit to permanent housing destinations.**

**(limit 2,000 characters)**

(1) The CoC's strategy to increase exits into permanent housing is firstly focused on increasing permanent housing resources in the community. CoC providers currently have several projects in development that will add multiple permanent housing units to the community. These include two developments that will create 20 permanent supportive housing units for homeless youth (ICCF's 435 LaGrave and 501 Eastern projects), and two additional projects (Dwelling Place's Harrison Park and Pine Avenue Apartments) that will create 68 affordable rental units, including 18 reserved for domestic violence survivors and 16 units with Housing Choice Vouchers. These new units will provide additional resources for domestic violence survivors and youth populations, both of which are disproportionately represented in emergency shelters, with the former currently lacking access to targeted permanent housing resources in the community.

Secondly, housing providers ensure that project participants are connected with resources to assist them in exiting to permanent housing, including ongoing case management, mental health supports, education, and employment training/certification. For example, 90 percent of current participants in YWCA's Project HEAL transitional housing program have been connected with Housing Choice Vouchers with area housing commissions.

(2) To increase client retention in or exits to permanent housing, the CoC's strategy is to facilitate resource referrals among providers to ensure that clients have the necessary supports to maintain their housing. Providers share best practices and regularly make referrals to connect clients with resources to ensure housing stability, including case management, food assistance, mental and physical health services, substance use treatment, employment assistance, and financial assistance. This past year, the CoC also doubled the number of SOAR case managers in the community to assist clients in accessing SSI/SSDI benefits.

**3A-4. Returns to Homelessness as Reported in HDX. Applicants must report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX.**

	Percentage
Report the percentage of individuals and persons in families returning to homelessness over a 6- and 12-month period as reported in HDX	6%

**3A-4a. Applicants must:**

- (1) describe how the CoC identifies common factors of individuals and persons in families who return to homelessness;**
  - (2) describe the CoC's strategy to reduce the rate of additional returns to homelessness; and**
  - (3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy to reduce the rate individuals and persons in families returns to homelessness.**
- (limit 2,000 characters)**

(1) The CoC identifies common factors for returns to homelessness using data identified in APR and System Performance Measure (Measure 2) reports, with analysis by the CoC's Data Analysis Committee to identify trends and barriers. Front-line staff from local providers also share their observations on trends and common factors at meetings of the general CoC membership and CoC Steering Council. Inadequate income to meet rising housing costs and younger age groups (25-34) have been identified as common factors for returns to homelessness.

(2) The CoC's strategy to reduce returns to homelessness focuses on facilitating training, best practice-sharing, and resource referrals among providers to increase client access to supports for maintaining housing stability and building self-sufficiency. This past year, the CoC doubled the number of trained SOAR (SSI/SSDI Outreach Access and Recovery) case managers, which has increased the community's capacity to assist individuals in accessing income from SSI/SSDI benefits. Providers also regularly make referrals to connect clients with resources to ensure housing stability, including case management, food assistance, mental and physical health services, substance use treatment, employment assistance, peer mentoring programs, financial assistance, and leadership programs.

In addition to the above strategies, over the last four years, the CoC has reallocated over 27% of its current ARD, which has resulted in 11 of its 12 current non-infrastructure projects being permanent housing project types. These projects ensure longer-term housing stability and help prevent returns to homelessness by connecting individuals and families with necessary supports and immediately stabilizing them in housing.

(3) The Steering Council of the CoC is responsible for this strategy with the support of CoC staff.

**3A-5. Job and Income Growth. Applicants must:**

- (1) describe the CoC's strategy to increase access to employment and non-employment cash sources;**
- (2) describe how the CoC works with mainstream employment**

**organizations to help individuals and families increase their cash income; and**

**(3) provide the organization name or position title that is responsible for overseeing the CoC's strategy to increase job and income growth from employment.**

**(limit 2,000 characters)**

(1) The CoC's strategy to increase access to employment and non-employment cash sources focuses on community collaboration. The CoC's housing providers maintain referral networks with local workforce development and employment agencies to assist clients in obtaining employment, accessing training, and completing vocational credentials. Partners include Goodwill, West Michigan Works!, Grand Rapids Community College, and Michigan Rehabilitation Services, among others. Many providers also assist clients with job searching, resume-building, and skills development.

Providers additionally work with clients and partner with local agencies to assist clients in accessing non-employment cash sources. This includes case management services that connect clients with mainstream benefits through the Kent County Department of Health and Human Services and other local agencies. In addition to these partnerships, the community's recent successful initiative to double the number of trained SOAR case managers in the community will provide new opportunities for individuals to increase their non-employment cash income.

(2) The CoC maintains a partnership with the Kent County Essential Needs Task Force's Economic and Workforce Development Committee, which convenes local employers and employment-focused agencies to ensure access to job opportunities in the community. Over the last two years, the CoC has partnered with the committee to initiate pilot projects to improve access to work opportunities for individuals and adults in families who are unemployed or underemployed. This has included educating employers about the impact of increasing income and in turn, increasing housing stability, as it relates to work attendance and productivity. As a result of this partnership, several local employers have engaged in discussions around increasing wages and educational/training supports for their employees.

(3) The CoC Steering Council and CoC staff are responsible for this strategy.

**3A-6. System Performance Measures Data Submission in HDX. Applicants must enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2017 (mm/dd/yyyy)**

05/31/2018

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

### Instructions

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

**3B-1. DedicatedPLUS and Chronically Homeless Beds. In the boxes below, applicants must enter:**

- (1) total number of beds in the Project Application(s) that are designated as DedicatedPLUS beds; and  
(2) total number of beds in the Project Application(s) that are designated for the chronically homeless, which does not include those that were identified in (1) above as DedicatedPLUS Beds.

Total number of beds dedicated as DedicatedPLUS	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	368
Total	368

**3B-2. Orders of Priority. Did the CoC adopt the Orders of Priority into their written 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? Attachment Required.** Yes

**3B-2.1. Prioritizing Households with Children. Using the following chart, applicants must check all that apply to indicate the factor(s) the CoC currently uses to prioritize households with children during FY 2018.**

History of 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"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

**3B-2.2. Applicants must:**

- (1) describe the CoC's current strategy to rapidly rehouse every household of families with children within 30 days of becoming homeless;
- (2) describe how the CoC addresses both housing and service needs to ensure families successfully maintain their housing once assistance ends; and
- (3) provide the organization name or position title responsible for overseeing the CoCs strategy to rapidly rehouse families with children within 30 days of becoming homeless.  
(limit 2,000 characters)

(1) The CoC's current strategy to rapidly re-house families with children within 30 days of becoming homeless is to utilize the CE process to quickly connect families with housing that fits their unique needs in the community. Families who participate in the CE process are prioritized for housing resources based on their vulnerability score on the assessment tool (VI/F-SPDAT – used specifically for families) and are offered resources for which they are eligible as soon they become available. The CoC's Strategic Plan requires that referrals to program openings from CE are made within 48 hours of the unit/bed becoming available. If individuals are not interested in currently-available programming, they may decline and stay on the community's Housing Priority list.

(2) The CoC ensures that families are provided with an extensive network of supports and resources to assist them with successfully maintaining their housing. During the CE process, families are referred to community providers for resource assistance. This includes services for domestic violence survivors, including counseling, advocacy, and other non-residential services through the local YWCA; utility payment assistance, which is offered through the CE agency; mental health services through community partners including network180 (Community Mental Health Authority for Kent County) and Arbor Circle; educational support through the Kent Integrated School District (regional school district); social services including health care/Medicaid through the Kent County Department of Health and Human Services; food assistance through local food pantries and the Community Food Club; legal support through Legal Aid of West Michigan; and other services as needed.

(3) The Steering Council, alongside CoC staff and the Data Analysis Committee, monitors the effectiveness of this strategy and makes recommendations for changes as necessary.

**3B-2.3. Antidiscrimination Policies. Applicants must check all that apply that describe actions the CoC is taking to ensure providers (including emergency shelter, transitional housing, and permanent supportive housing (PSH and RRH) within the CoC adhere to antidiscrimination 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.**

CoC conducts mandatory training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC conducts optional training for all CoC and ESG funded service providers on these topics.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	<input type="checkbox"/>
CoC has worked with ESG recipient(s) to identify both CoC and ESG funded facilities within the CoC geographic area that may be out of compliance, and taken steps to work directly with those facilities to come into compliance.	<input type="checkbox"/>

CoC has sought assistance from HUD through submitting AAQs or requesting TA to resolve non-compliance of service providers.	<input type="checkbox"/>
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**3B-2.4. Strategy for Addressing Needs of Unaccompanied Youth Experiencing Homelessness. Applicants must indicate whether the CoC's strategy to address the unique needs of unaccompanied homeless youth includes the following:**

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-2.5. Prioritizing Unaccompanied Youth Experiencing Homelessness Based on Needs. Applicants must check all that apply from the list below that describes the CoC's current strategy to prioritize unaccompanied youth based on their needs.**

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-2.6. Applicants must describe the CoC's strategy to increase:**  
**(1) housing and services for all youth experiencing homelessness by providing new resources or more effectively using existing resources, including securing additional funding; and**  
**(2) availability of housing and services for youth experiencing unsheltered homelessness by providing new resources or more effectively using existing resources.**  
**(limit 3,000 characters)**

(1) The CoC's strategy to increase housing and services for all youth experiencing homelessness is to gain better information on youth needs and increase the availability of housing and supports for youth. Over the past two years, the community conducted a series of focus groups and listening sessions with current and formerly homeless youth to identify service gaps in the community. These listening sessions led to Community Rebuilder's decision to reallocate funding for its youth program from a rapid rehousing project to a project utilizing the new transitional/rapid rehousing model (First Step Housing) in 2017. This program is the first CoC-funded project in Kent County focused on unsheltered, unaccompanied youth ages 18-24.

To better integrate youth input into the CoC's strategies, the CoC recently

developed and seated a Youth Action Board, comprised of currently and formerly-homeless young people. The board collaborates with the CoC and service providers in better addressing the needs of homeless youth in the community. The CoC has also received technical assistance from HUD and the True Colors Fund to improve services for LGBTQ youth, including victims/survivors of trafficking. The community's outreach providers additionally implemented youth-specific outreach efforts to identify, assess, and prioritize youth for housing this past year, utilizing a community-developed assessment incorporating positive youth development principles, best practices from the National Alliance to End Homelessness and the Supportive Services to Veteran Families program, and youth input.

(2) To address the needs of unsheltered youth, CoC providers are developing new housing resources targeted at youth in the community. This includes two projects currently in development that will create 20 permanent supportive housing units for homeless youth (435 LaGrave project and 501 Eastern projects through the Inner City Christian Federation). Another CoC provider (Arbor Circle) will also begin providing host-home housing to youth over the age of 18 in Kent County with new funding secured from the Family Youth Services Bureau (FYSB) in the next year.

To better understand the scope of unsheltered youth needs in the community, the CoC will hold its first-ever Voices of Youth Count for youth ages 10-24 this October. This initiative will bring together the CoC's Youth Action Board, youth-serving providers, schools, faith-based agencies, and other stakeholders to count unsheltered homeless youth in the community. This count will help the CoC develop a by-name list of homeless youth in the community and inform the CoC's efforts to refine the CE system to better target and connect youth with resources. The count will be conducted by local housing providers with experience in outreach and trauma-informed care, with nationally-recognized survey tools and materials from the University of Chicago's Chapin Hall research center.

**3B-2.6a. Applicants must:**

**(1) provide evidence the CoC uses to measure both strategies in question 3B-2.6. to increase the availability of housing and services for youth experiencing homelessness;**

**(2) describe the measure(s) the CoC uses to calculate the effectiveness of the strategies; and**

**(3) describe why the CoC believes the measure it uses is an appropriate way to determine the effectiveness of the CoC's strategies.**

**(limit 3,000 characters)**

(1) The CoC's Data Analysis Committee reviews and analyzes HMIS data for youth programs in the area as well as data from youth focus groups and listening sessions. The Data Analysis Committee will also analyze data collected from the community's first Voices of Youth Count, which will be held this October. The committee's analysis is used to help the Steering Council measure the success of the aforementioned strategies in 3B-2.6. Direct feedback from youth experiencing homelessness is also critical to measuring the success of these strategies, which the community receives through its new Youth Action Board. Local youth housing and service providers also serve as a key source of qualitative data on the success of the CoC's strategies and youth

needs in the community. Insight from this data as well as observations from local providers led to the community's focus on increasing housing resources for youth ages 18-24, which resulted in Community Rebuilders' reallocation of funds to the First Step Housing program and the development of the new 435 LaGrave and 501 Eastern projects (which will create 20 permanent supportive housing units reserved for homeless youth in the community).

The CoC also utilizes reports from external actors to analyze youth homelessness in the community. An example is a recent report prepared by the True Colors Fund, which identified the need for non-time-limited housing with supportive services. This report led to Arbor Circle securing new funding for host homes for youth over the age of 18 in the community.

(2) The CoC's Data Analysis Committee analyzes HMIS data including counts of unsheltered youth; length of homelessness; time from CE referral to housing; number of rapid rehousing project youth engaged in mainstream education, employment, and counseling services; positive exit destinations; and increases in income and employment. The committee observes trends in these data points, including increases and decreases in outputs and outcomes, to gain an understanding of how the CoC's strategies are holistically impacting youth homelessness in the community. The Voices of Youth Count will also provide a key new source of data that will help the CoC ascertain the extent of youth homelessness in the community.

(3) The measurements described in part 2 together take into consideration the multiple intersecting factors that influence housing stability and self-sufficiency among youth, including housing status, increases in income, employment status, and access to critical educational and mental health services. These measurements assist the Steering Council in understanding the totality of the CoC's impact on youth and youth homelessness.

**3B-2.7. Collaboration–Education Services. Applicants must describe how the CoC collaborates with:**

- (1) youth education providers;**
  - (2) McKinney-Vento State Education Agency (SEA) and Local Education Agency (LEA);**
  - (3) school districts; and**
  - (4) the formal partnerships with (1) through (3) above.**
- (limit 2,000 characters)**

(1) The CoC's membership roster includes multiple educational providers who act as voting members, including the regional school district, local public school districts, nonprofit agencies, and alternative schools. These members provide insight into community needs and serve as a source of referrals for CoC housing programs.

(2-3) The McKinney-Vento District Leader is an active, formal member of the CoC who participates in many CoC committees. CoC staff also meet at least once annually with liaisons from school districts across Kent County to explain best practices and procedures for meeting the needs of homeless families and youth.

(4) As mentioned in part 1, educational providers are formal voting members of



the CoC. Representatives from local educational providers, including the regional school district (Kent Intermediate School District), serve on the CoC's Steering Council as well.

**3B-2.7a. Applicants must describe the policies and procedures the CoC adopted to inform individuals and families who become homeless of their eligibility for education services.  
(limit 2,000 characters)**

The CoC formally adopted a policy regarding homeless youth and their educational service eligibility, ensuring that all school-aged children maintain their education with as little disturbance as possible. Each CoC member agency has a policy in place and process for ensuring that parents and youth are connected with educational services, in compliance with the CoC Policy. Housing providers and emergency shelter providers also connect with school liaisons regularly.

**3B-2.8. Does the CoC have written formal agreements, MOU/MOAs or partnerships with one or more providers of early childhood services and supports? Select "Yes" or "No". Applicants must select "Yes" or "No", from the list below, if the CoC has written formal agreements, MOU/MOA's or partnerships with providers of early childhood services and support.**

	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 years	No	No
Tribal Home Visiting Program	No	No
Other: (limit 50 characters)		
KConnect: Early Life Collective Impact Org	No	Yes

**3B-3.1. Veterans Experiencing Homelessness. Applicants must describe the actions the CoC has taken to identify, assess, and refer Veterans experiencing homelessness, who are eligible for U.S. Department of Veterans Affairs (VA) housing and services, to appropriate resources such as HUD-VASH, Supportive Services for Veterans Families (SSVF) program and Grant and Per Diem (GPD).  
(limit 2,000 characters)**

The CoC's recently-developed Ending Veteran Homelessness Committee put into place specific strategies to ensure that the community accurately identifies all veterans experiencing homeless through a by-name list (maintained by the CE agency). The committee – lead by a representative from one of Kent

County's Supportive Services for Veterans Families (SSVF) grantees – developed veteran-specific outreach teams which included CE staff, local Veteran's Affairs (VA) office staff, and housing provider agency staff to ensure that outreach efforts are comprehensive, cover the county's full geographic area, and include multiple settings. The outreach teams work in coordination to quickly identify, assess, and refer homeless veterans to VA and housing services to ensure that homelessness is rare and brief; outreach is conducted on at least a weekly basis. CE staff actively partner with the VA through collaborations with SSVF, HUD-VASH, and Grant and Per Diem (GPD) service providers to ensure that veterans receive comprehensive and equitable access to housing resources. The community has also sought and secured United States Interagency Council on Homelessness (USICH) recognition for reaching functional zero for veteran homelessness (first in the state of Michigan) 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 experiencing homelessness is assisted to quickly move into permanent housing using a Housing First approach?** Yes

**3B-5. Racial Disparity. Applicants must:** No  
 (1) indicate whether the CoC assessed whether there are racial disparities in the provision or outcome of homeless assistance;  
 (2) if the CoC conducted an assessment, attach a copy of the summary.

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

### Instructions:

For guidance on completing this application, please reference the FY 2018 CoC Application Detailed Instructions and the FY 2018 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

#### 4A-1. Healthcare. Applicants must indicate, for each type of healthcare listed below, whether the CoC:

- (1) assists persons experiencing homelessness with enrolling in health insurance; and
- (2) assists persons experiencing homelessness with effectively utilizing Medicaid and other benefits.

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

#### 4A-1a. Mainstream Benefits. Applicants must:

- (1) describe how the CoC works with mainstream programs that assist persons experiencing homelessness to apply for and receive mainstream benefits;
- (2) describe how the CoC systematically keeps program staff up-to-date regarding mainstream resources available for persons experiencing homelessness (e.g., Food Stamps, SSI, TANF, substance abuse programs); and
- (3) provide the name of the organization or position title that is responsible for overseeing the CoC's strategy for mainstream benefits. (limit 2,000 characters)

(1) The CoC maintains partnerships with a wide variety of local partners that assist persons experiencing homelessness in applying for mainstream benefits. Partners include health care navigator projects through Priority Health and Health Net of West Michigan, which assist clients participating in housing programming with accessing Medicaid and other health insurance options/programs. The CoC also works closely with the Kent County Department of Health and Human Services to ensure efficient and effective access to mainstream benefit enrollment within the housing crisis response system, with many CoC housing providers serving as enrollment locations. The CoC additionally partners and aligns with community systems impacting basic needs, including the Kent County Essential Needs Task Force (which convenes

committees of local providers on basic needs including food security, transportation, employment, and environmental issues); Talent 2025 (workforce development collaborative of local employers); and the Kent Intermediate School District (regional school district agency for Kent County).

(2) CoC staff and Steering Council members ensure that information about mainstream benefits is disseminated through email lists, newsletters, and expert presentations at CoC meetings. New information is presented at bimonthly CoC meetings based on feedback and suggestions from CoC members, as well as research by CoC staff. As changes to mainstream benefits occur, the CoC ensures that all providers are connected with information regarding the changes through the aforementioned methods. Updates on changes to benefit programs - such as last year's changes to food stamp access for able-bodied adults in Michigan – are sent out as changes are announced.

(3) CoC staff are responsible for this strategy, which is included within the CoC Strategic Plan.

#### **4A-2.Housing First: Applicants must report:**

- (1) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition; and**
- (2) total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.**

Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition.	14
Total number of new and renewal CoC Program Funded PSH, RRH, SSO non-coordinated entry, Safe-Haven, and Transitional Housing projects the CoC is applying for in FY 2018 CoC Program Competition that have adopted the Housing First approach—meaning that the project quickly houses clients without preconditions or service participation requirements.	12
Percentage of new and renewal PSH, RRH, Safe-Haven, SSO non-Coordinated Entry projects in the FY 2018 CoC Program Competition that will be designated as Housing First.	86%

#### **4A-3. Street Outreach. Applicants must:**

- (1) describe the CoC's outreach;**
- (2) state whether the CoC's Street Outreach covers 100 percent of the CoC's geographic area;**
- (3) describe how often the CoC conducts street outreach; and**
- (4) describe how the CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance. (limit 2,000 characters)**

(1) Street outreach is provided by the CE agency and outreach teams at multiple community agencies to identify unsheltered homeless persons for completion of VI-SPDAT and referral to services. Outreach staff work closely with other community organizations to identify "hot spots" and encampments in the area, including local police departments, city governments, the Michigan Department of Transportation, and homeless drop-in centers. Outreach

providers meet monthly and are regularly in contact to coordinate their services.

(2) The CoC's street outreach covers 100 percent of Kent County, including rural communities in northern and eastern Kent County and the county's urban and suburban areas.

(3) Outreach by all agencies is conducted five days per week, with hours varying from early morning to the evening, based on need.

(4) Agencies specifically target populations that are least likely to seek out assistance, including youth, people with mental health and/or substance use disorders, chronically homeless persons, immigrants, families, and veterans. Outreach providers include a PATH grantee, Runaway and Homeless Youth provider, Health Care for Homeless Veterans provider, SSVF provider, Medicaid health care provider, and emergency shelter providers. Outreach agencies collaborate with one another to connect these populations with services. For example, if an outreach staff member encounters an individual with a suspected mental health disorder without income, the staff member would coordinate with outreach staff from the PATH grantee to connect the individual with mental health and SOAR services. Other examples of collaborative outreach include a weekly "one-stop shop" at an emergency shelter provider where VA, CE, and SSVF staff are present to facilitate veteran outreach, and youth-specific outreach efforts led by the Runaway and Homeless Youth provider to conduct outreach to youth using best practices to build trust in a trauma-informed manner.

**4A-4. Affirmative Outreach. Applicants must describe:**

**(1) the specific strategy the CoC 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; and**

**(2) how the CoC communicated effectively with persons with disabilities and limited English proficiency fair housing strategy in (1) above. (limit 2,000 characters)**

(1) The CoC ensures that the provisions of 24 CFR 578.93 are fully implemented by requiring equal housing opportunity language on websites, applications, informational brochures, and other printed materials of CoC-funded housing providers and the CE agency. The Fair Housing Center of West Michigan also engages housing providers – including outreach providers that focus on the hardest-to-reach populations who are least likely to apply in the absence of special outreach – in annual training on ensuring that housing and supportive services are marketed to all eligible persons, regardless of their membership in one of the protected classes described in 24 CFR 578.93. The Fair Housing Center additionally serves as a resource for consultation on policy changes pertaining to equal opportunity regulations. Fair Housing Center staff are CoC members and serve on the Coordinated Assessment Committee.

(2) CoC members consult with organizations such as the Hispanic Center of West Michigan, Disability Advocates of Kent County, and the Association for the Blind and Visually Impaired to ensure that services and marketing materials are accessible to people with disabilities and limited English proficiency. Multiple

providers have accessible units with braille and barrier-free components. The CE agency also has a Language Access Plan for staff working with persons who are limited English proficient or have communication disabilities, including for staff conducting street outreach activities. The plan ensures that the CE process includes timely and professional translation/interpreting services, as well as strategies for working with individuals who are hard of hearing and/or have other communication needs. The community's other outreach providers have similar training and plans for accessibility.

**4A-5. RRH Beds as Reported in the HIC. Applicants must report the total number of rapid rehousing beds available to serve all household types as reported in the Housing Inventory Count (HIC) for 2017 and 2018.**

	2017	2018	Difference
RRH beds available to serve all populations in the HIC	274	414	140

**4A-6. Rehabilitation or New Construction Costs.** Are new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

**4A-7. Homeless under Other Federal Statutes.** Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children or youth defined as homeless under other Federal statutes? 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
1C-5. PHA Administration Plan–Homeless Preference	No	PHA Administratio...	09/13/2018
1C-5. PHA Administration Plan–Move-on Multifamily Assisted Housing Owners' Preference	No		
1C-8. Centralized or Coordinated Assessment Tool	Yes	CE Assessment Tool	09/13/2018
1E-1. Objective Criteria–Rate, Rank, Review, and Selection Criteria (e.g., scoring tool, matrix)	Yes	CoC Rating and Ra...	09/13/2018
1E-3. Public Posting CoC-Approved Consolidated Application	Yes	Consolidated Appl...	09/17/2018
1E-3. Public Posting–Local Competition Rate, Rank, Review, and Selection Criteria (e.g., RFP)	Yes	Public Posting Pr...	09/13/2018
1E-4. CoC's Reallocation Process	Yes	CoC Process for R...	09/13/2018
1E-5. Notifications Outside e-snaps–Projects Accepted	Yes	Projects Accepted...	09/13/2018
1E-5. Notifications Outside e-snaps–Projects Rejected or Reduced	Yes	Project Rejection...	09/13/2018
1E-5. Public Posting–Local Competition Deadline	Yes	Local Competition...	09/13/2018
2A-1. CoC and HMIS Lead Governance (e.g., section of Governance Charter, MOU, MOA)	Yes	CoC and HMIS Lead...	09/13/2018
2A-2. HMIS–Policies and Procedures Manual	Yes	HMIS Policy and P...	09/13/2018
3A-6. HDX–2018 Competition Report	Yes	FY 2018 CoC Compe...	09/13/2018
3B-2. Order of Priority–Written Standards	No	Order of Priority	09/13/2018

3B-5. Racial Disparities Summary	No		
4A-7.a. Project List–Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
Other	No		
Other	No		
Other	No		



## **Attachment Details**

**Document Description:** PHA Administration Plan

## **Attachment Details**

**Document Description:**

## **Attachment Details**

**Document Description:** CE Assessment Tool

## **Attachment Details**

**Document Description:** CoC Rating and Ranking Procedure

## **Attachment Details**

**Document Description:** Consolidated Application

## **Attachment Details**

**Document Description:** Public Posting Project Selections, Ranking and

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CoC Application

## **Attachment Details**

**Document Description:** CoC Process for Realloaction

## **Attachment Details**

**Document Description:** Projects Accepted Notification

## **Attachment Details**

**Document Description:** Project Rejection - Reduction Notification

## **Attachment Details**

**Document Description:** Local Competition Deadline

## **Attachment Details**

**Document Description:** CoC and HMIS Lead Governance

## **Attachment Details**

**Document Description:** HMIS Policy and Procedures Manual

## **Attachment Details**

**Document Description:** FY 2018 CoC Competition Report

## **Attachment Details**

**Document Description:** Order of Priority

## **Attachment Details**

**Document Description:**

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**Document Description:**

## Submission Summary

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

Page	Last Updated
1A. Identification	09/12/2018
1B. Engagement	09/17/2018
1C. Coordination	09/17/2018
1D. Discharge Planning	09/17/2018
1E. Project Review	09/17/2018
2A. HMIS Implementation	09/17/2018
2B. PIT Count	09/17/2018
2C. Sheltered Data - Methods	09/17/2018
3A. System Performance	09/17/2018
3B. Performance and Strategic Planning	09/17/2018
4A. Mainstream Benefits and Additional Policies	09/17/2018
4B. Attachments	09/17/2018

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**Submission Summary**

No Input Required

## **Michigan State Housing Development Authority HCV Administration Plan**

## Chapter 4

### MSHDA Policy

MSHDA reserves the right to purge the waiting list by removing (deleting) all applications that were not selected during the 12-month period that began on the date the waiting list was closed.

### **Removal from the Waiting List**

#### MSHDA Policy

If at any time an applicant family is on the waiting list and MSHDA determines that the family is not eligible for assistance (see Chapter 3), the family will be removed from the waiting list.

If a family is removed from the waiting list because MSHDA has determined the family is not eligible for assistance, a notice will be sent to the family's address of record as well as to any alternate address provided on the initial application. The notice will state the reasons the family was removed from the waiting list and will inform the family how to request an informal review regarding MSHDA's decision (see Chapter 16) [24 CFR 982.201(f)].

## **PART III: SELECTION FOR HCV ASSISTANCE**

### **4-III.A. OVERVIEW**

As vouchers become available, families on the waiting list must be selected for assistance in accordance with the policies described in this part.

The order in which families are selected from the waiting list depends on the selection method chosen by MSHDA and is impacted in part by any selection preferences for which the family qualifies. The availability of targeted funding also may affect the order in which families are selected from the waiting list.

MSHDA must maintain a clear record of all information required to verify that the family is selected from the waiting list according to MSHDA's selection policies [24 CFR 982.204(b) and 982.207(e)].

### **4-III.B. SELECTION AND HCV FUNDING SOURCES**

#### **Special Admissions [24 CFR 982.203]**

HUD may award funding for specifically-named families living in specified types of units (e.g., a family that is displaced by demolition of public housing; a non-purchasing family residing in a HOPE 1 or 2 projects). In these cases, MSHDA may admit such families whether or not they are on the waiting list, if they are on the waiting list, without considering the family's position on the waiting list. These families are considered non-waiting list selections. MSHDA must maintain records showing that such families were admitted with special program funding.

#### MSHDA Policy:

MSHDA administers the following programs: Housing Conversion Actions



## Chapter 4

### **Targeted Funding [24 CFR 982.204(e)]**

HUD may award MSHDA funding for a specified category of families on the waiting list. MSHDA must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, MSHDA may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

#### MSHDA Policy

MSHDA administers the following types of targeted funding:

- VASH
- Non-Elderly Disabled (NED) (formerly Mainstream I)
- Mainstream 5
- Rental Assistance Demonstration Program (RAD)

### **Regular HCV Funding**

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

### **4-III.C. SELECTION METHOD**

MSHDA must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that MSHDA will use [24 CFR 982.202(d)].

#### **Local Preferences [24 CFR 982.207; HCV p. 4-16]**

MSHDA is permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits MSHDA to establish other local preferences, at its discretion. Any local preferences established must be consistent with MSHDA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

#### MSHDA Policy

MSHDA will offer a preference to any family that has been terminated from its Housing Choice Voucher (HCV) program due to insufficient program funding. These families will be drawn before all other waiting list preferences once program funding is reinstated to sufficient levels as determined by MSHDA.

A homeless preference is only assigned to applicants on the HCV waiting list who are also a Michigan resident.

**Effective January 1, 2019**, applicants will be sorted and drawn in the following hierarchy of HCV Waiting List Preferences:

## Chapter 4

1. **Homeless/ County of Application Residency** (Applicant who is homeless and is living or working in the county of application)
2. **Disabled County of Application Residency** (Applicant who is disabled and is living or working in the county of application)
3. **County of Application Residency** (Applicant who is living or working in the county of application)
4. **Michigan Residency** (Applicant not living or working in the county of application)
5. **Out of state Residency** (Non-Michigan resident)

In general, the homeless preference is valid for 120 days. In order to retain the homeless preference, the homeless service agency must recertify that the applicant meets the homeless preference every 120 days while on the HCV waiting list.

### **Income Targeting Requirement [24 CFR 982.201(b)(2)]**

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during MSHDA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income, whichever number is higher. To ensure this requirement is met, MSHDA may skip non-ELI families on the waiting list in order to select an ELI family.

Low income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

#### **MSHDA Policy**

MSHDA will monitor progress in meeting the income targeting requirement throughout the fiscal year. Extremely low-income families will be selected ahead of other eligible families on an as-needed basis to ensure the income targeting requirement is met.

### **Order of Selection**

MSHDA system of preferences may select families based on local preferences according to the date and time of application, or by a random selection process [24 CFR 982.207(c)]. If a PHA does not have enough funding to assist the family at the top of the waiting list, it is not permitted to skip down the waiting list to a family that it can afford to subsidize when there are not sufficient funds to subsidize the family at the top of the waiting list [24 CFR 982.204(d) and (e)].

#### **MSHDA Policy**

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with MSHDA's hierarchy of preferences, if applicable. Within each targeted funding or preference category, families will be selected according to the date and time assigned to the completed application.

## Chapter 4

Documentation will be maintained by MSHDA as to whether families on the list qualify for and are interested in targeted funding. If a higher placed family on the waiting list is not qualified or not interested in targeted funding, there will be a notation maintained so that MSHDA does not have to ask higher placed families each time targeted selections are made.

If the applicant claimed a residency preference on their original or updated application, residency preference verification documentation must be received by MSHDA at the time the applicant is pulled from the waiting list.

Proof that that the head of household, spouse, or co-head currently lives in the County:

- A copy of a valid driver's license which includes a current address
- A copy of a valid state ID card which includes a current address
- A copy of a valid Medicaid card which includes a current address
- A valid Social Security printout letter which includes a current address
- A copy of a valid voter's registration card which includes a current address
- A letter from the Homeless Shelter, HARA, or Lead Agency indicating residency

Proof that the head of household, spouse, or co-head currently works in the County:

- A letter from the employer stating the applicant is employed in the County.
- A letter from the employer stating the applicant will be employed in the County.
- A copy of a valid paycheck stub with the employer's address showing the business is located in the County.

MSHDA's admission income eligibility criteria is that 80% of new admissions must be extremely low income families and up to 20% of new admissions must be very low income families.

### 4-III.D. NOTIFICATION OF SELECTION

When a family has been selected from the waiting list, MSHDA must notify the family. [24 CFR 982.554(a)].

#### MSHDA Policy

MSHDA generally does not conduct face-to-face interviews to collect the application and supporting documents. Families are required to return the application and supporting documents.

MSHDA will notify the family by first class mail no later than 10 business days from the date of selection from the waiting list. The notice will inform the family of the following:

## **Grand Rapids Housing Commission Project-Based Vouchers Plan**

## Chapter 17

### PROJECT-BASED VOUCHERS

#### INTRODUCTION

This chapter describes HUD regulations and GRHC policies related to the project-based voucher (PBV) program in nine parts:

Part I: General Requirements. This part describes general provisions of the PBV program including maximum budget authority requirements, relocation requirements, and equal opportunity requirements.

Part II: PBV Owner Proposals. This part includes policies related to the submission and selection of owner proposals for PBV assistance. It describes the factors the GRHC will consider when selecting proposals, the type of housing that is eligible to receive PBV assistance, the cap on assistance at projects receiving PBV assistance, subsidy layering requirements, site selection standards, and environmental review requirements.

Part III: Dwelling Units. This part describes requirements related to housing quality standards, the type and frequency of inspections, and housing accessibility for persons with disabilities.

Part IV: Rehabilitated and Newly Constructed Units. This part describes requirements and policies related to the development and completion of rehabilitated and newly constructed housing units that will be receiving PBV assistance.

Part V: Housing Assistance Payments Contract. This part discusses HAP contract requirements and policies including the execution, term, and termination of the HAP contract. In addition, it describes how the HAP contract may be amended and identifies provisions that may be added to the HAP contract at the GRHC's discretion.

Part VI: Selection of PBV Program Participants. This part describes the requirements and policies governing how the GRHC and the owner will select a family to receive PBV assistance.

Part VII: Occupancy. This part discusses occupancy requirements related to the lease, and describes under what conditions families are allowed or required to move. In addition, exceptions to the occupancy cap (which limits PBV assistance to 25 percent of the units in any project) are also discussed.

Part VIII: Determining Rent to Owner. This part describes how the initial rent to owner is determined, and how rent will be redetermined throughout the life of the HAP contract. Rent reasonableness requirements are also discussed.

Part IX: Payments to Owner. This part describes the types of payments owners may receive under this program.

#### **17-VI.C. ORGANIZATION OF THE WAITING LIST [24 CFR 983.251(c)]**

The GRHC may establish a separate waiting list for PBV units or it may use the same waiting list for both tenant-based and PBV assistance. The GRHC may also merge the PBV waiting list with a waiting list for other assisted housing programs offered by the GRHC. If the GRHC chooses to offer a separate waiting list for PBV assistance, the GRHC must offer to place applicants who are listed on the tenant-based waiting list on the waiting list for PBV assistance.

If a GRHC decides to establish a separate PBV waiting list, the GRHC may use a single waiting list for the GRHC's whole PBV program, or it may establish separate waiting lists for PBV units in particular projects or buildings or for sets of such units.

##### GRHC Policy

The GRHC will establish and manage separate waiting lists for individual projects or buildings that are receiving PBV assistance. The GRHC currently has waiting lists for the following PBV projects:

[Calumet, Verne Berry, Oroquis, Heron Manor, Heron Court, Sheldon, Creston Plaza, Campau Commons, and Leonard Terrace].

#### **17-VI.D. SELECTION FROM THE WAITING LIST [24 CFR 983.251(c)]**

Applicants who will occupy units with PBV assistance must be selected from the GRHC's waiting list. The GRHC may establish selection criteria or preferences for occupancy of particular PBV units. The GRHC may place families referred by the PBV owner on its PBV waiting list.

##### **Income Targeting [24 CFR 983.251(c)(6)]**

At least 75 percent of the families admitted to the GRHC's tenant-based and project-based voucher programs during the GRHC fiscal year from the waiting list must be extremely-low income families. The income targeting requirement applies to the total of admissions to both programs.

##### **Units with Accessibility Features [24 CFR 983.251(c)(7)]**

When selecting families to occupy PBV units that have special accessibility features for persons with disabilities, the GRHC must first refer families who require such features to the owner.



### **Preferences [24 CFR 983.251(d), FR Notice 11/24/08]**

The GRHC may use the same selection preferences that are used for the tenant-based voucher program, establish selection criteria or preferences for the PBV program as a whole, or for occupancy of particular PBV developments or units. The GRHC must provide an absolute selection preference for eligible in-place families as described in Section 17-VI.B. above.

Although the GRHC is prohibited from granting preferences to persons with a specific disability, the GRHC may give preference to disabled families who need services offered at a particular project or site if the preference is limited to families (including individuals):

- With disabilities that significantly interfere with their ability to obtain and maintain themselves in housing;
- Who, without appropriate supportive services, will not be able to obtain or maintain themselves in housing; and
- For whom such services cannot be provided in a non-segregated setting.

In advertising such a project, the owner may advertise the project as offering services for a particular type of disability; however, the project must be open to all otherwise eligible disabled persons who may benefit from services provided in the project. In these projects, disabled residents may not be required to accept the particular services offered as a condition of occupancy.

If the GRHC has projects with more than 25 percent of the units receiving project-based assistance because those projects include “excepted units” (units specifically made available for elderly or disabled families, or families receiving supportive services), the GRHC must give preference to such families when referring families to these units [24 CFR 983.261(b)].

#### GRHC Policy

The GRHC will provide a selection preference when required by the regulation (e.g., eligible in-place families, qualifying families for “excepted units,” mobility impaired persons for accessible units). The following additional preferences have been established for the PBV program (not owned).

Calumet Flats (see agreement)

Verne Berry Place (see agreement)

Oroiquis (see agreement)

Heron Manor (see agreement)

Heron Court (see agreement)

## **Heartside Nonprofit Housing Corporation: Verne Barry Place Description**



### 3B. Project Description

**1. Provide a description that addresses the entire scope of the proposed project.**

Verne Barry Place consists of 116 single occupancy units, and since its inception has served hundreds of homeless individuals with disabilities. Verne Barry Place only serves persons where the head of household has a qualifying disability and is in Categories One and Four of the homeless definition as defined under 24 CFR 578.3. Verne Barry Place provides a comprehensive service enriched housing opportunity with available on-site support services - two Resident Services Coordinators are on-site to assist residents with coordination of services. Beginning in FY 2016, Verne Barry Place will now take all project referrals from Coordinated Assessment. In addition, the project now prioritizes all of its non-dedicated beds for the chronically homeless.

**2. Does your project have a specific population focus?** Yes

**2a. Please identify the specific population focus. (Select ALL that apply)**

Chronic Homeless	<input checked="" type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input checked="" type="checkbox"/>
Families with Children	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input checked="" type="checkbox"/>

**Other:** Homeless individuals with disabilities

**3. Housing First**

**3a. Does the project quickly move participants into permanent housing?** Yes

**3b. Does the project ensure that participants are not screened out based on the following items? Select all that apply.**

Having too little or little income	<input checked="" type="checkbox"/>
------------------------------------	-------------------------------------

**Applicant:** Heartside Nonprofit Housing Corporation  
**Project:** Verne Barry Place

14-924-8432  
166044

Active or history of substance use	<input checked="checked" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="checked" type="checkbox"/>
None of the above	<input type="checkbox"/>

**3c. Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply.**

Failure to participate in supportive services	<input checked="checked" type="checkbox"/>
Failure to make progress on a service plan	<input checked="checked" type="checkbox"/>
Loss of income or failure to improve income	<input checked="checked" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="checked" type="checkbox"/>
None of the above	<input type="checkbox"/>

**3d. Does the project follow a "Housing First" approach?** No

**HAP Contract: Grand Rapids Housing Commission and  
Heartside Nonprofit Housing Corporation**

**U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
Office of Public and Indian Housing**

**SECTION 8  
HOUSING ASSISTANCE PAYMENTS  
MODERATE REHABILITATION PROGRAM**

**RENEWAL OF HAP CONTRACT**

**1. BACKGROUND**

Previously, the PHA entered into a HAP contract with the owner under the Section 8 Moderate Rehabilitation Program. The HAP contract provided for Section 8 housing assistance payments by the PHA to the owner. The HAP contract identified covered contract units and specified the term of the HAP contract for such units.

The term of the HAP contract expires during federal fiscal year 2001. Under Section 524 of the Multifamily Assisted Housing Reform and Affordability Act of 1997 (MAHRA) (Public Law 105-65, October 27, 1997, 111 Stat. 1344 et. seq.) as amended, HUD is authorized to renew expiring Section 8 contracts. This renewal contract is entered in accordance with Section 524(b)(3) of MAHRA as amended.

The one-year term of the renewal contract commences on the day after the HAP contract expires. The commencement date is specified in the "contract information" attached as an exhibit to this renewal contract.

**2. DEFINITIONS**

Commencement date. The beginning of the one-year renewal term. (The commencement date is specified in the contract information exhibit.)

Contract information. An exhibit attached to and made a part of this renewal contract. The exhibit specifies the amount of budget authority, commencement date of the renewal term, number of units, number of bedrooms and contract rent.

Contract units. The units covered by this renewal contract.

Federal fiscal year 2001. The period from October 1, 2000 through September 30, 2001.

HAP contract. Section 8 Housing Assistance Payments Contract.

HUD. The U.S. Department of Housing and Urban Development.

One year. 365 days.

PHA. Public Housing Agency

Public Housing Agency (PHA). The agency that has entered this renewal contract with the owner.

Section 8. Section 8 of the United States Housing Act of 1937 (42 U.S.C. 1437f).

**3. TERM OF RENEWAL**

The expiring HAP contract is renewed for a period of one year (365 days) beginning on the commencement date.

---

4. **CONTRACT RENT**

During the renewal term, the monthly contract rents for the contract units described in the exhibit of contract information shall be the amounts specified in the exhibit. The owner shall not receive any other payment or compensation for rental of the units.

Notwithstanding the amounts of the contract rents specified in the exhibit of contract information, contract rents shall in no event exceed the rent levels permitted by Section 524(b)(3) of MAHRA as amended. Such rent levels shall be calculated in accordance with HUD instructions.

During the renewal term, the following provisions of the expiring HAP contract do not apply:

- a. Provisions concerning annual and special adjustments of contract rent.
- b. Provisions concerning base rent.

If the renewal term commences on a date other than the first day of a calendar month, or ends on a date other than the last day of a calendar month, contract rent shall be pro-rated.

5. **RENEWAL OF OTHER TERMS**

Except as provided in section 4 of this renewal contract, all terms of the expiring HAP contract are renewed.

6. **MAXIMUM PAYMENT**

Notwithstanding any other provision of the expiring HAP contract or this renewal contract, aggregate payments by the PHA to the owner under this renewal contract shall in no event exceed the amount of budget authority specified in the exhibit of contract information.

(For a HAP contract renewed in stages, aggregate payments for all stages under this renewal contract, shall in no event exceed such amount.)

7. **OWNER RESPONSIBILITY**

Housing quality standards. The owner warrants that the contract units comply with HUD's Housing Quality Standards, and will so comply at all times during the term of this renewal contract.

Conditions for housing assistance payments. Unless the owner complies with the HAP contract and this renewal contract, the owner does not have a right to receive housing assistance payments.

8. **EXCLUSION OF THIRD PARTY RIGHTS**

The PHA does not assume any responsibility for injury to, or any liability to, any person injured as a result of the owner's action or failure to act in connection with the implementation of the HAP contract or renewal contract, or as a result of any other action or failure to act by the owner.

The owner is not the agent of the PHA, and the HAP contract or renewal contract does not create or affect any relationship between the PHA and any lender to the owner or any suppliers, employees, contractors or subcontractors used by the owner.

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Nothing in the HAP contract or renewal contract shall be construed as creating any right of an assisted family or other third party (other than HUD) to enforce any provision of the HAP contract or renewal contract, or to assert any claim against HUD, the PHA or the owner under the HAP contract or renewal contract.

9. **NOTICE**

In accordance with Section 8(c)(8)(A) and (B) of the United States Housing Act of 1937, as amended, the owner shall provide, at a minimum, a one year written notice to the PHA and the assisted family to inform the family of the impending HAP contract termination. The term "termination" means the expiration of the HAP contract or an owner's refusal to renew the contract. The notice shall comply with HUD requirements, and other requirements, including any amendments and changes in the law or HUD requirements. If the owner fails to provide this notice in accordance with HUD requirements, HUD may require that the owner permit each assisted family to remain in the unit for the full notice period without increasing the family portion of the rent under the expiring contract.

Signatures:

**PUBLIC HOUSING AGENCY**

Grand Rapids Housing Commission

Print Name of PHA

By:

Signature

Carlos A. Sanchez, Executive Director

Print Name and Title of Signatory

Date

5/2/18

**OWNER**

Heartside Non-Profit Housing Corporation

Print Name of Owner

By:

Signature

Dennis Sturtevant, President

Print Name and Title of Signatory

Date

Moderate Rehabilitation Program  
Renewal of HAP contract: 2001

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### CONTRACT INFORMATION

Contract Number: MI 073 MR0001 HAP 0004

Project name: Verne Barry Place

Address: 60 South Division Avenue

City and State: Grand Rapids, Michigan 49503

Budget authority amount: \$ \$615,072

Commencement date: April 1, 2018

Number of Units	Number of Bedrooms	Contract Rent (per month)
86	1-Bedroom	\$597.

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Moderate Rehabilitation Program  
Renewal of HAP contract: 2001



**NOTE:** The VI-SPDAT is also available in specific formats for single adults and transition-age youth, respectively (these documents were not attached due to limits on document size in e-snaps)

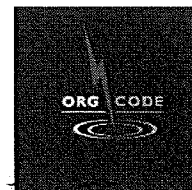
**Vulnerability Index -  
Service Prioritization Decision Assistance Tool  
(VI-SPDAT)**

**Prescreen Triage Tool for Families**

**AMERICAN VERSION 2.0**

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**COMMUNITY  
SOLUTIONS**



## Welcome to the SPDAT Line of Products

The Service Prioritization Decision Assistance Tool (SPDAT) has been around in various incarnations for over a decade, before being released to the public in 2010. Since its initial release, the use of the SPDAT has been expanding exponentially and is now used in over one thousand communities across the United States, Canada, and Australia.

More communities using the tool means there is an unprecedented demand for versions of the SPDAT, customized for specific client groups or types of users. With the release of SPDAT V4, there have been more current versions of SPDAT products than ever before.

### VI-SPDAT Series

The Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) was developed as a pre-screening tool for communities that are very busy and do not have the resources to conduct a full SPDAT assessment for every client. It was made in collaboration with Community Solutions, creators of the Vulnerability Index, as a brief survey that can be conducted to quickly determine whether a client has high, moderate, or low acuity. The use of this survey can help prioritize which clients should be given a full SPDAT assessment first. Because it is a self-reported survey, no special training is required to use the VI-SPDAT.

#### **Current versions available:**

- VI-SPDAT V 2.0 for Individuals
- VI-SPDAT V 2.0 for Families
- VI-SPDAT V 2.0 for Youth

All versions are available online at

[www.orgcode.com/products/vi-spdats/](http://www.orgcode.com/products/vi-spdats/)

### SPDAT Series

The Service Prioritization Decision Assistance Tool (SPDAT) was developed as an assessment tool for front-line workers at agencies that work with homeless clients to prioritize which of those clients should receive assistance first. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. They provide an in-depth assessment that relies on the assessor's ability to interpret responses and corroborate those with evidence. As a result, this tool may only be used by those who have received proper, up-to-date training provided by OrgCode Consulting, Inc. or an OrgCode certified trainer.

#### **Current versions available:**

- SPDAT V 4.0 for Individuals
- SPDAT V 4.0 for Families
- SPDAT V 4.0 for Youth

Information about all versions is available online at

[www.orgcode.com/products/spdat/](http://www.orgcode.com/products/spdat/)

## SPDAT Training Series

To use the SPDAT, training by OrgCode or an OrgCode certified trainer is required. We provide training on a wide variety of topics over a variety of mediums.

The full-day in-person SPDAT Level 1 training provides you the opportunity to bring together as many people as you want to be trained for one low fee. The webinar training allows for a maximum of 15 different computers to be logged into the training at one time. We also offer online courses for individuals that you can do at your own speed.

The training gives you the manual, case studies, application to current practice, a review of each component of the tool, conversation guidance with prospective clients – and more!

### ***Current SPDAT training available:***

- Level 0 SPDAT Training: VI-SPDAT for Frontline Workers
- Level 1 SPDAT Training: SPDAT for Frontline Workers
- Level 2 SPDAT Training: SPDAT for Supervisors
- Level 3 SPDAT Training: SPDAT for Trainers

### ***Other related training available:***

- Excellence in Housing-Based Case Management
- Coordinated Access & Common Assessment
- Motivational Interviewing
- Objective-Based Interactions

More information about SPDAT training, including pricing, is available online at

<http://www.orgcode.com/product-category/training/spdat/>

## Administration

<b>Interviewer's Name</b>	<b>Agency</b>	<input type="radio"/> Team <input type="radio"/> Staff <input type="radio"/> Volunteer
<b>Survey Date</b> DD/MM/YYYY ____/____/____	<b>Survey Time</b> ____:____	<b>Survey Location</b> _____

## Opening Script

Every assessor in your community regardless of organization completing the VI-SPDAT should use the same introductory script. In that script you should highlight the following information:

- the name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- the purpose of the VI-SPDAT being completed
- that it usually takes less than 7 minutes to complete
- that only "Yes," "No," or one-word answers are being sought
- that any question can be skipped or refused
- where the information is going to be stored
- that if the participant does not understand a question that clarification can be provided
- the importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

## Basic Information

<b>PARENT 1</b>	<b>First Name</b>	<b>Nickname</b>	<b>Last Name</b>
	In what language do you feel best able to express yourself? _____		
	<b>Date of Birth</b> DD/MM/YYYY ____/____/____	<b>Age</b>	<b>Social Security Number</b>
			<b>Consent to participate</b> <input type="radio"/> Yes <input type="radio"/> No
<b>PARENT 2</b>	<input type="checkbox"/> No second parent currently part of the household		
	<b>First Name</b>	<b>Nickname</b>	<b>Last Name</b>
	In what language do you feel best able to express yourself? _____		
	<b>Date of Birth</b> DD/MM/YYYY ____/____/____	<b>Age</b>	<b>Social Security Number</b>
			<b>Consent to participate</b> <input type="radio"/> Yes <input type="radio"/> No
IF EITHER HEAD OF HOUSEHOLD IS 60 YEARS OF AGE OR OLDER, THEN SCORE 1. <b>SCORE:</b> <div style="border: 1px solid black; width: 100px; height: 30px; display: inline-block;"></div>			

## Children

- How many children under the age of 18 are currently with you? \_\_\_\_\_ ☐ Refused
- How many children under the age of 18 are not currently with your family, but you have reason to believe they will be joining you when you get housed? \_\_\_\_\_ ☐ Refused
- IF HOUSEHOLD INCLUDES A FEMALE: Is any member of the family currently pregnant? ☒ Y ☐ N ☐ Refused
- Please provide a list of children's names and ages:

First Name	Last Name	Age	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IF THERE IS A SINGLE PARENT WITH 2+ CHILDREN, AND/OR A CHILD AGED 11 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.

**SCORE:**

IF THERE ARE TWO PARENTS WITH 3+ CHILDREN, AND/OR A CHILD AGED 6 OR YOUNGER, AND/OR A CURRENT PREGNANCY, THEN SCORE 1 FOR **FAMILY SIZE**.

0

## A. History of Housing and Homelessness

- Where do you and your family sleep most frequently? (check one)
  - ☒ Shelters
  - ☐ Transitional Housing
  - ☐ Safe Haven
  - ☐ Outdoors
  - ☐ Other (specify): \_\_\_\_\_
  - ☐ Refused

IF THE PERSON ANSWERS ANYTHING OTHER THAN "SHELTER", "TRANSITIONAL HOUSING", OR "SAFE HAVEN", THEN SCORE 1.

**SCORE:**

0

- How long has it been since you and your family lived in permanent stable housing? \_\_\_\_\_ Years ☐ Refused
- In the last three years, how many times have you and your family been homeless? \_\_\_\_\_ ☐ Refused

IF THE FAMILY HAS EXPERIENCED 1 OR MORE CONSECUTIVE YEARS OF HOMELESSNESS, AND/OR 4+ EPISODES OF HOMELESSNESS, THEN SCORE 1.

**SCORE:**

0

## B. Risks

8. In the past six months, how many times have you or anyone in your family...

- a) Received health care at an emergency department/room? ☐ ☐ Refused
- b) Taken an ambulance to the hospital? ☐ ☐ Refused
- c) Been hospitalized as an inpatient? ☐ ☐ Refused
- d) Used a crisis service, including sexual assault crisis, mental health crisis, family/intimate violence, distress centers and suicide prevention hotlines? ☐ ☐ Refused
- e) Talked to police because they witnessed a crime, were the victim of a crime, or the alleged perpetrator of a crime or because the police told them that they must move along? ☐ ☐ Refused
- f) Stayed one or more nights in a holding cell, jail or prison, whether that was a short-term stay like the drunk tank, a longer stay for a more serious offence, or anything in between? ☐ ☐ Refused

IF THE TOTAL NUMBER OF INTERACTIONS EQUALS 4 OR MORE, THEN SCORE 1 FOR EMERGENCY SERVICE USE.

SCORE:

0

9. Have you or anyone in your family been attacked or beaten up since they've become homeless? ☐ Y ☐ N ☐ Refused

10. Have you or anyone in your family threatened to or tried to harm themselves or anyone else in the last year? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF HARM.

SCORE:

0

11. Do you or anyone in your family have any legal stuff going on right now that may result in them being locked up, having to pay fines, or that make it more difficult to rent a place to live? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR LEGAL ISSUES.

SCORE:

0

12. Does anybody force or trick you or anyone in your family to do things that you do not want to do? ☐ Y ☐ N ☐ Refused

13. Do you or anyone in your family ever do things that may be considered to be risky like exchange sex for money, run drugs for someone, have unprotected sex with someone they don't know, share a needle, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR RISK OF EXPLOITATION.

SCORE:

0

## C. Socialization & Daily Functioning

14. Is there any person, past landlord, business, bookie, dealer, or government group like the IRS that thinks you or anyone in your family owe them money? ☐ Y ☐ N ☐ Refused

15. Do you or anyone in your family get any money from the government, a pension, an inheritance, working under the table, a regular job, or anything like that? ☐ Y ☐ N ☐ Refused

IF "YES" TO QUESTION 14 OR "NO" TO QUESTION 15, THEN SCORE 1 FOR **MONEY MANAGEMENT**.

SCORE:

0

16. Does everyone in your family have planned activities, other than just surviving, that make them feel happy and fulfilled? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **MEANINGFUL DAILY ACTIVITY**.

SCORE:

0

17. Is everyone in your family currently able to take care of basic needs like bathing, changing clothes, using a restroom, getting food and clean water and other things like that? ☐ Y ☐ N ☐ Refused

IF "NO," THEN SCORE 1 FOR **SELF-CARE**.

SCORE:

0

18. Is your family's current homelessness in any way caused by a relationship that broke down, an unhealthy or abusive relationship, or because other family or friends caused your family to become evicted? ☐ Y ☐ N ☐ Refused

IF "YES," THEN SCORE 1 FOR **SOCIAL RELATIONSHIPS**.

SCORE:

0

## D. Wellness

19. Has your family ever had to leave an apartment, shelter program, or other place you were staying because of the physical health of you or anyone in your family? ☐ Y ☐ N ☐ Refused

20. Do you or anyone in your family have any chronic health issues with your liver, kidneys, stomach, lungs or heart? ☐ Y ☐ N ☐ Refused

21. If there was space available in a program that specifically assists people that live with HIV or AIDS, would that be of interest to you or anyone in your family? ☐ Y ☐ N ☐ Refused

22. Does anyone in your family have any physical disabilities that would limit the type of housing you could access, or would make it hard to live independently because you'd need help? ☐ Y ☐ N ☐ Refused

23. When someone in your family is sick or not feeling well, does your family avoid getting medical help? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **PHYSICAL HEALTH**.

SCORE:

0



# VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

24. Has drinking or drug use by you or anyone in your family led your family to being kicked out of an apartment or program where you were staying in the past? ☐ Y ☐ N ☐ Refused

25. Will drinking or drug use make it difficult for your family to stay housed or afford your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **SUBSTANCE USE**.

SCORE:

0

26. Has your family ever had trouble maintaining your housing, or been kicked out of an apartment, shelter program or other place you were staying, because of:

a) A mental health issue or concern? ☐ Y ☐ N ☐ Refused

b) A past head injury? ☐ Y ☐ N ☐ Refused

c) A learning disability, developmental disability, or other impairment? ☐ Y ☐ N ☐ Refused

27. Do you or anyone in your family have any mental health or brain issues that would make it hard for your family to live independently because help would be needed? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, THEN SCORE 1 FOR **MENTAL HEALTH**.

SCORE:

0

28. IF THE FAMILY SCORED 1 EACH FOR PHYSICAL HEALTH, SUBSTANCE USE, AND MENTAL HEALTH: Does any single member of your household have a medical condition, mental health concerns, **and** experience with problematic substance use? ☐ Y ☐ N ☐ N/A or Refused

IF "YES", SCORE 1 FOR **TRI-MORBIDITY**.

SCORE:

0

29. Are there any medications that a doctor said you or anyone in your family should be taking that, for whatever reason, they are not taking? ☐ Y ☐ N ☐ Refused

30. Are there any medications like painkillers that you or anyone in your family don't take the way the doctor prescribed or where they sell the medication? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR **MEDICATIONS**.

SCORE:

0

31. YES OR NO: Has your family's current period of homelessness been caused by an experience of emotional, physical, psychological, sexual, or other type of abuse, or by any other trauma you or anyone in your family have experienced? ☐ Y ☐ N ☐ Refused

IF "YES", SCORE 1 FOR **ABUSE AND TRAUMA**.

SCORE:

0

## E. Family Unit

32. Are there any children that have been removed from the family by a child protection service within the last 180 days? ☐ Y ☐ N ☐ Refused

33. Do you have any family legal issues that are being resolved in court or need to be resolved in court that would impact your housing or who may live within your housing? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY LEGAL ISSUES.

SCORE:

0

34. In the last 180 days have any children lived with family or friends because of your homelessness or housing situation? ☐ Y ☐ N ☐ Refused

35. Has any child in the family experienced abuse or trauma in the last 180 days? ☐ Y ☐ N ☐ Refused

36. IF THERE ARE SCHOOL-AGED CHILDREN: Do your children attend school more often than not each week? ☐ Y ☐ N ☐ N/A or Refused

IF "YES" TO ANY OF QUESTIONS 34 OR 35, OR "NO" TO QUESTION 36, SCORE 1 FOR NEEDS OF CHILDREN.

SCORE:

0

37. Have the members of your family changed in the last 180 days, due to things like divorce, your kids coming back to live with you, someone leaving for military service or incarceration, a relative moving in, or anything like that? ☐ Y ☐ N ☐ Refused

38. Do you anticipate any other adults or children coming to live with you within the first 180 days of being housed? ☐ Y ☐ N ☐ Refused

IF "YES" TO ANY OF THE ABOVE, SCORE 1 FOR FAMILY STABILITY.

SCORE:

0

39. Do you have two or more planned activities each week as a family such as outings to the park, going to the library, visiting other family, watching a family movie, or anything like that? ☐ Y ☐ N ☐ Refused

40. After school, or on weekends or days when there isn't school, is the total time children spend each day where there is no interaction with you or another responsible adult...

a) 3 or more hours per day for children aged 13 or older? ☐ Y ☐ N ☐ Refused

b) 2 or more hours per day for children aged 12 or younger? ☐ Y ☐ N ☐ Refused

41. IF THERE ARE CHILDREN BOTH 12 AND UNDER & 13 AND OVER: Do your older kids spend 2 or more hours on a typical day helping their younger sibling(s) with things like getting ready for school, helping with homework, making them dinner, bathing them, or anything like that? ☐ Y ☐ N ☐ N/A or Refused

IF "NO" TO QUESTION 39, OR "YES" TO ANY OF QUESTIONS 40 OR 41, SCORE 1 FOR PARENTAL ENGAGEMENT.

SCORE:

0

## Scoring Summary

DOMAIN	SUBTOTAL	RESULTS
PRE-SURVEY	0 /2	<b>Score: Recommendation:</b>  0-3 no housing intervention 4-8 an assessment for Rapid Re-Housing 9+ an assessment for Permanent Supportive Housing/Housing First
A. HISTORY OF HOUSING & HOMELESSNESS	0 /2	
B. RISKS	0 /4	
C. SOCIALIZATION & DAILY FUNCTIONS	0 /4	
D. WELLNESS	0 /6	
E. FAMILY UNIT	0 /4	
<b>GRAND TOTAL:</b>	<b>0 /22</b>	

## Follow-Up Questions

On a regular day, where is it easiest to find you and what time of day is easiest to do so?	place: _____ time: ____ : ____ or Night
Is there a phone number and/or email where someone can safely get in touch with you or leave you a message?	phone: (____) _____ - _____ email: _____
Ok, now I'd like to take your picture so that it is easier to find you and confirm your identity in the future. May I do so?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused

Communities are encouraged to think of additional questions that may be relevant to the programs being operated or your specific local context. This may include questions related to:

- military service and nature of discharge
- ageing out of care
- mobility issues
- legal status in country
- income and source of it
- current restrictions on where a person can legally reside
- children that may reside with the adult at some point in the future
- safety planning

## Appendix A: About the VI-SPDAT

The HEARTH Act and federal regulations require communities to have an assessment tool for coordinated entry - and the VI-SPDAT and SPDAT meet these requirements. Many communities have struggled to comply with this requirement, which demands an investment of considerable time, resources and expertise. Others are making it up as they go along, using “gut instincts” in lieu of solid evidence. Communities need a practical, evidence-informed way to satisfy federal regulations while quickly implementing an effective approach to access and assessment. The VI-SPDAT is a first-of-its-kind tool designed to fill this need, helping communities end homelessness in a quick, strategic fashion.

### The VI-SPDAT

The VI-SPDAT was initially created by combining the elements of the Vulnerability Index which was created and implemented by Community Solutions broadly in the 100,000 Homes Campaign, and the SPDAT Prescreen Instrument that was part of the Service Prioritization Decision Assistance Tool. The combination of these two instruments was performed through extensive research and development, and testing. The development process included the direct voice of hundreds of persons with lived experience.

The VI-SPDAT examines factors of current vulnerability and future housing stability. It follows the structure of the SPDAT assessment tool, and is informed by the same research backbone that supports the SPDAT - almost 300 peer reviewed published journal articles, government reports, clinical and quasi-clinical assessment tools, and large data sets. The SPDAT has been independently tested, as well as internally reviewed. The data overwhelmingly shows that when the SPDAT is used properly, housing outcomes are better than when no assessment tool is used.

The VI-SPDAT is a triage tool. It highlights areas of higher acuity, thereby helping to inform the type of support and housing intervention that may be most beneficial to improve long term housing outcomes. It also helps inform the order - or priority - in which people should be served. The VI-SPDAT does not make decisions; it informs decisions. The VI-SPDAT provides data that communities, service providers, and people experiencing homelessness can use to help determine the best course of action next.

### Version 2

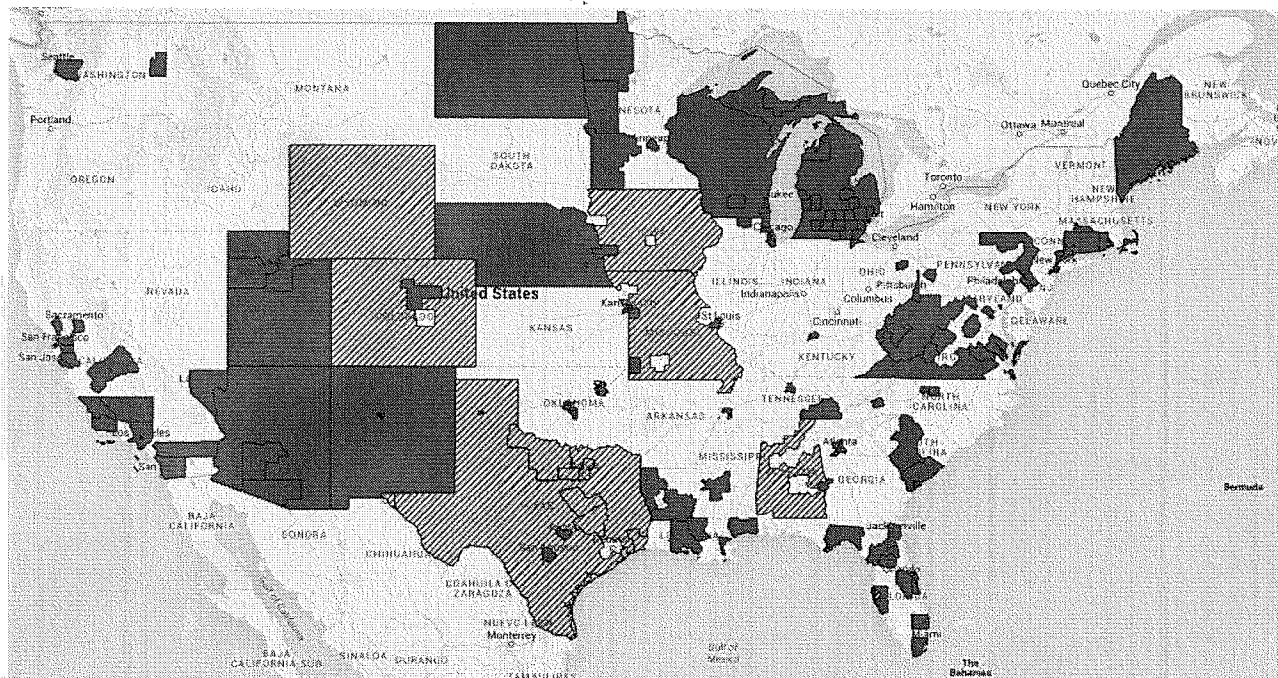
Version 2 builds upon the success of Version 1 of the VI-SPDAT with some refinements. Starting in August 2014, a survey was launched of existing VI-SPDAT users to get their input on what should be amended, improved, or maintained in the tool. Analysis was completed across all of these responses. Further research was conducted. Questions were tested and refined over several months, again including the direct voice of persons with lived experience and frontline practitioners. Input was also gathered from senior government officials that create policy and programs to help ensure alignment with guidelines and funding requirements.

You will notice some differences in Version 2 compared to Version 1. Namely:

- it is shorter, usually taking less than 7 minutes to complete;
- subjective elements through observation are now gone, which means the exact same instrument can be used over the phone or in-person;
- medical, substance use, and mental health questions are all refined;
- you can now explicitly see which component of the full SPDAT each VI-SPDAT question links to; and,
- the scoring range is slightly different (Don't worry, we can provide instructions on how these relate to results from Version 1).

## Appendix B: Where the VI-SPDAT is being used in the United States

Since the VI-SPDAT is provided completely free of charge, and no training is required, any community is able to use the VI-SPDAT without the explicit permission of Community Solutions or OrgCode Consulting, Inc. As a result, the VI-SPDAT is being used in more communities than we know of. It is also being used in Canada and Australia.





# VULNERABILITY INDEX - SERVICE PRIORITIZATION DECISION ASSISTANCE TOOL (VI-SPDAT)

FAMILIES

AMERICAN VERSION 2.0

A partial list of continua of care (CoCs) in the US where we know the VI-SPDAT is being used includes:

## Alabama

- Parts of Alabama Balance of State

## Arizona

- Statewide

## California

- San Jose/Santa Clara City & County
- San Francisco
- Oakland/Alameda County
- Sacramento City & County
- Richmond/Contra Costa County
- Watsonville/Santa Cruz City & County
- Fresno/Madera County
- Napa City & County
- Los Angeles City & County
- San Diego
- Santa Maria/Santa Barbara County
- Bakersfield/Kern County
- Pasadena
- Riverside City & County
- Glendale
- San Luis Obispo County

## Colorado

- Metropolitan Denver Homeless Initiative
- Parts of Colorado Balance of State

## Connecticut

- Hartford
- Bridgeport/Stratford/Fairfield
- Connecticut Balance of State
- Norwalk/Fairfield County
- Stamford/Greenwich
- City of Waterbury

## District of Columbia

- District of Columbia

## Florida

- Sarasota/Bradenton/Manatee, Sarasota Counties
- Tampa/Hillsborough County
- St. Petersburg/Clearwater/Largo/Pinellas County
- Tallahassee/Leon County
- Orlando/Orange, Osceola, Seminole Counties
- Gainesville/Alachua, Putnam Counties
- Jacksonville-Duval, Clay Counties
- Palm Bay/Melbourne/Brevard County
- Ocala/Marion County
- Miami/Dade County
- West Palm Beach/Palm Beach County

## Georgia

- Atlanta County
- Fulton County
- Columbus-Muscogee/Russell County
- Marietta/Cobb County
- DeKalb County

## Hawaii

- Honolulu

## Illinois

- Rockford/Winnebago, Boone Counties
- Waukegan/North Chicago/Lake County
- Chicago
- Cook County

## Iowa

- Parts of Iowa Balance of State

## Kansas

- Kansas City/Wyandotte County

## Kentucky

- Louisville/Jefferson County

## Louisiana

- Lafayette/Acadiana
- Shreveport/Bossier/Northwest
- New Orleans/Jefferson Parish
- Baton Rouge
- Alexandria/Central Louisiana CoC

## Massachusetts

- Cape Cod Islands
- Springfield/Holyoke/Chicopee/Westfield/Hampden County

## Maryland

- Baltimore City
- Montgomery County

## Maine

- Statewide

## Michigan

- Statewide

## Minnesota

- Minneapolis/Hennepin County
- Northwest Minnesota
- Moorhead/West Central Minnesota
- Southwest Minnesota

## Missouri

- St. Louis County
- St. Louis City
- Joplin/Jasper, Newton Counties
- Kansas City/Independence/Lee's Summit/Jackson County
- Parts of Missouri Balance of State

## Mississippi

- Jackson/Rankin, Madison Counties
- Gulf Port/Gulf Coast Regional

## North Carolina

- Winston Salem/Forsyth County
- Asheville/Buncombe County
- Greensboro/High Point

## North Dakota

- Statewide

## Nebraska

- Statewide

## New Mexico

- Statewide

## Nevada

- Las Vegas/Clark County

## New York

- New York City
- Yonkers/Mount Vernon/New Rochelle/Westchester County

## Ohio

- Toledo/Lucas County
- Canton/Massillon/Alliance/Stark County

## Oklahoma

- Tulsa City & County/Broken Arrow
- Oklahoma City
- Norman/Cleveland County

## Pennsylvania

- Philadelphia
- Lower Marion/Norristown/Abington/Montgomery County
- Allentown/Northeast Pennsylvania
- Lancaster City & County
- Bristol/Bensalem/Bucks County
- Pittsburgh/McKeesport/Penn Hills/Allegheny County

## Rhode Island

- Statewide

## South Carolina

- Charleston/Low Country
- Columbia/Midlands

## Tennessee

- Chattanooga/Southeast Tennessee
- Memphis/Shelby County
- Nashville/Davidson County

## Texas

- San Antonio/Bexar County
- Austin/Travis County
- Dallas City & County/Irving
- Fort Worth/Arlington/Tarrant County
- El Paso City and County
- Waco/McLennan County
- Texas Balance of State
- Amarillo
- Wichita Falls/Wise, Palo Pinto, Wichita, Archer Counties
- Bryan/College Station/Brazos Valley
- Beaumont/Port Arthur/South East Texas

## Utah

- Statewide

## Virginia

- Richmond/Henrico, Chesterfield, Hanover Counties
- Roanoke City & County/Salem
- Virginia Beach
- Portsmouth
- Virginia Balance of State
- Arlington County

## Washington

- Seattle/King County
- Spokane City & County

## Wisconsin

- Statewide

## West Virginia

- Statewide

## Wyoming

- Wyoming Statewide is in the process of implementing





## Paul LeBlanc

---

**From:** Paul LeBlanc  
**Sent:** Tuesday, August 28, 2018 4:37 PM  
**To:** 'adrienneGoodstal@meltrotter.org'; 'Amy DeMott'; 'Arielle J. Goodson'; 'Ashley Pattee'; 'atrammell@dwellingplacegr.org'; 'Becky Mills'; 'began@intheimage.org'; 'Ben Kaiser'; 'Beverly.Ryskamp@network180.org'; 'Brenna Kotchka'; 'Brian\_Bruce@usc.salvationarmy.org'; 'Bryan Holt'; 'Candace Cowling'; 'caseygordon@kentisd.org'; 'cbohatch@grand-rapids.mi.us'; 'Cheryl Schuch'; 'Chris Romero'; 'Christina Coffman Verbrugge'; 'Christina Pavlak'; 'Christina Swiney'; 'Claire Guisfredi'; 'darrell.singleton@kentcountymi.gov'; 'Dave Jacobs'; 'David Gantz'; 'DaVionte Shannon'; 'dawnb'; 'Deanna Rolffs'; 'denise.price@hhshealthoptions.org'; 'Dennis Sturdevant'; 'Dennis Van Kampen'; 'Desiree Gibson'; 'destep@voami.org'; 'dillont@grps.org'; 'dphillips@hqgr.org'; 'ebanchhof@grand-rapids.mi.us'; 'Emily Schichtel'; 'Erin'; 'esweeney@bethany.org'; 'Felicia Clay'; 'Gayle Witham'; 'Ginny Koole'; 'Gregory Randall'; 'Gwendolyn Nathan'; 'Heidi DeVries'; 'Holly Anderton'; 'Holly Wilson'; 'htinney@grhousing.org'; 'Jack Greenfield'; 'Jack Woller'; 'Jameela Maun'; 'Jamin Short'; 'Janelle Hill'; 'jcnossen@arborcircle.org'; 'Jeff Dombrowski'; 'Jeremy DeRoo'; 'Jermaine Jackson'; 'jking@communityrebuilders.org'; 'Jodi Smith'; 'Joel Ruiter'; 'John Farrington'; 'Julie Mushing'; 'jwynbeek@genesishphc.org'; 'Karen Leppek'; 'Karleem Johnson'; 'Kat Oblinger'; 'Katherine Besaw'; 'Kathleen Papke'; 'kbrown@iccf.org'; 'Kim Lucar'; 'Kristin Gietzen'; 'Kristy.Stougaard'; 'ktjapkes@legallaidwestmich.net'; 'Kurt Reppart'; 'Kwan McEwen'; 'Kyle Johnson'; 'Kym Duursma'; 'L Garcia'; 'larrya.deshanejr@grpride.org'; 'Lauren Baker Home'; 'Lauren Van Keulen'; 'Lauren VanKeulen'; 'lcraft@grfoundation.org'; 'leslie.montgomery@redcross.org'; 'Linda Scott'; 'lisa@familypromisegr.org'; 'Lisbeth Keegan'; 'Lyndsay McGarry'; 'Lynn Locke'; 'Madison Werley'; 'Marcia Patrick'; 'Marge Palmerlee'; 'marge@degageministries.org'; 'Marsha Hazen'; 'Matthew Van Zetten'; 'Maureen Kirkwood'; 'Melvin Eledge - BBB'; 'Michelle Van Dyke'; 'Nancy Oliver'; 'Nikki Turek'; 'Nina Bowser'; 'Paul Haan'; 'Paul LeBlanc'; 'pspaeth@covenanthouse.org'; 'Rebeca Velazquez-Publes'; 'Rebecca Krentz'; 'Rebecca Long'; 'Rebecca Rynbrandt'; 'Rebecca Venema'; 'Richa'; 'Robin Acton'; 'Ryan VerWys'; 'Sarah Blystra'; 'Sarah Weir'; 'schalown@michigan.gov'; 'Shandra Steininger'; 'Shannon Gardner'; 'shannonmariebass@gmail.com'; 'Sherri Vainavicz'; 'skylar@grpride.org'; 'Sones, Brandi (MDOC)'; 'Stephanie Gingerich'; 'Steve Tigchelaar'; 'Sue Gilbert (HNCP)'; 'Susan Vogelzang'; 'susan.cervantes@kentcountymi.gov'; 'Tammy Yeomans'; 'Tara Aday'; 'tcottrell@ywcawcmi.org'; 'Thomas Pierce'; 'Tim Hileman'; 'tim\_beimers@usc.salvationarmy.org'; 'Tiyanna Whitt - Dept of Veterans' Affairs HCHV'; 'Tom Feeney'; 'troupea@michigan.gov'; 'Vera Beech'; 'Victoria Sluga'; 'Virgie Ammerman'; 'Wende Randall'; 'William Williams'  
**Subject:** CoC Application  
**Attachments:** Coc Application 2018 - Draft 2 - PUBLIC POSTING.docx

CoC Members,

For those of you who may have missed my email the first time, attached is the first draft of the CoC Consolidated Application for the 2018 CoC Program Funding Competition. Please return any feedback or proposed edits to me by Friday, September 7 at 5 PM.

This document and other documents related to the 2018 CoC Program Funding Competition are available on the Coalition's website at <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>



Thanks!  
Paul

**Paul LeBlanc**

He/Him Pronouns

Grant Writer, Community Impact

Heart of West Michigan United Way

(616) 752-8617

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## Paul LeBlanc

---

**From:** Paul LeBlanc  
**Sent:** Thursday, August 30, 2018 12:40 PM  
**To:** 'adrienneGoodstal@meltrotter.org'; 'Amy DeMott'; 'Arielle J. Goodson'; 'Ashley Pattee'; 'atrammell@dwellingplacegr.org'; 'Becky Mills'; 'began@intheimage.org'; 'Ben Kaiser'; 'Beverly.Ryskamp@network180.org'; 'Brenna Kotchka'; 'Brian\_Bruce@usc.salvationarmy.org'; 'Bryan Holt'; 'Candace Cowling'; 'caseygordon@kentisd.org'; 'cbohatch@grand-rapids.mi.us'; 'Cheryl Schuch'; 'Chris Romero'; 'Christina Coffman Verbrugge'; 'Christina Pavlak'; 'Christina Swiney'; 'Claire Guisfredi'; 'darrell.singleton@kentcountymi.gov'; 'Dave Jacobs'; 'David Gantz'; 'DaVionte Shannon'; 'dawnb'; 'Deanna Rolffs'; 'denise.price@hhshealthoptions.org'; 'Dennis Sturdevant'; 'Dennis Van Kampen'; 'Desiree Gibson'; 'destep@voami.org'; 'dillont@grps.org'; 'dphillips@hqgr.org'; 'ebanchof@grand-rapids.mi.us'; 'Emily Schichtel'; 'Erin'; 'esweeney@bethany.org'; 'Felicia Clay'; 'Gayle Witham'; 'Ginny Koole'; 'Gregory Randall'; 'Gwendolyn Nathan'; 'Heidi DeVries'; 'Holly Anderton'; 'Holly Wilson'; 'htinney@grhousing.org'; 'Jack Greenfield'; 'Jack Woller'; 'Jameela Maun'; 'Jamin Short'; 'Janelle Hill'; 'jcnossen@arborcircle.org'; 'Jeff Dombrowski'; 'Jeremy DeRoo'; 'Jermaine Jackson'; 'jking@communityrebuilders.org'; 'Jodi Smith'; 'Joel Ruiter'; 'John Farrington'; 'Julie Mushing'; 'jwynbeek@genesishphc.org'; 'Karen Leppek'; 'Karleem Johnson'; 'Kat Oblinger'; 'Katherine Besaw'; 'Kathleen Papke'; 'kbrown@iccf.org'; 'Kim Lucar'; 'Kristin Gietzen'; 'Kristy.Stougaard'; 'ktjapkes@legallaidwestmich.net'; 'Kurt Reppart'; 'Kwan McEwen'; 'Kyle Johnson'; 'Kym Duursma'; 'L Garcia'; 'larrya.deshanejr@grpride.org'; 'Lauren Baker Home'; 'Lauren Van Keulen'; 'Lauren VanKeulen'; 'lcraft@grfoundation.org'; 'leslie.montgomery@redcross.org'; 'Linda Scott'; 'lisa@familypromisegr.org'; 'Lisbeth Keegan'; 'Lyndsay McGarry'; 'Lynn Locke'; 'Madison Werley'; 'Marcia Patrick'; 'Marge Palmerlee'; 'marge@degageministries.org'; 'Marsha Hazen'; 'Matthew Van Zetten'; 'Maureen Kirkwood'; 'Melvin Eledge - BBB'; 'Michelle Van Dyke'; 'Nancy Oliver'; 'Nikki Turek'; 'Nina Bowser'; 'Paul Haan'; 'Paul LeBlanc'; 'pspaeth@covenanthouse.org'; 'Rebeca Velazquez-Publes'; 'Rebecca Krentz'; 'Rebecca Long'; 'Rebecca Rynbrandt'; 'Rebecca Venema'; 'Richa'; 'Robin Acton'; 'Ryan VerWys'; 'Sarah Blystra'; 'Sarah Weir'; 'schalown@michigan.gov'; 'Shandra Steininger'; 'Shannon Gardner'; 'shannonmariebass@gmail.com'; 'Sherri Vainavicz'; 'skylar@grpride.org'; 'Sones, Brandi (MDOC)'; 'Stephanie Gingerich'; 'Steve Tigchelaar'; 'Steven Ward'; 'Sue Gilbert (HNCP)'; 'Susan Vogelzang'; 'susan.cervantes@kentcountymi.gov'; 'Tammy Yeomans'; 'Tara Aday'; 'tcottrell@ywcawcmi.org'; 'Thomas Pierce'; 'Tim Hileman'; 'tim\_beimers@usc.salvationarmy.org'; 'Tiyanna Whitt - Dept of Veterans' Affairs HCHV'; 'Tom Feeney'; 'troupea@michigan.gov'; 'Vera Beech'; 'Victoria Sluga'; 'Virgie Ammerman'; 'Wende Randall'; 'William Williams'  
**Cc:** James Hissong (jameshissong@kentisd.org); Jennifer Grostic (jennifer@degageministries.org); Joshua Bernstein (jbernstein@kdl.org); Patrick Lonegran (patrick.lonegran@53.com)  
**Subject:** CoC Funding Competition - Project Priority Listing  
**Attachments:** 2018 Project Priority Listing - FINAL.pdf

CoC Members,

As you know, housing providers were recently asked to submit local applications for the 2018 CoC Program Funding Competition. The CoC's Funding Review Committee met on Tuesday, August 14, 2018 and Thursday, August 16, 2018 to review local applications and develop a priority order to submit to HUD. Please see attached the Project Priority Listing



they developed for inclusion with our CoC's Consolidated Application, which requires the approval of the Steering Council. The Steering Council is scheduled to vote on the Project Priority Listing on Friday, September 7, 2018.

All applicants were provided with award letters and copies of their project's scorecards on Friday, August 17, 2018. Applicants were provided with an opportunity to appeal their project's scoring to an Appeals Panel (per the CoC's Appeals Policy), but none did so.

Completed project applications, Funding Review meeting minutes, and other funding-related documents are available on the Coalition's website at: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>.

Feedback on this Project Priority Listing is due to me by Thursday, September 6, 2018 at noon (a week from today), which will be shared with the Steering Council at their meeting on September 7. Please email your feedback to me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org).

I would also like to recognize this year's Funding Review Committee members for their hard work, diligence, and thoughtful discussions. Thank you all so much for taking time out of your busy schedules to assist our community!

Best,  
Paul LeBlanc

**Paul LeBlanc**  
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Grant Writer, Community Impact  
Heart of West Michigan United Way  
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The Grand Rapids Area Coalition to End Homelessness (Coalition) invites applications under HUD's FY 2018 Continuum of Care (CoC) Program Competition for renewal, new, and bonus projects at this time. The opening of this local competition for projects serving Kent County is in accordance with the Notice of Funding Availability (NOFA) for the 2018 Continuum of Care Program by the U.S. Department of Housing and Urban Development.

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness in Kent County. Most projects seek to renew their funding, in order to provide housing stability to those they serve. To do so, they must demonstrate their effectiveness through project performance. All information provided by these applicants will be posted on this page, available for public viewing.

Additionally, there are opportunities for new applicants to apply for HUD funding. This year, the Coalition is eligible to apply for a total of \$331,055 in permanent housing bonus projects and a total of \$412,118 in domestic violence bonus projects. Additionally, all interested and qualified parties are invited to submit a new project application that will be reviewed and scored along with renewal projects. The ultimate goal of the Coalition is to fund projects that will house the most people, as quickly as possible, in the most effective manner possible.

Below you will find a detailed instructional document, relevant CoC policy documents, and application forms and scorecards that will be utilized to score project applications. Please review the instructional document carefully prior to submitting an application.

## Consolidated CoC Application



Draft CoC Consolidated Application 8-20-18 (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/Coc-Application-2018-Draft-2-PUBLIC-POSTING.docx>)

Submit changes and edits to [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) by Friday, September 7th at 5 p.m

## Funding Review Panel Recommendations

2018 Project Priority Listing (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018-Project-Priority-Listing-FINAL-1.pdf>)

Please email any feedback/comments on the Project Priority Listing to [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) (<mailto:pleblanc@hwmuw.org>) by Thursday, September 6, 2018 at noon. Your feedback/comments will be shared with the Steering Council when they make their final decision on approval of the Project Priority Listing on Friday, September 7, 2018.

8-14-18 Funding Review Minutes (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/8-14-18-Funding-Review-Minutes.docx>)

8-16-18 Funding Review Minutes (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/8-16-18-Funding-Review-Minutes.docx>)

Link to Submitted Applications (<http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/2018-coc-program-project-applications/>)

## Questions and Responses Related to the Local Application

(<http://endhomelessnesskent.org/questions-and-responses-related-to-the-local-application/>)

## Instructional and Policy Documents

FY 2018 Local Application Instructions: 2018 Local Application Instructions ([http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp\\_Instructions-FINAL-v2.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp_Instructions-FINAL-v2.docx))

FY 2018 Funding Process Timeline: CoC 2018 Funding Process Timeline (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CoC-2018-Funding-Process-Timeline-v2.docx>)

CoC Reallocation Policy: Reallocation Policy (<http://endhomelessnesskent.org/wp-content/uploads/2018/07/Reallocation-Policy-2016Final.docx>)

## Renewal Project Forms

FY 2018 Renewal Application: 2018LocalApp\_Renewal  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_Renewal-FINAL.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_Renewal-FINAL.docx))

FY 2018 Renewal Application Scorecard: 2018LocalApp\_Renewal\_Scorecard  
([http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp\\_Renewal\\_Scorecard-FINAL-v2.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp_Renewal_Scorecard-FINAL-v2.docx))

## New and Bonus Project Forms

FY 2018 New and Bonus Application: 2018LocalApp\_NewBonus  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_NewBonus.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_NewBonus.docx))

FY 2018 New and Bonus Application Scorecard: 2018LocalApp\_NewBonus\_Scorecard  
([http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp\\_NewBonus\\_Scorecard-FINAL-v2.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp_NewBonus_Scorecard-FINAL-v2.docx))

## Infrastructure Project Forms

FY 2018 Infrastructure Project Application: 2018LocalApp\_Infrastructure  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_Infrastructure.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_Infrastructure.docx))

## Appeals Forms

CoC Appeals Policy: Funding\_Appeal\_Policy ([http://endhomelessnesskent.org/wp-content/uploads/2018/07/Funding\\_Appeal\\_Policy.pdf](http://endhomelessnesskent.org/wp-content/uploads/2018/07/Funding_Appeal_Policy.pdf))

FY 2018 Appeals Application: 2018LocalApp\_Appeals  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_Appeals.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_Appeals.docx))



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Here you can find all of the project applications that were submitted in the HUD FY 2018 competition round.

## Renewal Applications

Community Rebuilders First Steps Housing Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersFirstStepsHousingLocal18.pdf>)

Community Rebuilders First Steps Housing ESNAPS  
(<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersFirstStepsHousingES18.pdf>)

Community Rebuilders HEROES Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersHEROESLocal18.pdf>)

Community Rebuilders HEROES ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersHeroesES18.pdf>)

Community Rebuilders Housing Solutions Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersHousingSolutionsLocal18.pdf>)

Community Rebuilders Housing Solutions ESNAPS  
(<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersHousingSolutionsES18.pdf>)

Community Rebuilders Keys First Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersKeysFirstLocal18.pdf>)

Community Rebuilders Keys First ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersKeysFirstES18.pdf>)



Community Rebuilders Loft Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersLoftLocal18.pdf>)

Community Rebuilders Loft ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CommunityRebuildersLoftES18.pdf>)

Heartside Nonprofit Housing Corporation Commerce Apartments Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/HeartsideNonprofitHousingCorporationCommerceApartmentsLocal18.docx>)

Heartside Nonprofit Housing Corporation Commerce Apartments ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/HeartsideNonprofitHousingCorporationCommerceApartmentsES18.pdf>)

Heartside Nonprofit Housing Corporation Ferguson Apartments Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/HeartsideNonprofitHousingCorporationFerguson-ApartmentsLocal18.docx>)

Heartside Nonprofit Housing Corporation Ferguson Apartments ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/HeartsideNonprofitHousingCorporationFergusonApartmentsES18.pdf>)

Heartside Nonprofit Housing Corporation Verne Barry Place Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/HeartsideNonprofitHousingCorporationVerneBarryPlaceLocal18.docx>)

Heartside Nonprofit Housing Corporation Verne Barry Place ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/HeartsideNonprofitHousingCorporationVerneBarryPlaceES18.pdf>)

Grand Rapids Housing Commission Hope Community Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/Hope-Community-2018-Local-Application.docx>)

Grand Rapids Housing Commission Hope Community ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/Hope-Community-2018-Local-Application.docx>)

Inner City Christian Federation PSH Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/InnerCityChristianFederationPSHLocal18.pdf>)

Inner City Christian Federation PSH ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/ICCF-HUD-CoC-2018-PSH-eSnaps-Application.pdf>)

Kent County SRA Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/SRA-Local-8.9.docx>)

Kent County SRA ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/FY-2018-SRA-Application-Final-E-Snaps.pdf>)

Kent County TRA Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/TRA-Local-8.9.docx>)

Kent County TRA ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/TRA-FY-2018-Application-Final-E-Snaps.pdf>)

The Salvation Army Coordinated Entry Local ([http://endhomelessnesskent.org/wp-content/uploads/2018/08/TSA2018LocalApp\\_CE-REVISED-8-13-18.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/08/TSA2018LocalApp_CE-REVISED-8-13-18.docx))

The Salvation Army Coordinated Entry ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/TSA-esnaps-CE-Consolidated-8-29-18.pdf>)

The Salvation Army HAP Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/TSA-2018-HAP-word-local-REVISED-8-13-18.docx>)

The Salvation Army HAP ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/TSA-HAP-e-snaps-8-23-18.pdf>)

The Salvation Army HMIS Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/TSA2018HMISword-local.docx>)

The Salvation Army HMIS ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/TSA-HMIS-e-snaps-8-17-18.pdf>)

YWCA Project HEAL Local (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/YWCA-Project-HEAL-Local-18-Renewal-App.docx>)

YWCA Project HEAL ESNAPS (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/YWCA-Project-HEAL-Local-18-Attachment-3-Project-Application-on-e-snaps.pdf>)

## **Domestic Violence Bonus Applications**

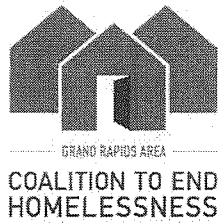
YWCA Project HEAL (DV Bonus) (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/YWCA-Project-Heal-DV-Bonus-Local-App18.docx>)

YWCA Project HEAL (DV Bonus) ESNAPS ([http://endhomelessnesskent.org/wp-content/uploads/2018/08/YWCA-Project-HEAL\\_-TH-RRH-Local-18-Attachment-9-Project-Application-in-ESNAPS.pdf](http://endhomelessnesskent.org/wp-content/uploads/2018/08/YWCA-Project-HEAL_-TH-RRH-Local-18-Attachment-9-Project-Application-in-ESNAPS.pdf))

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## HUD CONTINUUM OF CARE PROGRAM REALLOCATION POLICY GUIDANCE

### Background

The Grand Rapids Area Coalition to End Homelessness is committed to maximizing effectiveness of financial resources to house as many individuals and families as possible. To this end, reallocation of existing resources is a tool that may be used. Reallocation of existing US Department of Housing and Urban Development (HUD) Continuum of Care (CoC) funding should be undertaken with the utmost care.

### Definition

Reallocation; per Section III.A.3 (h) of the FY 2016 CoC Program NOFA: Reallocation is when a CoC shifts funds in whole or part from existing eligible renewal projects to create one or more new projects without decreasing the CoC's Annual Renewal Demand (ARD). New Projects created through reallocation must meet the requirements set forth in the annual CoC Notice of Funding Availability (NOFA) and project eligibility and project quality thresholds established by HUD at a minimum. Each year HUD determines eligible reallocation project types in the CoC NOFA. Involuntary reallocation of funds should be considered only when projects are determined to be underperforming, obsolete, or do not contribute substantially to meeting the goals of the Continuum of Care for preventing and/or reducing homelessness.

### Process Overview

The process used in determining reallocation of funds should be structured in such a way that mitigates perceptions of reallocation as a threat or in a way that removes barriers to a provider thinking critically about the performance of a project. In some cases, projects in which CoC funding is reallocated may be eligible for another source of funding which might be more appropriate than HUD CoC funding.

Decisions to reallocate funds shall be evidence-based. Each CoC funded project will be evaluated annually using specific information to include but not be limited to: data entered into HMIS, the HUD Annual Performance Report, the PIT Count, AHAR report and the HIC Count, the CoC project application, Cost per household served, HUD CoC system performance measurements and other HUD recommended data tools. Reallocation action will be taken with the goal of alignment with the HUD and HEARTH ACT policy guidance, performance criteria specified in the annual HUD NOFA with emphasis on local needs, data and project performance. Consideration will also be given to the potential impact that involuntary (performance based) reallocation may have on increasing homelessness resulting from a reduction in services caused by the reallocation. The CoC intends to make data driven decisions that align with HUD's goal and priorities for Continuum of Care funding and align with the Federal Strategic Plan to Prevent and End Homelessness.

### Timeline and Responsible Parties

The annual monitoring and evaluation process will begin following the submission of the previous year's CoC Program Application. Within this process, HUD CoC Funded agencies, the Funding Review Committee and other interested parties will meet to discuss possible changes to HUD CoC Funded projects.

## Types of Reallocation

Projects may be allocated in the following ways:

- Funding (in whole or part) from one project into a new project by the same provider
- Funding (in whole or part) from one project into a new project by a different provider
- Funding (in whole or part) from one project into many new projects
- Funding (in whole or part) from multiple projects into one new project
- Funding (in whole or part) from multiple projects into many new projects

### I. VOLUNTARY REALLOCATION

If a provider has determined that a project could better serve the community with changes made through reallocation, they may voluntarily submit the project for reallocation. If a provider elects to voluntarily reallocate a project, the provider shall notify the CoC Program Manager of their intent prior to the release of the local application. The provider has the option to submit an application for a new project utilizing the reallocated funds (see *Types of Reallocation* above for all configurations), or they may opt not to apply which will make the funds available to all other new applicants. The reallocated project will submit as a new project and must meet deadlines established locally for new project applications. The new project must meet HUD threshold and be in alignment with the current NOFA. The new project cannot be a continuation of an old project.

### Scoring and Ranking

The provider will be able to apply through reallocation for their reallocated funds without those funds being included in the available funding to all new applications. Providing minimum threshold and NOFA requirements are met, the project will be scored and ranked against other projects in the project priority listing submitted to HUD using elements listed above under "Mandatory Scoring Elements".

### When a Project Can Reallocate

Projects should consider if the changes they wish to make would best be accomplished through requesting a grant amendment. Examples of situations that would best be handled through a grant amendment versus reallocation follow.

Grant Amendment	Reallocation
A permanent supportive housing program wishes to shift funds within its existing grant from service costs to rental assistance costs in order to create additional units.	Component changes, such as transitional housing that wants to change to permanent supportive housing.
If a transitional housing project wants to reduce the average length of time households are in their programs, they can do so without reallocating.	Major population changes, such as if a project wanted to change from serving families with children to serving individuals experiencing chronic homelessness.

### II. PERFORMANCE-BASED REALLOCATION

Renewal projects scoring low in the below listed areas (*Mandatory Scoring Areas*), not serving an identified community need, found to not meet minimum benchmark scores on performance measures (as determined by

the community), not utilizing funding effectively, or not meeting HUD statutory, regulatory, threshold and compliance requirements (see *Appendix A for FY 2015 thresholds and requirements as reference*) may be considered eligible for reallocation. As part of the CoC Program Competition, new project applications will be sought from interested, eligible providers. The renewal projects will be rated and compared to new project applications. New project applications may be submitted by the same provider as the project eligible for reallocation as well as any new applicant. New project applications must align with the eligibility requirements published in the HUD Notice of Funding Availability (NOFA) during that funding cycle.

**Mandatory Scoring Areas (Additional Areas of Scoring May Be Considered)**

- Project performance and utilization
- Cost effectiveness
- Current residents of existing project
- HMIS Data Quality
- Expenditure of grant funds
- Organization experience and capacity
- Alignment with current NOFA
- Housing First implementation
- Coordinated Entry use
- System Performance Measures
- Alignment with HUD Notice on Prioritization
- Alignment with HUD CoC regulations and policy priorities
- Does project meet minimum threshold

**Policy Approved by Steering Council:**

March 20, 2015

September 9, 2016

**REALLOCATION POLICY**  
**APPENDIX A**  
**HUD THRESHOLDS AND REQUIREMENTS**

**1. Statutory and Regulatory Requirements.**

To be eligible for funding under the CoC Program Funding, project applicants must meet all statutory and regulatory requirements in the Act and 24 CFR part 578. Project applicants can obtain a copy of the Act and 24 CFR part 578 on the HUD Exchange or by contacting the NOFA Information Center at 1-800-HUD-8929 (1-800-483-8929).

**2. HUD Threshold Requirements**

**A. Ineligible Applicants.** HUD will not consider an application from an ineligible project applicant, including an application submitted for CoC planning funds or UFA Costs from an applicant other than the Collaborative Applicant.

**B. DUNS Number Requirement.** All project applicants seeking funding under this program must have a DUNS number and include the number in the Standard Form 424 (SF-424). The SF-424 must be submitted along with the project application in e-snaps. See Section IV.C.2. of the FY 2015 General Section for additional information.

**C. Active Registration in SAM.** All project applicants seeking funding under this program must have an active SAM registration. HUD will not issue a grant agreement for awarded funds to a project applicant until an active SAM registration has been verified. See Section IV.C.1. of the FY 2015 General Section for additional information.

**D. Project Eligibility Threshold.** HUD will review all projects to determine if they meet the following eligibility threshold requirements on a pass/fail standard. If HUD determines that the applicable standards are not met for a project, the project will be rejected from the competition. Any project requesting renewal funding will be considered as having met these requirements through its previously approved grant application unless information to the contrary is received (e.g., monitoring findings, results from investigations by the Office of Inspector General, the recipient routinely does not draw down funds from LOCCS at least once per quarter, consistently late APRs.). Approval of new and renewal projects is not a determination by HUD that a recipient is in compliance with applicable fair housing and civil requirements.

(1) Project applicants and potential subrecipients must meet the eligibility requirements of the CoC Program as described in 24 CFR part 578 and provide evidence of eligibility required in the application (e.g., nonprofit documentation).

(2) Project applicants and subrecipients must demonstrate the financial and management capacity and experience to carry out the project as detailed in the project application and to administer Federal funds. Demonstrating capacity may include a description of the applicant/subrecipient experience with similar projects and with successful administration of SHP, S+C, or CoC Program funds for renewing projects or other Federal funds.

(3) Project applicants must submit the required certifications as specified in this NOFA.

(4) The population to be served must meet program eligibility requirements as described in the Act, and the project application must clearly establish eligibility of project applicants. This includes the following additional eligibility criteria for certain types of projects:

(a) The only persons who may be served by any non-dedicated permanent supportive housing beds are those who come from the streets, emergency shelters, safe havens, institutions, or transitional housing.

i. Homeless individuals and families coming from transitional housing must have originally come from the streets or emergency shelters.

ii. Homeless individuals and families with a qualifying disability who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life threatening conditions and are living in transitional housing are eligible for permanent supportive housing even if they did not live on the streets, emergency shelters, or safe havens prior to entry in the transitional housing.

iii. Persons exiting institutions where they resided for 90 days or less and came from the streets, emergency shelter, or safe havens immediately prior to entering the institution are also eligible for permanent supportive housing.

(b) The only persons who may be served by dedicated or 29 prioritized permanent supportive housing beds are chronically homeless individuals and families as defined in 24 CFR 578.3.

(c) Rapid Re-housing projects originally funded to serve individuals and families coming from the streets or emergency shelters or persons meeting the criteria of paragraph (4) of the definition of homeless, must continue to do so.

(d) New Rapid Re-housing projects created through reallocation may serve individuals, including unaccompanied youth, and families coming from the streets or emergency shelters or persons fleeing domestic violence or other persons who qualify under paragraph (4) of the definition of homeless; however, these program participants must meet the all other criteria for this type of housing (i.e., individuals and household with children who enter directly from the streets or emergency shelter).

(e) The projects originally funded as part of the FY 2008 Rapid Re-Housing for Families Demonstration may transition in this CoC Program Competition to permanent housing: rapid rehousing. Therefore, any of these projects that want to change from transitional housing with leasing, may change the current budget line items from leasing to tenant-based rental assistance (may request actual rent or FMR) and move any operating costs to an eligible supportive services activity, an HMIS budget line item, or may be used to add additional units. If the project wants to remain as transitional housing, it must continue operating in accordance with the FY 2008 CoC Homelessness Assistance Grants Programs NOFA.

(f) Renewal projects originally funded under the Samaritan Housing Initiative must continue to exclusively serve chronically homeless individuals and families, unless there are no chronically homeless individuals and families within the CoC geographic area that can be served by the project. CoCs should not hold units vacant, but instead should prioritize other vulnerable and eligible households as outlined in Notice CPD-14-012.

(g) Renewal projects originally funded under the Permanent Supportive Housing Bonus in previous years must continue to serve the homeless population in accordance with the respective NOFA under which it was originally awarded.

(h) Renewal projects that indicated they would prioritize chronically homeless persons in beds that become available through turnover in non-dedicated permanent supportive housing projects must continue to do so.



(5) The project must be cost-effective, including costs of construction, operations, and supportive services with such costs not deviating substantially from the norm in that locale for the type of structure or kind of activity.

(6) Project applicants, except Collaborative Applicants that only receive awards for CoC planning costs and, if applicable, UFA Costs, must agree to participate in a local HMIS system. However, in accordance with Section 407 of the Act, any victim service provider that is a recipient or subrecipient must not disclose, for purposes of HMIS, any personally identifying information about any client. Victim service providers must use a comparable database that meets the needs of the local HMIS.

(7) Project applicants must administer their programs or activities in the most integrated setting appropriate to the needs of qualified homeless with disabilities. This means that programs or activities must be offered in a setting that enables the homeless with disabilities to interact with others without disabilities to the fullest extent possible.

**E. Project Quality Threshold.** HUD will review all new project applications to determine if they meet the following project quality threshold requirements with clear and convincing evidence. Any project requesting renewal funding will be considered as having met these requirements through its previously approved grant application unless information to the contrary is received (e.g., monitoring findings, results from investigations by the Office of Inspector General, consistently slow draws from LOCCS, consistently late APRs) and if the renewal project has compliance issues which results in the project not operating in accordance with 24 CFR part 578. The housing and services proposed must be appropriate to the needs of the program participants and the community. A determination that a project meets the project quality threshold is not a determination by HUD that a recipient is in compliance with applicable fair housing and civil rights requirements.

(1) To be considered as meeting project quality threshold, new permanent housing—permanent supportive housing and rapid re-housing—project applications must receive at least 3 out of the 5 points available for the criteria below. New permanent housing project applications that do not receive at least 3 points will be rejected.

(a) Whether the type, scale, and location of the housing fit the needs of the program participants (1 point);

(b) Whether the type and scale of the supportive services fit the needs of the program participants—this includes all supportive services, regardless of funding source (1 point);

(c) Whether the specific plan for ensuring program participants will be individually assisted to obtain the benefits of the mainstream health, social, and employment programs for which they are eligible to apply meets the needs of the program participants (1 point);

(d) Whether program participants are assisted to obtain and remain in permanent housing in a manner that fits their needs (1 point); and,

(e) Whether at least 75 percent of the proposed program participants come from the street or other locations not meant for human habitation, emergency shelters, safe havens, or fleeing domestic violence (1 point).

(2) To be considered as meeting project quality threshold, new SSO projects for centralized or coordinated assessment systems must receive at least 2 out of the 4 points available for the criteria below. SSO projects for centralized or coordinated assessment systems that do not receive at least 2 points will be rejected.

- (a) Whether the centralized or coordinated assessment system is easily accessible for all persons within the CoC's geographic area who are seeking information regarding homelessness assistance (1 point);
  - (b) Whether there is a strategy for advertising the program that is designed specifically to reach homeless persons with the highest barriers within the CoC's geographic area (1 point);
  - (c) Whether there is a standardized assessment process (1 point); and
  - (d) Whether the program ensures that program participants are directed to appropriate housing and services that fit their needs (1 point).
- (3) To be considered as meeting project quality threshold, new HMIS project applications must receive at least 3 out of the 4 points available for the criteria below. New HMIS projects that do not receive at least 3 points will be rejected.
- (a) How the HMIS funds will be expended in a way that is consistent with the CoC's funding strategy for the HMIS and furthers the CoC's HMIS implementation (1 point);
  - (b) Whether the HMIS collects all Universal Data Elements as set forth in the HMIS Data Standards (1 point);
  - (c) Whether the HMIS un-duplicates client records (1 point); and 32
  - (d) Whether the HMIS produces all HUD-required reports and provide data as needed for HUD reporting (e.g., APR, quarterly reports, data for CAPER/ESG reporting) (1 point).
- (4) To be considered as meeting project quality threshold, the Collaborative Applicant's application for new CoC planning funds must receive at least 6 out of 10 points using the criteria below. Applications that do not receive at least 6 points will be rejected. Applications for UFA Costs are not subject to a threshold review, as UFA status was determined as part of Registration.
- (a) Governance and Operations. Whether the CoC conducts meetings of the entire CoC membership that are inclusive and open to members and whether the CoC is able to demonstrate that it has a written governance charter in place that contains CoC policies (2 points).
  - (b) CoC Committees. Whether the CoC has CoC-wide planning committees, subcommittees, or workgroups to address homeless needs in the CoC's geographic area that recommend and/or set policy priorities for the CoC (2 points).
  - (c) The proposed planning activities that will be carried out by the CoC with grant funds are compliant with the provisions of 24 CFR 578.7 (4 points); and
  - (d) The funds requested will improve the CoC's ability to evaluate the outcome of both CoC Program-funded and ESG-funded projects (2 points).
- (5) Additionally, HUD will assess all new projects for the following minimum project eligibility, capacity, timeliness, and performance standards. To be considered as meeting project quality threshold, all new projects must meet all of the following criteria:
- (a) Project applicants and potential subrecipients must have satisfactory capacity, drawdowns, and performance for existing grant(s) that are funded under the SHP, S+C, or CoC Program, as evidenced by timely reimbursement of subrecipients, regular drawdowns, and timely resolution of any monitoring findings;
  - (b) For expansion projects, project applicants must clearly articulate the part of the project that is being expanded. Additionally, the project applicants must clearly demonstrate that they are not replacing other funding sources; and
  - (c) Project applicants must demonstrate they will be able to meet all timeliness standards per 24 CFR 578.85. Project 33 applicants with existing projects must demonstrate that they have met all project

renewal threshold requirements of this program. HUD reserves the right to deny the funding request for a new project, if the request is made by an existing recipient that HUD finds to have significant issues related to capacity, performance, or unresolved audit/monitoring finding related to one or more existing grants. Additionally, HUD reserves the right to withdraw funds if no APR is submitted on the prior grant.

**F. Project Renewal Threshold.** A CoC must consider the need to continue funding for projects expiring in the next calendar year. Renewal projects must meet minimum project eligibility, capacity, timeliness, and performance standards identified in this program's annual NOFA or they will be rejected from consideration for funding.

(1) When considering renewal projects for award, HUD will review information in LOCCS; Annual Performance Reports (APRs); and information provided from the local HUD CPD Field Office, including monitoring reports and A-133 audit reports as applicable, and performance standards on prior grants, and will assess projects using the following criteria on a pass/fail basis:

- (a) Whether the project applicant's performance met the plans and goals established in the initial application as amended;
- (b) Whether the project applicant demonstrated all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met;
- (c) The project applicant's performance in assisting program participants to achieve and maintain independent living and record of success, except HMIS-dedicated projects are not required to meet this standard; and
- (d) Whether there is evidence that a project applicant has been unwilling to accept technical assistance, has a history of inadequate financial accounting practices, has indications of project mismanagement, has a drastic reduction in the population served, has made program changes without prior HUD approval, or has lost a project site.

(2) HUD reserves the right to reduce or reject a funding request from the project applicant for the following reasons:

- (a) Outstanding obligation to HUD that is in arrears or for which a payment schedule has not been agreed upon;
- (b) Audit finding(s) for which a response is overdue or unsatisfactory;
- (c) History of inadequate financial management accounting practices;
- (d) Evidence of untimely expenditures on prior award;
- (e) History of other major capacity issues that have significantly affected the operation of the project and its performance;
- (f) History of not reimbursing subrecipients for eligible costs in a timely manner, or at least quarterly; and
- (g) History of serving ineligible program participants, expending funds on ineligible costs, or failing to expend funds within statutorily established timeframes.

**G. Resolution of Outstanding Civil Rights Matters Threshold.** In order for a project application to be eligible for rating and ranking by HUD, the project applicant and the proposed subrecipient must meet the civil rights threshold requirements in Section III.C.2.b. of the FY 2015 General Section. h. Certification of Consistency with the Consolidated Plan. For each applicant that is not a State or unit of local government, the applicant must submit a certification by the jurisdiction in which the proposed project will be located that the applicant's application for funding is consistent with the jurisdiction's HUD-approved consolidated

plan. The certification must be made in accordance with the provisions of the consolidated plan regulations at 24 CFR part 91, subpart F. Form HUD-2991 must be used and must list all new projects, CoC planning, UFA Costs, and renewal projects within the jurisdiction that are consistent with the Consolidated Plan. For a project applicant that is a State or unit of local government, the jurisdiction must certify that it is following its HUD-approved Consolidated Plan.

**3. Other HUD Requirements.** The list below highlights requirements contained in the General Section (and in other regulations) that is especially important for CoCs and project applicants to review in detail. This is not an exhaustive list of all HUD requirements. All of the requirements of the FY 2015 General Section apply to the CoC Program, except as otherwise specified in the current year NOFA. An applicant can access the General Section of HUD's FY 2015 NOFA [http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/administration/grants/fundsavail/2015gensec](http://portal.hud.gov/hudportal/HUD?src=/program_offices/administration/grants/fundsavail/2015gensec). Note that the General Section of HUD's FY 2015 NOFA is critical and must be carefully reviewed to ensure an application can be considered for funding, with the exception of reference to the [www.grants.gov](http://www.grants.gov) application process and other exceptions specifically listed in the NOFA. The CoC Program uses an electronic system outside of [www.grants.gov](http://www.grants.gov) called e-snaps. Notification of the availability of the application will be released via HUD's websites located at [www.hud.gov](http://www.hud.gov) and [www.hudexchange.info](http://www.hudexchange.info). To sign up for HUD's CoC Program email-based listserv, go to [www.hudexchange.info/maillinglist/](http://www.hudexchange.info/maillinglist/).

**A. Fair Housing and Equal Opportunity.** See 24 CFR 578.93 for specific requirements related to Fair Housing and Equal Opportunity.

**B. Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity.** See the Federal Register dated February 1, 2012, Docket No. FR 5359-F-02 and Section VI.B.2. of the General Section.

**C. Debarment and Suspension.** See Section III.C.4.c. of the FY 2015 General Section. Additionally, it is the responsibility of the recipient to ensure that all subrecipients are not debarred or suspended. (24 CFR 578.23((3)(c)(4)(v)).

**D. Delinquent Federal Debts.** See Section III.C.4.a. of the FY 2013 General Section.

**E. Compliance with Fair Housing and Civil Rights.** See Section III.C.3.a. of the FY 2015 General Section.

**F. Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency (LEP)."** See Section III.C.3.d. of the FY 2015 General Section.

**G. Economic Opportunities for Low- and Very Low-income Persons (Section 3).** See Section III.C.3.c. of the FY 2015 General Section.

**H. Real Property Acquisition and Relocation.** See Section VI.B.4. of the FY 2015 General Section.

**I. Conducting Business in Accordance with Core Values and Ethical Standards/Code of Conduct.** See Section III.C.3.f. of the FY 2015 General Section.

**J. Prohibition Against Lobbying Activities.** See Section III.C.3.h. of the FY 2015 General Section.

**K. Participation in HUD-Sponsored Program Evaluation.** See Section VI.B.6. of the FY 2015 General Section.

**L. Environmental Requirements.** Notwithstanding provisions at 24 CFR 578.31 and 24 CFR 578.99(a) of the CoC Program interim rule, and in accordance with Section 100261(3) of MAP-21 (Pub. L. 112-141, 126 Stat. 405), activities under this program's NOFA are subject to environmental review by a responsible entity under HUD regulations at 24 CFR part 58.

(1) For activities under a grant to a recipient other than a State or unit of general local government that generally would be subject to review under part 58, HUD may make a finding in accordance with 24 CFR 58.11(d) and may itself perform the environmental review under the provisions of 24 CFR part 50 if the recipient objects in writing to the responsible entity's performing the review under part 24 CFR part 58.

(2) Irrespective of whether the responsible entity in accordance with 24 CFR part 58 (or HUD in accordance with 24 CFR part 50) performs the environmental review, the recipient must supply all available, relevant information necessary for the responsible entity (or HUD, if applicable) to perform for each property any required environmental review. The recipient also must carry out mitigating measures required by the responsible entity (or HUD, if applicable) or select alternative property.

(3) The recipient, its project partners, and their contractors may not acquire, rehabilitate, convert, lease, repair, dispose of, demolish, or construct property for a project under this NOFA, or commit or expand HUD or local funds for such eligible activities under this NOFA, until the responsible entity (as defined by 24 CFR 58.2(a)(7)) has completed the environmental review procedures required by 24 CFR part 58 and the environmental certification and Request for Release of Funds (RROF) have been approved or HUD has performed an environmental review under 24 CFR part 50 and the recipient has received HUD approval of the property. HUD will not release grant funds if the recipient or any other party commits grant funds (i.e., incurs any costs or expenditures to be paid or reimbursed with such funds) before the recipient submits and HUD approves its RROF (where such submission is required).

**M. Drug-Free Workplace.** See Section VI.B.9. of the FY 2015 General Section.

**N. Safeguarding Resident/Client Files.** See Section VI.B.10 of the FY 2015 General Section.

**O. Compliance with the Federal Funding Accountability and Transparency Act of 2006** (Pub. L. 209-282) (Transparency Act), as amended. See Section VI.B.11. of the FY 2015 General Section.

**P. Lead-Based Paint Requirements.** For housing constructed before 1978 (with certain statutory and regulatory exceptions), CoC Program recipients must comply with the requirements of the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801, et seq.), as amended by the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851, et seq.); and implementing regulations of HUD, at 24 CFR part 35; the Environmental Protection Agency (EPA) at 40 CFR part 745, or State/Tribal lead rules implemented under EPA authorization; and the Occupational Safety and Health Administration at 29 CFR 1926.62 and 29 CFR 1910.1025.





The Grand Rapids Area Coalition to End Homelessness (Coalition) invites applications under HUD's FY 2018 Continuum of Care (CoC) Program Competition for renewal, new, and bonus projects at this time. The opening of this local competition for projects serving Kent County is in accordance with the Notice of Funding Availability (NOFA) for the 2018 Continuum of Care Program by the U.S. Department of Housing and Urban Development.

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness in Kent County. Most projects seek to renew their funding, in order to provide housing stability to those they serve. To do so, they must demonstrate their effectiveness through project performance. All information provided by these applicants will be posted on this page, available for public viewing.

Additionally, there are opportunities for new applicants to apply for HUD funding. This year, the Coalition is eligible to apply for a total of \$331,055 in permanent housing bonus projects and a total of \$412,118 in domestic violence bonus projects. Additionally, all interested and qualified parties are invited to submit a new project application that will be reviewed and scored along with renewal projects. The ultimate goal of the Coalition is to fund projects that will house the most people, as quickly as possible, in the most effective manner possible.

Below you will find a detailed instructional document, relevant CoC policy documents, and application forms and scorecards that will be utilized to score project applications. Please review the instructional document carefully prior to submitting an application.

## Consolidated CoC Application

Draft CoC Consolidated Application 8-20-18 (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/Coc-Application-2018-Draft-2-PUBLIC-POSTING.docx>)

Submit changes and edits to [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) by Friday, September 7th at 5 p.m

## Funding Review Panel Recommendations

2018 Project Priority Listing (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018-Project-Priority-Listing-FINAL-1.pdf>)

Please email any feedback/comments on the Project Priority Listing to [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) (<mailto:pleblanc@hwmuw.org>) by Thursday, September 6, 2018 at noon. Your feedback/comments will be shared with the Steering Council when they make their final decision on approval of the Project Priority Listing on Friday, September 7, 2018.

8-14-18 Funding Review Minutes (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/8-14-18-Funding-Review-Minutes.docx>)

8-16-18 Funding Review Minutes (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/8-16-18-Funding-Review-Minutes.docx>)

Link to Submitted Applications (<http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/2018-coc-program-project-applications/>)

## Questions and Responses Related to the Local Application

(<http://endhomelessnesskent.org/questions-and-responses-related-to-the-local-application/>)

## Instructional and Policy Documents

FY 2018 Local Application Instructions: 2018 Local Application Instructions ([http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp\\_Instructions-FINAL-v2.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp_Instructions-FINAL-v2.docx))

FY 2018 Funding Process Timeline: CoC 2018 Funding Process Timeline (<http://endhomelessnesskent.org/wp-content/uploads/2018/08/CoC-2018-Funding-Process-Timeline-v2.docx>)

CoC Reallocation Policy: Reallocation Policy (<http://endhomelessnesskent.org/wp-content/uploads/2018/07/Reallocation-Policy-2016Final.docx>)

## Renewal Project Forms

FY 2018 Renewal Application: 2018LocalApp\_Renewal  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_Renewal-FINAL.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_Renewal-FINAL.docx))

FY 2018 Renewal Application Scorecard: 2018LocalApp\_Renewal\_Scorecard  
([http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp\\_Renewal\\_Scorecard-FINAL-v2.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp_Renewal_Scorecard-FINAL-v2.docx))

## New and Bonus Project Forms

FY 2018 New and Bonus Application: 2018LocalApp\_NewBonus  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_NewBonus.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_NewBonus.docx))

FY 2018 New and Bonus Application Scorecard: 2018LocalApp\_NewBonus\_Scorecard  
([http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp\\_NewBonus\\_Scorecard-FINAL-v2.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/08/2018LocalApp_NewBonus_Scorecard-FINAL-v2.docx))

## Infrastructure Project Forms

FY 2018 Infrastructure Project Application: 2018LocalApp\_Infrastructure  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_Infrastructure.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_Infrastructure.docx))

## Appeals Forms

CoC Appeals Policy: Funding\_Appeal\_Policy ([http://endhomelessnesskent.org/wp-content/uploads/2018/07/Funding\\_Appeal\\_Policy.pdf](http://endhomelessnesskent.org/wp-content/uploads/2018/07/Funding_Appeal_Policy.pdf))

FY 2018 Appeals Application: 2018LocalApp\_Appeals  
([http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp\\_Appeals.docx](http://endhomelessnesskent.org/wp-content/uploads/2018/07/2018LocalApp_Appeals.docx))





(<http://mindutopia.com>)



Community Rebuilders  
1120 Monroe Ave NW Ste. 220  
Grand Rapids, MI 49503

August 17, 2018

Ms. Diaz,

Thank you for submitting your renewal application for the joint transitional housing/rapid re-housing project, First Steps Housing, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 76.8, which is the community's median score for this year's funding competition. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Community Rebuilders  
1120 Monroe Ave  
Grand Rapids, MI 49503

August 17, 2018

Ms. Diaz,

Thank you for submitting your renewal application for the permanent supportive housing project, Heroes, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 76.4 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

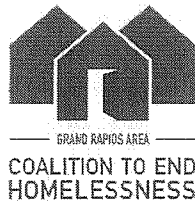
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Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Community Rebuilders  
1120 Monroe Ave NW Ste 220  
Grand Rapids, MI 49503

August 17, 2018

Ms. Diaz,

Thank you for submitting your renewal application for the permanent supportive housing project, Housing Solutions, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 86, while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

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Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Community Rebuilders  
1120 Monroe Ave NW St. 220  
Grand Rapids, MI 49503

August 17, 2018

Ms. Diaz,

Thank you for submitting your renewal application for the rapid-rehousing project, Keys First, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 76 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

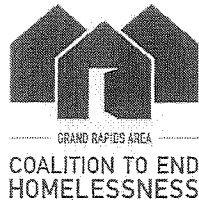
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Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Community Rebuilders  
1120 Monroe Ave NW  
Grand Rapids, MI 49503

August 17, 2018

Ms. Diaz,

Thank you for submitting your renewal application for the permanent supportive housing project, LOFT, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 84 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

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Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Heartside Nonprofit Housing Corporation  
101 Sheldon Blvd SE Ste 2  
Grand Rapids, MI 49503

August 17, 2018

Ms. Long,

Thank you for submitting your renewal application for the permanent supportive housing project, Commerce Apartments, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 86 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

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Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc

Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Heartside Nonprofit Housing Corporation  
101 Sheldon Blvd SE, Ste. 2  
Grand Rapids, MI 49503

August 17, 2018

Ms. Long,

Thank you for submitting your renewal application for the permanent supportive housing project, Ferguson Apartments, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 76 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

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Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness







Heartside Nonprofit Housing Corporation  
101 Sheldon Blvd SE, Ste. 2  
Grand Rapids, MI 49503

August 17, 2018

Ms. Long,

Thank you for submitting your renewal application for the permanent supportive housing project, Verne Barry Place, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 75.6 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

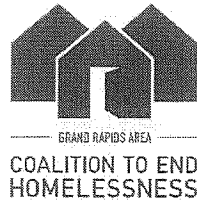
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Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Grand Rapids Housing Commission  
1420 Fuller Ave SE  
Grand Rapids, MI 49507

August 17, 2018

Ms. Clay,

Thank you for submitting your renewal application for the rapid re-housing project, Hope Community, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 84 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

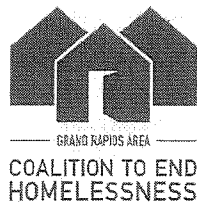
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Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





Inner City Christian Federation  
920 Cherry St SE  
Grand Rapids, MI 49506

August 17, 2018

Ms. Rolffs,

Thank you for submitting your renewal application for the permanent supportive housing project, ICCF Permanent Supportive Housing Program, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 55 while the community's median score was 76.8. This project is recommended to be in Tier 2 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

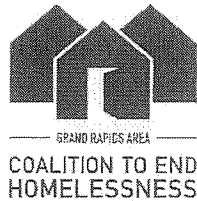
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Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





County of Kent  
300 Monroe Ave  
Grand Rapids, MI 49503

August 17, 2018

Mr. Singleton,

Thank you for submitting your renewal application for the permanent supportive housing project, Shelter Plus Care SRA\_CR 2018, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 79.2 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





County of Kent  
300 Monroe Ave  
Grand Rapids, MI 49503

August 17, 2018

Mr. Singleton,

Thank you for submitting your renewal application for the permanent supportive housing project, Shelter Plus Care TRA\_CR 2017, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 82.4 while the community's median score was 76.8. This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

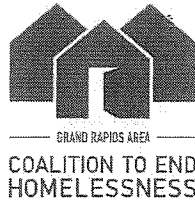
Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





The Salvation Army – Western Michigan Northern Indiana Division  
1215 East Fulton St.  
Grand Rapids, MI 49503

August 17, 2018

Ms. Oliver,

Thank you for submitting your renewal application for the SSO project, Coordinated Entry, in the 2018 Continuum of Care Program Application process.

This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). As an infrastructure project, it was not scored.

Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

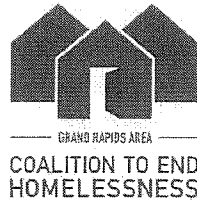
Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc

Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





The Salvation Army – Western Michigan Northern Indiana Division  
1215 East Fulton St.  
Grand Rapids, MI 49503

August 17, 2018

Ms. Oliver,

Thank you for submitting your renewal application for the SSO project, Housing Assessment Program, in the 2018 Continuum of Care Program Application process.

This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). As an infrastructure project, it was not scored.

Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

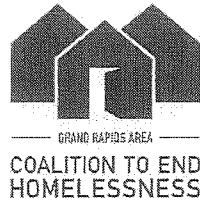
Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc

Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





The Salvation Army – Western Michigan Northern Indiana Division  
1215 East Fulton St.  
Grand Rapids, MI 49503

August 17, 2018

Ms. Oliver,

Thank you for submitting your renewal application for the HMIS project, HMIS, in the 2018 Continuum of Care Program Application process.

This project is recommended to be in Tier 1 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). As an infrastructure project, it was not scored.

Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness







YWCA West Central Michigan  
25 Sheldon Blvd. SE  
Grand Rapids, MI 49503

August 17, 2018

Mr. Cottrell,

Thank you for submitting your domestic violence bonus project application for the joint transitional housing/rapid-rehousing project, Project HEAL TH-RRH, in the 2018 Continuum of Care Program Application process.

This project was scored by a panel of reviewers including CoC staff and Funding Review Committee members. The average of these scores was 85.7, with the highest score being 98 and the lowest score being 77.3. Attached are the highest and lowest-scoring scorecards (the other scorecards are available upon request). The community's median score was 76.8. This project is recommended to be in Tier 2 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you are able to appeal this scoring by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

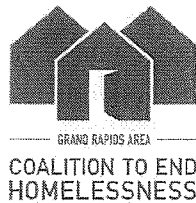
Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





YWCA West Central Michigan  
25 Sheldon Blvd  
Grand Rapids, MI 49503

August 17, 2018

Mr. Cottrell,

Thank you for submitting your renewal application for the transitional housing project, Project HEAL, in the 2018 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 54 while the community's median score was 76.8. This project is recommended to be split between Tier 1 and Tier 2 of the Project Priority Listing when submitted to the Department of Housing and Urban Development (HUD). If you believe your project was scored incorrectly, you may appeal the score by completing an Appeals Application and emailing it to [kjohnson@hwmuw.org](mailto:kjohnson@hwmuw.org) by 12:00 PM on Friday, August 24, 2018. The application and the CoC's Appeals Policy are both available on the Coalition's website at the following link: <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>

Coalition staff will follow up with you to ensure all information is accurately provided to HUD via e-snaps. We will be reaching out to you shortly to correct any errors in your e-snaps application. **In order to maintain this project's placement in the Project Priority Listing, all required forms and requested changes by Coalition staff must be completed correctly within e-snaps by 12:00 PM on Friday, August 24.**

Please contact me at [pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org) with any questions or comments.

Sincerely,

Paul LeBlanc  
Grant Writer, Heart of West Michigan United Way  
Interim Funding Manager, Grand Rapids Area Coalition to End Homelessness





## **MI-506 - Grand Rapids, Wyoming/Kent County CoC Project Rejection – Reduction Notification**

There were no projects reduced or rejected for the FY 2018 CoC Program Competition.

## Paul LeBlanc

---

**From:** Paul LeBlanc  
**Sent:** Friday, July 27, 2018 12:36 PM  
**To:** adrienneGoodstal@meltrotter.org; Amy DeMott; Arielle J. Goodson; Ashley Pattee; atrammell@dwellingplacegr.org; Becky Mills; began@intheimage.org; Ben Kaiser; Beverly.Ryskamp@network180.org; Brenna Kotchka; Brian\_Bruce@usc.salvationarmy.org; Bryan Holt; Candace Cowling; caseygordon@kentisd.org; cbohatch@grand-rapids.mi.us; Cheryl Schuch; Chris Romero; Christina Coffman Verbrugge; Christina Pavlak; Christina Swiney; Claire Guisfredi; darrell.singleton@kentcountymi.gov; Dave Jacobs; David Gantz; DaVionte Shannon; dawnb; Deanna Rolffs; denise.price@hhshealthoptions.org; Dennis Sturdevant; Dennis Van Kampen; Desiree Gibson; destep@voami.org; dillont@grps.org; dphillips@hqgr.org; ebanchof@grand-rapids.mi.us; Emily Schichtel; 'Erin'; esweeney@bethany.org; Felicia Clay; Gayle Witham; Ginny Koole; Gregory Randall; Gwendolyn Nathan; Heidi DeVries; 'Holly Anderton'; Holly Wilson; htinney@grhousing.org; Jack Greenfield; Jack Woller; Jameela Maun; Jamin Short; Janelle Hill; jcnossen@arborcircle.org; Jeremy DeRoo; Jermaine Jackson; jking@communityrebuilders.org; Jodi Smith; Joel Ruiter; John Farrington; Julie Mushing; jwynbeek@genesishnphc.org; Karen Leppek; Karleem Johnson; Kat Oblinger; Katherine Besaw; Kathleen Papke; kbrown@iccf.org; Kim Lucar; Kristin Gietzen; Kristy.Stougaard; ktjapkes@legallaidwestmich.net; Kurt Reppart; Kwan McEwen; Kyle Johnson; 'Kym Duursma'; L Garcia; larrya.deshanejr@grpride.org; Lauren Baker Home; Lauren Van Keulen; Lauren VanKeulen; lcrafft@grfoundation.org; leslie.montgomery@redcross.org; Linda Scott; lisa@familypromisegr.org; Lisbeth Keegan; Lyndsay McGarry; Lynn Locke; Madison Werley; Marcia Patrick; Marge Palmerlee; marge@degageministries.org; Marsha Hazen; Matthew Van Zetten; Maureen Kirkwood; Melvin Eledge - BBB; Michelle Van Dyke; Nancy Oliver; Nikki Turek; Nina Bowser; Paul Haan; Paul LeBlanc; pspaeth@covenanthouse.org; Rebeca Velazquez-Publes; Rebecca Krentz; Rebecca Long; Rebecca Rynbrandt; Rebecca Venema; Richa; Robin Acton; Ryan VerWys; Sarah Blystra; Sarah Weir; schalown@michigan.gov; Shandra Steinger; Shannon Gardner; shannonmariebass@gmail.com; Sherri Vainavicz; skylar@grpride.org; Sones, Brandi (MDOC; Stephanie Gingerich; Steve Tigchelaar; Steven Ward; Sue Gilbert (HNCP; Susan Vogelzang; susan.cervantes@kentcountymi.gov; Tammy Yeomans; Tara Aday; tcottrell@ywcawcmi.org; 'Thomas Pierce'; Tim Hileman; tim\_beimers@usc.salvationarmy.org; Tiyanne Whitt - Dept of Veterans' Affairs HCHV; Tom Feeney; troupea@michigan.gov; Vera Beech; Victoria Sluga; Virgie Ammerman; Wende Randall; William Williams

**Subject:** Local 2018 CoC Funding Competition is Open  
**Attachments:** 2018LocalApp\_Infrastructure - FINAL.docx; 2018LocalApp\_Instructions - FINAL.docx; 2018LocalApp\_NewBonus - FINAL.docx; 2018LocalApp\_NewBonus\_Scorecard - FINAL.docx; 2018LocalApp\_Renewal - FINAL.docx; 2018LocalApp\_Renewal\_Scorecard - FINAL.docx

**Importance:** High

CoC Members,

The local competition for FY 2018 HUD funding is now open. Renewal, New, and Bonus Project Applications will all be accepted until **12:00 PM on Friday, August 10, 2018**. Please share this information with your networks, as new permanent housing bonus applications and domestic violence bonus applications will be accepted in this competition.

Attached to this email you will find instructions for new and returning applicants, applications (renewal, new/bonus, and infrastructure), and scorecards. These documents may also be accessed online at <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>.

For questions about the application process, please contact me via email at the information provided below.

Thank you!

**Paul LeBlanc**

He/Him Pronouns

Grant Writer, Community Impact

Heart of West Michigan United Way

(616) 752-8617

[pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org)





## Paul LeBlanc

---

**From:** Paul LeBlanc  
**Sent:** Friday, August 03, 2018 9:25 AM  
**To:** 'adrienneGoodstal@meltrotter.org'; 'Amy DeMott'; 'Arielle J. Goodson'; 'Ashley Pattee'; 'atrammell@dwellingplacegr.org'; 'Becky Mills'; 'began@intheimage.org'; 'Ben Kaiser'; 'Beverly.Ryskamp@network180.org'; 'Brenna Kotchka'; 'Brian\_Bruce@usc.salvationarmy.org'; 'Bryan Holt'; 'Candace Cowling'; 'caseygordon@kentisd.org'; 'cbohatch@grand-rapids.mi.us'; 'Cheryl Schuch'; 'Chris Romero'; 'Christina Coffman Verbrugge'; 'Christina Pavlak'; 'Christina Swiney'; 'Claire Guisfredi'; 'darrell.singleton@kentcountymi.gov'; 'Dave Jacobs'; 'David Gantz'; 'DaVionte Shannon'; 'dawnb'; 'Deanna Rolffs'; 'denise.price@hhshealthoptions.org'; 'Dennis Sturdevant'; 'Dennis Van Kampen'; 'Desiree Gibson'; 'destep@voami.org'; 'dillont@grps.org'; 'dphillips@hqgr.org'; 'ebanchof@grand-rapids.mi.us'; 'Emily Schichtel'; 'Erin'; 'esweeney@bethany.org'; 'Felicia Clay'; 'Gayle Witham'; 'Ginny Koole'; 'Gregory Randall'; 'Gwendolyn Nathan'; 'Heidi DeVries'; 'Holly Anderton'; 'Holly Wilson'; 'htinney@grhousing.org'; 'Jack Greenfield'; 'Jack Woller'; 'Jameela Maun'; 'Jamin Short'; 'Janelle Hill'; 'jcnossen@arborcircle.org'; 'Jeff Dombrowski'; 'Jeremy DeRoo'; 'Jermaine Jackson'; 'jking@communityrebuilders.org'; 'Jodi Smith'; 'Joel Ruiter'; 'John Farrington'; 'Julie Mushing'; 'jwynbeek@genesishphc.org'; 'Karen Leppek'; 'Karleem Johnson'; 'Kat Oblinger'; 'Katherine Besaw'; 'Kathleen Papke'; 'kbrown@iccf.org'; 'Kim Lucar'; 'Kristin Gietzen'; 'Kristy.Stougaard'; 'ktjapkes@legalaidthwestmich.net'; 'Kurt Reppart'; 'Kwan McEwen'; 'Kyle Johnson'; 'Kym Duursma'; 'L Garcia'; 'larrya.deshanejr@grpride.org'; 'Lauren Baker Home'; 'Lauren Van Keulen'; 'Lauren VanKeulen'; 'lcrafft@grfoundation.org'; 'leslie.montgomery@redcross.org'; 'Linda Scott'; 'lisa@familypromisegr.org'; 'Lisbeth Keegan'; 'Lyndsay McGarry'; 'Lynn Locke'; 'Madison Werley'; 'Marcia Patrick'; 'Marge Palmerlee'; 'marge@degageministries.org'; 'Marsha Hazen'; 'Matthew Van Zetten'; 'Maureen Kirkwood'; 'Melvin Eledge - BBB'; 'Michelle Van Dyke'; 'Nancy Oliver'; 'Nikki Turek'; 'Nina Bowser'; 'Paul Haan'; 'Paul LeBlanc'; 'pspaeth@covenanthouse.org'; 'Rebeca Velazquez-Publes'; 'Rebecca Krentz'; 'Rebecca Long'; 'Rebecca Rynbrandt'; 'Rebecca Venema'; 'Richa'; 'Robin Acton'; 'Ryan VerWys'; 'Sarah Blystra'; 'Sarah Weir'; 'schalown@michigan.gov'; 'Shandra Steininger'; 'Shannon Gardner'; 'shannonmariebass@gmail.com'; 'Sherri Vainavicz'; 'skylar@grpride.org'; 'Sones, Brandi (MDOC)'; 'Stephanie Gingerich'; 'Steve Tigchelaar'; 'Steven Ward'; 'Sue Gilbert (HNCP)'; 'Susan Vogelzang'; 'susan.cervantes@kentcountymi.gov'; 'Tammy Yeomans'; 'Tara Aday'; 'tcottrell@ywcawcmi.org'; 'Thomas Pierce'; 'Tim Hileman'; 'tim\_beimers@usc.salvationarmy.org'; 'Tiyanna Whitt - Dept of Veterans' Affairs HCHV'; 'Tom Feeney'; 'troupea@michigan.gov'; 'Vera Beech'; 'Victoria Sluga'; 'Virgie Ammerman'; 'Wende Randall'; 'William Williams'

**Subject:** Local Applications Reminder

CoC Members,

**This is a friendly reminder that local applications for the FY 2018 CoC Funding Competition are due a week from today – on Friday, August 10, 2018 by 12 PM (late applications will not be accepted).** Application and instructional documents are available on the Coalition's website at <http://endhomelessnesskent.org/2018-hud-coc-program-funding-competition/>.

If you have any questions regarding the applications or funding process, please feel free to reach out to me via email. I will be posting all questions I receive (with identifying information removed) and my responses on the Questions and

Responses page on the website (<http://endhomelessnesskent.org/questions-and-responses-related-to-the-local-application/>).

Thanks!  
Paul

**Paul LeBlanc**  
He/Him Pronouns  
Grant Writer, Community Impact  
Heart of West Michigan United Way  
(616) 752-8617  
[pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org)





by the name: "AgencyNameProjectNameLocal18" wherein the agency and project names should be inserted where indicated.

- 2) E-snaps. In addition to the Local Application Form, project applications (formerly known as Exhibit 2) are required be entered into the electronic grants management system managed by HUD's Office of Special Needs Assistance Programs known as "e-snaps". If the agency is new to e-snaps or if there are staff within the agency who require access, guidance is available on the following HUD website: <https://www.hudexchange.info/programs/e-snaps/>.

On this site, you will find guidance on:

- Navigating the e-snaps site.
- Adding/Deleting users in e-snaps.
- Obtaining a DUNS number and System Award Manager (SAM) registration.
- Ensuring the agency's Code of Conduct is current and posted to the HUD website.

e-snaps application forms are to be saved and submitted as Word Documents or saved PDF documents (no scanned documents). Files should be saved by the name: "AgencyNameProjectNameES18" wherein the Agency and Project names should be inserted where indicated.

NOTE: This year HUD is offering projects with no changes the option to select a "no changes" box that will prepopulate the e-snaps application for the agency (this must have been requested during the registration process).

**APPLICATION DEADLINE: 12:00 PM, FRIDAY, August 10, 2018**

**Late applications will not be accepted.**

#### **SIGNATURE**

An original signature is not required, but the name and title of the authorized agency representative must be included on the application.

The Coalition reserves the right to request additional information, as determined necessary, to review any application. All information submitted through this solicitation becomes the property of the Coalition.

#### **QUESTIONS**

Please direct questions regarding this application opportunity to:

Paul LeBlanc  
[pleblanc@hwmuw.org](mailto:pleblanc@hwmuw.org)







## **Grand Rapids Area Coalition to End Homelessness<sup>1</sup>**

### **Governance Charter**

The Grand Rapids Area Coalition to End Homelessness is a community collaborative that is actively working on systems change in the area of homelessness. The goal of the Coalition is to prevent and end systemic homelessness in Kent County, guided by the values and philosophy set forth in the original 10-year community developed plan, the *Vision to End Homelessness*.

The Grand Rapids Area Coalition to End Homelessness, also known as the Kent County Continuum of Care (CoC), is an independent, non-incorporated membership entity comprised of numerous organizations and individuals. It was formed in response to federal requirements in the McKinney-Vento Homeless Assistance Act of 1987 reauthorization in 1994 and amended in the Homeless Emergency Assistance and Rapid Transition (HEARTH) Act of 2009 for administration of US Department of Housing and Urban Development (HUD) funding to address homelessness as described in 24 CFR Part 578.5. The CoC Governance Charter and subsequent amendments are approved, consistent with 24 CFR Part 578.5, by the CoC membership. Governance decisions on behalf of the CoC are made by a Steering Council elected from the membership, in accordance with the CoC Governance charter. Annually the Continuum of Care applies to the HUD Continuum of Care (CoC) Program for funding to address homelessness.

The CoC is committed to collaboration where ever possible to accomplish its stated goals to end homelessness. The Essential Needs Task Force (ENTF), a broader community effort to coordinate the response to basic needs and strengthen communications across systems in Kent County is one such effort that the CoC is committed to participation in. (To learn more about ENTf, see [entfkent.org](http://entfkent.org)). The ENTf functions with subcommittees that include Housing, Energy Efficiency, Economic & Workforce Development, Transportation, Food & Nutrition.

## **I. Continuum of Care (CoC)**

### **A. Role**

The Continuum of Care champions the *Vision to End Homelessness*, convening to determine local priorities, strengthen communication, encourage best practices, and promote collaboration to achieve goals.

As a community collaborative, the Continuum of Care:

- Promotes community commitment to the goal of ending homelessness,
- Gathers and analyzes information to determine local needs of individuals experiencing homelessness,
- Provides a comprehensive, well-coordinated, and clear planning process,
- Promotes access to and effective use of existing programs,
- Implements strategic responses and measures results,
- Applies for funding from the U.S. Department of Housing and Urban Development (HUD) and other funding sources based on local priorities.

---

<sup>1</sup> Resource documents: Coalition Structure, March 2010; *Establishing and Operating a Continuum of Care*, 2012, US Department of Housing and Urban Development

## B. Responsibilities

The major responsibilities that must be carried out by the CoC to comply with HUD expectations are as follows:

1. Convene regular meetings of the full membership, with published agendas, at least semi-annually
2. Issue a public invitation for new members within Kent County at least annually
3. Adopt and follow a written process to select a board to act on behalf of the CoC (identified as the Steering Council for Continuum of Care) and review that process at least once every 5 years
4. Appoint additional committees, subcommittees, or work groups as needed
5. Designate the Homeless Management Information System (HMIS) lead for the CoC
6. In consultation with the collaborative applicant for HUD funds and the HMIS lead, develop, follow and update annually:
  - a. A governance charter
  - b. A code of conduct and recusal process for the board, its chairperson and any person acting on behalf of the board
7. Establish and operate a centralized or coordinated assessment system
8. Develop a plan for a coordinated housing and service system that meets the needs of individuals, unaccompanied youth, and families experiencing homelessness
9. Plan and conduct an annual Point-in-Time count of sheltered and unsheltered persons that meets HUD guidelines
10. Establish performance targets appropriate for population and program type in consultation with recipients and sub-recipients
11. Monitor recipient and sub-recipient performance and address concerns of poor performance
12. Work with Emergency Solutions Grants recipients and Consolidated Plan jurisdictions within the geographic boundaries of the CoC to allocate, report and evaluate use of funds, and inform the plan
13. In consultation with recipients of Emergency Solutions Grants program funds, establish and consistently follow written standards for providing CoC assistance with those funds

The CoC is responsible for carrying out all activities listed above. In Kent County, the CoC delegates these responsibilities to its Steering Council which may, in turn, delegate some of these responsibilities to other organizations. Because the Kent County CoC is not incorporated, Memorandums of Understanding (MOU)s rather than contracts are used whenever any of these responsibilities are delegated to other entities. These MOUs are reviewed on an annual basis by the CoC Steering Council against performance expectations outlined in the MOU. Under the current Governance Charter three particular tasks are delegated to other entities through MOUs. These include:

- Fiscal Agent (Entity that provides paid staff support for the CoC)
- HMIS Lead Agency (entity holding responsibility for Homeless Management Information System (HMIS) management and maintenance)
- Collaborative Applicant (entity formally completing the HUD CoC Competition application)

## C. Members & Term of Service

The Continuum of Care is comprised of agencies and organizations that provide direct services to households experiencing a housing crisis, other related service organizations that engage directly or indirectly with households that experience a housing crisis, and homeless or formerly homeless individuals, and is open to:

1. nonprofit homelessness assistance providers,
2. victim services providers,
3. faith-based organizations,
4. government entities,
5. businesses,
6. advocates,
7. public housing authorities,

8. school districts,
9. social services providers,
10. mental health agencies,
11. hospitals,
12. universities,
13. affordable housing developers,
14. law enforcement,
15. organizations serving veterans,
16. homeless or formerly homeless individuals.

A public invitation must be issued for new members from Kent County a minimum of once each year. While membership is voluntary, organizations and homeless or formerly homeless individuals are required to formally sign-up as members and affirm their commitment to the mission of the Coalition to End Homelessness in order to have voting and other privileges with the group. Member organizations or entities must designate one person to serve as the voting representative. Annually, members of the Continuum of Care must renew their membership and confirm the designation of their voting representative.

A roster of voting representatives is maintained and updated at least annually. A voting representative from an organization or agency may assign their proxy to another individual from their organization; however, at no time will any organization be provided with multiple votes. The voting representative must provide a 24 hour notice to CoC staff via email indicating which pre-registered alternate voter (of which there can be no more than two) will be voting for their organization. Additionally, any voting representative can only vote once and cannot represent more than one organization or person.

Continuum of Care members may continue to participate indefinitely. Members are expected to attend CoC meetings a minimum of twice a year and are strongly encouraged to participate in committees and work groups.

#### **D. Meetings**

The Continuum of Care must meet a minimum of twice a year although more meetings may be held as needed.

1. Steering Council Chairperson presides at Continuum of Care meetings.
2. Meeting agenda are developed by the Steering Council and published in advance of the Continuum of Care meeting.
3. Continuum of Care members have the right to suggest additional agenda items for a Continuum of Care meeting but additional agenda items must be approved by a majority vote of those in attendance at that Continuum of Care meeting.
4. Meetings may include opportunities to share information about local partners, best practices from the field, progress toward achieving the goals of the Coalition, and Coalition activities.
5. Attendance records must be maintained and the records must include the names of all individuals, with organizations noted as appropriate.

## **II. Steering Council**

#### **A. Role**

The Coalition Continuum of Care represents many community stakeholders in carrying out the mission of leading the community in finding solutions for preventing and ending homelessness. To facilitate effective execution of Coalition goals, a Steering Council performs the functions of a CoC board, with certain specific responsibilities assigned by the Continuum of Care through this Governance Charter.

#### **B. Responsibilities**

The Steering Council is responsible for ensuring that the seven major HUD defined responsibilities in Section I.B. are carried out. In addition, the Steering Council is authorized by the Continuum of Care to:

1. Serve as the primary decision-making entity for the Continuum of Care according to the approved governance structure,
2. Set the agenda for the Continuum of Care meetings,
3. Establish policies, principles and priorities and select the Collaborative Applicant for the HUD NOFA process,
4. Determine project priorities and monitor the outcomes of those projects,
5. Oversee the competitive process for annual CoC application submissions to HUD and other funding sources and provide final approval for those application submissions,
6. Establish policies for data release and monitor HMIS Standard Operating Procedures either through direct administration of or designation of an HMIS implementing agency,
7. Direct system planning activities that engage CoC members,
8. Direct analysis of system-wide data to identify community needs and gaps and report to the CoC

### C. Participants and Terms of Service

The Steering Council is comprised of up to twenty (20) seats representing the broad array of interests within the Coalition and must:

1. Include at least **two homeless or formerly homeless individuals**
2. At a minimum, represent the relevant organizations and projects serving homeless subpopulations, such as persons with substance use disorders; persons with HIV/AIDS; veterans; the chronically homeless; facilities with children; unaccompanied youth; the seriously mentally ill; formerly incarcerated; and victims of domestic violence, dating violence, sexual assault, and stalking. One member may represent the interest of more than one homeless subpopulation, and the Steering Council must represent all subpopulations within the Coalition to the extent that someone is available and willing to represent the subpopulation.

The seats referenced above are rotating seats with alternating, three-year terms, elected by the Continuum of Care annually. Steering Council members whose terms are expiring are allowed to campaign for re-election for continuing terms.

Four seats are considered permanent, non-rotating seats assigned to the following entities:

- a. Units of local government that are HUD Grantees:
  1. City of Grand Rapids
  2. City of Wyoming
  3. Kent County
- b. HARA (Housing Assessment and Resource Agency)/Central Intake

These entities are responsible for designating their representative to the Coalition Steering Council.

Steering Council members must serve on committees and work groups, including those organized by the CoC, those organized by external groups, or other existing community forums with relevant objectives. Service on committees and work groups is critical to ensuring effective liaison and coordination of activities.

Steering Council members serve for three year terms, staggered so that approximately one-third of all terms end in any given year. The Continuum of Care shall determine the specific fiscal year period for terms on the Steering Council.

The selection process for Steering Council members is described under the Nominating Committee. This process is subject to review and alteration on an annual basis by Continuum of Care but no less frequently than every five years.

#### **D. Meetings and Attendance**

The Steering Council meets a minimum of six times annually.

The Steering Council responsibilities are such that at each meeting the group should be capable of voting on an issue. This requires members to be present for the vote, and involved to make an informed decision. Therefore, Steering Council members should maintain a minimum attendance rate of 75% of all Steering Council meetings. If any member falls below this amount, they will be asked to re-evaluate and ensure they are able to maintain their commitment. If at least 50% of meetings have been missed in the twelve month period of October –September, the seat will be considered open in the next Steering Council election.

#### **E. Officers**

1. Chairperson, vice chairperson, secretary, and treasurer;
2. Elected by the Steering Council annually during a specific month as determined by the Steering Council but no longer than 60 days following the annual election by the Continuum of Care of new members to that Council;
3. Officer terms are one year and can be renewed;
4. Steering Council chairperson, or vice-chairperson in the absence of the chairperson, presides at meetings of the Steering Council, the Executive Committee, and CoC Continuum of Care;
5. In absence of a sitting Chairperson, ENTF staff will Chair the Steering Council meeting with the sole purpose of executing officer elections;
6. All Steering Council members are expected to observe the Code of Conduct and the Conflict of Interest Policy.

#### **A. Decision Making**

The presence of a majority of Steering Council members then holding office shall constitute a quorum at all meetings. If a quorum is not present, no voting will occur. A simple majority of those in attendance and eligible to vote is necessary for any resolution to be passed.

Within elected seats of the Steering Council, no alternate representative will be given a proxy vote. For appointed seats, those four held by the HUD Participating Jurisdictions and the HARA, an alternate representative is able to vote. Advance notice of which member will be attending and voting should be provided in writing to CoC staff.

In the matter of approving funding recommendations made by the Funding Review Committee, the Steering Council will give final approval. Once approval is secured, CoC staff shall inform applicants of the outcome of their application in writing. Included in this notice should be the Funding Decision Appeal policy of the CoC, informing applicants of their right to appeal and the process in which to do so.

There may be instances when a decision is needed by the Steering Council between regularly scheduled meetings. When this happens, electronic voting may be completed. A simple majority of current Steering Council members is necessary for any resolution to be passed. Members who do not subscribe to an email service must have contact attempted to allow them to vote verbally.

### **III. Committees**

In the interest of transparency and community involvement, all committees except those requiring election, shall be open to all CoC members.

## A. Executive Committee

### Role and Responsibilities

In accordance with resolutions passed from time to time by the Steering Council delegating specific tasks to the committee, the Executive Committee may meet as needed to:

1. Consider and recommend the annual budget,
2. Consider staffing needs and make recommendations on fulfilling necessary functions,
3. Review financial reports and present them to the Steering Council,
4. Consider and recommend policy,
5. Prepare annual work plan and calendar including required CoC functions,
6. Plan Steering Council meeting agenda,
7. Plan Continuum of Care meeting agenda,
8. Appoint members to serve in the case of a vacancy to the Steering Council or nominating committee,
9. Make recommendations on committees, task forces, or work groups and recommend members,
10. Lead the process to create a strategic plan that advances the goal of ending homelessness.

### Limitations

Unless otherwise specifically delegated by Steering Council resolution for Executive Committee action, all Executive Committee determinations are presented to the Steering Council for final review and/or decision-making.

### Participants and Terms of Service

The executive committee of the Steering Council is made up of the four officers plus a minimum of one other Steering Council member.

### Meetings

The executive committee meets as needed between meetings of the Steering Council.

In the event of a resignation from the Steering Council, the Executive Committee shall appoint a member to serve on the Council until the next election. Priority for the appointment shall be given to the organization or population area the resigning member had represented, with consideration given to any population areas unrepresented in the current Steering Council membership.

## B. Nominating Committee

### Role and Responsibilities

The Nominating Committee is responsible for proposing election or re-election of the **sixteen rotating seats** of Steering Council members whose terms are coming to an end or to fill positions that have been vacated. Nominating Committee members serve staggered two-year terms.

Members of the Nominating Committee must:

1. Review the current composition of the Steering Council to determine satisfactory systemic representation in accordance with the approved policy of the Continuum of Care;
2. Evaluate attendance of members who are completing a term and, if eligible for reappointment, determine their willingness to continue;
3. Seek recommendations from the Continuum of Care membership for qualified candidates;
4. Deliberate and compile a list of eligible candidates to present to the Continuum of Care for election;

5. Provide for an open process allowing nominations from the floor at the Continuum of Care meeting convened for the annual election.

### **Officers**

The Nominating Committee also is responsible for preparing a slate of officers for presentation to the Steering Council for annual election to take place no later than 60 days after the beginning of the annual term for Steering Council members. To carry out this responsibility, the Nominating Committee will review officers' participation and term end dates, recruit candidates, and prepare a slate to present to the Steering Council for election.

### **Participants and Terms of Service**

The Nominating Committee is comprised of five individuals, including three CoC members and two members of the Steering Council who are not currently serving as officers. Nominating Committee members must have a working knowledge of CoC responsibilities and structure, the Coalition, and the *Vision to End Homelessness*.

The Nominating Committee is formed to serve for two years.

1. The Steering Council selects a Steering Council member to chair the Nominating Committee and selects one additional Steering Council member to serve on the committee
2. The Continuum of Care members elect Nominating Committee members by the following process:
  - a. A minimum of three weeks in advance of a scheduled Continuum of Care meeting, candidates to serve on the Nominating Committee are sought through distribution of a message to all Continuum of Care' voting representatives of record;
  - b. A written ballot is distributed to voting representatives at the Continuum of Care meeting; each qualified voting representative can vote for three candidates;
  - c. Votes are tallied and the three candidates receiving the highest number of votes serve on the Nominating Committee;
  - d. In the event of a resignation from the committee, the Executive Committee shall appoint a member to serve until the next election.

### **Meetings**

Six months prior to the end of the fiscal year: Nominating Committee formed based on process above

Four/five months prior to the end of the fiscal year: Nominating Committee meets

One month prior to the end of the fiscal year: Continuum of Care elects new or renewing Steering members

First month of the fiscal year: New Steering Council members join and within sixty days the Steering Council elects officers from a slate prepared by the Nominating Committee

## **C. Funding Review Committee**

### **Role and Responsibilities**

The Funding Review Committee is responsible for reviewing applications and making prioritized project funding recommendations to the Steering Council for action. Funding sources include the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH Act) grant funds under the Continuum of Care Program administered by HUD.

The Funding Review Committee develops the scoring criteria for rating and ranking applications based on local needs and priorities and HUD priorities for program services as outlined in the Notice of Funding Availability (NOFA). The committee is responsible for understanding the NOFA, considering local priorities, and evaluating applicant agencies' program performance based on evidence and data.



## **Participants and Terms of Service**

The Funding Review Committee is comprised of community members who represent systems that fund or interface with the homeless system, are knowledgeable about homelessness and housing, but are not applicants. This includes individuals from the various homeless sub-populations; homeless service providers (e.g., prevention, emergency housing, transitional housing, permanent and permanent supportive housing); municipalities and governmental units that fund the Coalition; and community representatives (e.g., business, foundations, United Way). Members of the Funding Review Committee need not be Coalition members.

The Steering Council is responsible for appointing the Funding Review Committee members. In selecting committee members, the Steering Council will attempt to avoid even the appearance of impropriety. All committee members will review the Conflict of Interest policy and complete the disclosure form prior to beginning their service on the committee. Potential conflicts of interest could include: participation in the planning of a project or providing technical assistance in the preparation of a project application in either a paid or volunteer capacity or active involvement as a board or staff member of any agency that has a proposal for funding pending. Perceived advocacy for a project can also disqualify an individual from serving on the committee.

## **Meetings**

The Funding Review Committee meets as needed to carry out its duties. Typically, this includes an orientation session, a meeting to consider priorities, one or more meetings to evaluate applications, and one or more meetings to score and rank applications. New members will also be required to meet as necessary to complete the committee training curriculum as approved by the Steering Council. Meetings are scheduled to provide sufficient time to complete the work, forward recommendations for Steering Council action, and submit the completed application to meet HUD deadlines.

## **Appeals**

An Appeals Panel shall be assembled for each funding round consistent with the Appeals Policy for funding recommendations that is adopted and updated by the Steering Council.

## **D. HMIS Data Quality Committee**

### **Role and Responsibilities**

The Homeless Management Information System (HMIS) is a tool for the community and HUD to develop better information on the nature of homelessness, the number of people experiencing homelessness, the existing patterns in housing programs and services, and the effectiveness of programs and services in addressing homelessness. HMIS must be used by the CoC and all recipients of HUD program funds.

The HMIS Data Quality Committee performs several important functions: insuring that the HMIS is administered in compliance with requirements prescribed by HUD, reviewing, revising, and recommending adoption of an HMIS privacy plan, security plan, and data quality plan, and ensuring the consistent participation of recipients and sub recipients in the HMIS.

The HMIS Data Quality Committee is responsible for on-going system wide analysis to identify strengths and gaps in the data system and for preparing and/or updating data quality standards for consideration by the Steering Council.

A subcommittee, the HMIS Users Group, is responsible for ensuring that all agency and program staff with responsibility for data entry are appropriately trained on system use and for assisting with formulation and periodic review of policy and procedures, such as the privacy plan.

#### **Participants and Terms of Service**

Members of the HMIS Data Quality Committee are selected based on their knowledge of data systems, standards for data quality, and relevant policy and procedures, for example, policy related to data privacy. Members must commit to understanding basic HUD requirements in relation to data collection and reporting.

Committee members are drawn from Coalition CoC member agencies and include representation from HUD-funded agencies and non-HUD-funded agencies. Other individuals may be appointed to the committee based on specific expertise.

The HMIS Users Group, a subcommittee of the Data Quality Committee, is open to all member agency staff members with direct, hands-on, responsibility for entering data and using the data system.

### **E. Coordinated Assessment Committee**

#### **Role and Responsibilities**

The primary role of the Coordinated Assessment Committee is to provide oversight and review to the Coordinated Assessment system for households experiencing homelessness to be served by both temporary and permanent housing, according to eligibility and service standards of the community.

#### **Participants and Terms of Service**

The Coordinated Assessment Committee is made up of representatives of those Coalition CoC member agencies that participate in the Coordinated Assessment system. Coordinated Assessment Committee should likewise include representation from community systems level and other CoC members not directly participating in the Coordinated Assessment system.

### **F. Data Analysis Committee**

#### **Role and Responsibilities**

The Data Analysis committee is responsible for regular review of multi-level data to evaluate system level progress toward ending homelessness. The work of this committee shall inform the work of other committees to ensure activities are contributing to improved system level outcomes. This committee is specifically charged with preparation and review of annual HUD System Performance Measures reports, Point-in-Time and Housing Inventory reports. The committee is responsible for reporting to the Steering Council on a regular basis regarding the effectiveness of the comprehensive system to address homelessness. This should include specific attention to system level performance measures established by the CoC (see Sec I. A, Continuum of Care: Implements strategic responses and measures results).

#### **Participation and Terms of Service**

Members of the Data Analysis Committee are drawn from the Coalition CoC membership and wider community and should have a basic understanding of data and its use in evaluation.

## **G. Ad-Hoc Workgroups**

Workgroups are time-limited, task oriented groups that are recruited and assigned responsibility for addressing a specific issue or challenge, including achieving the strategic plan objectives. Such groups will be formed as need is determined by Steering Council, or upon recommendation of one of the standing committees. A representative of each workgroup shall be appointed to report to one of the standing committees to ensure communication and coordination of work. Workgroups also may form organically as a result of individuals coming together around a shared concern or interest. When such work groups form organically, there should be brief written statement of purpose, focus, including expected time span of work and expected outcome. Such statement is to be submitted to Steering Council for reference.

## **IV. Conflict of Interest**

No Steering Council member may vote on matters concerning the award of a grant or other financial benefits if it might affect the organization that member represents. In addition, members will avoid conflicts of interest between the Coalition and any personal, professional, and business interests.

In any vote that might create a conflict of interest for the voting member, it is their responsibility to state that they recuse themselves from the vote. In written records of the vote, these members should be noted as having abstained.

At the beginning of each fiscal year, Steering Council members are expected to sign the Conflict of Interest policy document and to abide by the provisions regarding disclosure at all meetings. The signed policy documents are kept on file with meeting minutes and other records.

## **V. Code of Conduct**

The Coalition prohibits the solicitation and acceptance of gifts or gratuities (anything of monetary value) by officers, employees and agents for their personal benefit.

The Coalition promotes impartiality in performing official duties and prohibits any activity representing a conflict of interest. Individual members should not act on a matter if a reasonable person who knew the circumstances of the situation could legitimately question that individual's fairness.

The Coalition prohibits the misuse of position for personal gain or for the benefit of family or friends.

Officers and employees shall put forth honest effort in the performance of their duties. They shall not knowingly make unauthorized commitments or promises of any kind purporting to bind the Coalition without previous Steering Council approval.

Officers and employees shall disclose waste, fraud, abuse, and corruption to appropriate authorities.

## **VI. Schedule of Review**

This Governance Charter for the Grand Rapids Area Coalition to End Homelessness CoC is subject to annual review. All responsibilities required of a Continuum of Care must be thoroughly documented in the CoC's governance charter.

Specifically, the Continuum of Care "in consultation with the collaborative applicant and the Homeless Management Information System (HMIS) lead, must develop, follow, and update annually (1) a governance charter

that includes all procedures and policies needed to comply with 24 CFR Part 578.5(b) and with HMIS requirements as prescribed by HUD and (2) a code of conduct and recusal process for the board, its chair(s), and any person acting on behalf of the board.” (2012, *Establishing and Operating a Continuum of Care*, US Department of Housing and Urban Development, page 4)

**ADOPTED:** June 27, 2013

**AMENDED:** August 22, 2013  
October 23, 2014  
October 22, 2015  
December 15, 2016  
September 22, 2017

## **Joint Governance Charter Michigan Statewide HMIS**

**Objective:** The Charter is designed to provide a frame for Michigan's multi-jurisdiction HMIS implementation as presented in Section 508.7 of the Federal Register / Vol. 76, No. 237 Homeless Management System Requirements. It is recognized that operation of the Statewide HMIS requires ongoing collaboration from member Continuum of Cares through participation in monthly System Coordination Meetings known as the "Monthly System Administrator Call-In".

The Wyoming/Kent County/Grand Rapids CoC agrees to adopt the Michigan Statewide shared HMIS platform vendor, Bowman Systems Inc. ServicePoint. The CoC agrees that administration of the shared platform will be provided by the Michigan Coalition Against Homelessness under contract (MOU) with the Michigan State Housing Authority. The CoC further agrees to operate the local CoC Implementation in compliance with 24CFR part 578 and applicable HUD Data Standards and the 2015 Michigan Statewide Operating Policies and Procedures.

### **Roles and Responsibilities:**

#### **Michigan State Housing Development Authority**

- Grantee for the Michigan Statewide HMIS Implementation.
- Sub-contract for administration of the Statewide platform.
- Ongoing contract compliance.

#### **Michigan Coalition Against Homelessness:**

- Management of the Statewide Vendor Contract.
- Host the Statewide coordination meeting – the Monthly SA Call-In.
- Define privacy and security protocols that allow for the broadest possible participation.
- Provide Statewide Operating Policies and Procedures that represent the minimum standards for participation. Local CoCs may add additional requirements as negotiated locally.
- Provide for system administration and analyst staffing of help desk services between 9am and 5pm workdays and after-hours emergency response.
- Provide training and ongoing collaboration regarding cross-jurisdiction system operation, measurement and research activities including:
  - Negotiation and training basic workflows for all users and specialized workflows for cross-jurisdiction funding streams.
  - HUD mandated activities including HAG, PIT, HIC, APR and the AHAR.
  - Annual publication of Statewide and Regional unduplicated homeless counts.
  - Research projects that involve statewide data sets such as SHADoW.
  - Maintain a suite of data quality, demographics, and outcome reports available to all CoCs on the System.
  - Support for local Continuous Quality Improvement efforts.

**Independent Jurisdiction CoC and Local Lead HMIS Agency:**

- Plan the local HMIS implement to maximize the greatest possible participation from homeless service providers.
- Fund the cost for local licenses to the Statewide System via contracts with Bowman Systems.
- Comply with Michigan Statewide Privacy Protocols as specified in the QSOBAAs, Participation Agreements and the User Agreement Code of Ethics.
- Adopt and any additional standards of practice beyond those identified in the Statewide HMIS Operating Procedures.
- Staff at least one local System Administrator and assure that each participating agency has identified an Agency Administrator. The System Administrator will:
  - Complete demonstrate competence in Statewide required training in privacy, security and system operation (provider page, workflows and reports).
  - License local users and support data organization and completion of Provider Pages for participating agencies.
  - Assign licenses to Agency Administrators and/or users.
  - Host local HMIS operations meeting(s) or assure that Agency Administrators are attending the Statewide User Meetings.
  - Assure that all users are trained in privacy, security and system operation.
  - Participate in HUD mandated measurement including HAG, PIT, HIC, APRs and the AHAR as appropriate.
  - Participating in the annual count process and support publication of local reports.
  - Support the CoCs Continuous Quality Improvement efforts.

Signed: Betty Rylst Date: 9/9/16

**HMIS Lead Agency:** Salvation Army Social Services, Kent **Title:** Exec Dir of Soc Svcs

Signed: Rebecca Rynbrandt Date: 9.9.16

**CoC Representative:** Rebecca Rynbrandt **Title:** Chairperson

# **2017 MSHMIS Operating Policies and Procedures**

rev. 2018.02.08 FINAL



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## Revision History:

Revision Date	
November, 2016	First Release of Policy Rewrite
February, 2018	Second Release, Edits for Compliance with the 2017 HUD Data Standards Revisions and Coordinated Assessment Requirements. Replaced all references to Bowman Systems with Mediware Information Systems. Incorporated recommendations based on comments delivered from end users and administrators within the implementation. Approved 2/8/2018 by the MI BOSCO

# 2017 Michigan Statewide Homeless Management Information System (MSHMIS) Operating Policies and Procedures

The purpose of an HMIS project is to:

- Record and store client-level information about the numbers, characteristics and needs of persons who use prevention, homeless housing and supportive services.
- To produce an unduplicated count of persons experiencing homelessness for each Continuum of Care
- To understand the extent and nature of homelessness locally, regionally and nationally
- To understand patterns of service usage and measure the effectiveness of projects and systems of care.

These are the minimum standards of operation for the MSHMIS Project. CoCs may elect to implement more rigorous standards as agreed upon by their local CoC. **The following operating policies and procedures apply to all designated HMIS Lead Agencies and participating agencies in Michigan. (Contributing HMIS Organizations – CHOs).**

## KEY TERMS AND ACRONYMS:

Term	Acronym (if used)	Brief Definition
42 CFR Part 2	<b>Part 2</b>	42 CFR Part 2 is the federal regulation governing the confidentiality of drug and alcohol use treatment and prevention records. The regulations are applicable to certain federally assisted substance use treatment programs limiting the use and disclosure of substance use patient records and identifying information.
Administrative Qualified Services Organization Business Associates Agreement	<b>Admin QSOBAA</b>	The agreement signed by each CHO, the local HMIS Lead Agency, MCAH and MSHDA that governs the privacy standards for participants who can see data from multiple organizations.
Balance of State CoC	<b>BOS</b>	MSHDA/MHAAB have organized local planning bodies/jurisdictions throughout Michigan that make up the “Balance of State” IJ. These groups have historically been called Balance of State CoCs as they are organized like Independent Jurisdictions with many of the same rules, however they have no legal status with HUD.
By-Name List	<b>BNL</b>	A By-Name List is a list of persons experiencing homelessness within a specific jurisdiction. By-Name Lists can be comprehensive, meaning they include all homeless persons, or focused, meaning they contain persons with certain subpopulation, (ex. chronic or veteran), or prioritization characteristics. By-Name Lists are frequently used within collaborative multi-partner meetings known as case conferencing sessions to link appropriate homeless persons with housing opportunities that best meet their needs. <sup>i</sup>
Continuum of Care	<b>CoC</b>	Planning body charged with guiding the local response to homelessness.
Contributing HMIS Organizations	<b>CHO</b>	An organization that participates on the HMIS.

Coverage Rate		Coverage rate refers to the percentage of the homeless population in a geographic area that is measured in the HMIS, divided by the total number of homeless persons in that geographic area. Coverage rates are used to project a total homeless count if there are homeless service that do not participate in MSHMIS. (These may include persons served in Domestic Violence Providers or other non-participating Shelters or Outreach Projects.) See the MSHMIS Coverage Memo for guidance.
Department of Health and Human Services Emergency Services Project	<b>DHHS ESP</b>	The ESP project combines DHHS general fund funds and TANF dollars designated for homeless services, primarily sheltering. The dollars are managed through the Salvation Army and require HMIS participation.
Family and Youth Services Bureau	<b>FYSB</b>	A division of the Department of Health and Human Services, the Family and Youth Services Bureau provides federal resources to address homelessness among youth. <sup>ii</sup>
The Health Insurance Portability and Accountability Act of 1996	<b>HIPAA</b>	The Health Insurance Portability and Accountability Act of 1996, particularly the Privacy Rule under Title II, regulates the use and disclosure of Protected Health Information (PHI) held by covered entities and business associates. HIPAA is the base operational privacy rule on which the MSHMIS privacy rule is structured.
Housing Assessment and Resource Agencies	<b>HARAs</b>	Michigan has implemented HARAs across the state to serve as coordinated points of entry for homeless persons. HARAs work with other service providers to ensure that access to homeless resources is optimized and based on assessment of need.
Homeless Definition		<p><b>See Homeless Definition Crosswalk.</b></p> <p><b>The HEARTH Act defines 4 categories of homelessness.</b> Not all projects can serve all categories and some may utilize a different definition when delivering services. MSHMIS has adopted the HUD definition for counting persons experiencing homelessness.</p> <ul style="list-style-type: none"> <li>• Category 1: Literally Homeless</li> <li>• Category 2: Imminent Risk of Homelessness</li> <li>• Category 3: Homeless under other Federal Statutes</li> <li>• Category 4: Fleeing/Attempting to Flee DV</li> </ul>
Homeless Management Information System	<b>HMIS</b>	A data system that meets HUD's HMIS requirements and is used to measure homelessness and the effectiveness of related service delivery systems. The HMIS is also the primary reporting tool for HUD homeless service grants as well as for other public streams of funding related to homelessness.
Housing Inventory Count	<b>HIC</b>	The HIC is where all residential projects (both HMIS participating and non-participating) specify the number of beds and units available to homeless persons within a jurisdiction. The numbers are recorded in the agency's HMIS provider pages, (for MSHMIS participating projects), or in "shell" provider pages for non-HMIS participating agencies.
Housing Opportunities for Persons with AIDS	<b>HOPWA</b>	Lead by the Michigan Department of Health and Human Services, HOPWA provides housing assistance and related supportive services for persons with HIV/AIDS, and family members who are homeless or at risk of homelessness. This project has different project reporting requirements than the other HUD funded projects in this document.
Independent Jurisdiction CoCs	<b>IJs</b>	CoCs that are recognized by HUD and are usually organized around higher population counties.
Joint Governance Charter		The Agreement between Michigan's IJ CoCs and MSHMIS that supports a statewide HMIS operating in a single system environment.

Length of Stay	<b>LOS</b>	The number of days between the beginning of services and the end of services, or in the case of permanent housing, the number of days between the housing move in date and the exit from housing. Length of stay is calculated using project start and exit dates, shelter stay dates, or for permanent housing, the housing move-in date and project exit. MSHMIS offers calculations for discrete stays as well as the total stays across multiple sheltering events.
Local Planning Body		Within the Balance of State CoC (MI-500), there are further subdivisions of leadership responsibility at local levels. While these groups were traditionally called “CoCs” within the Michigan Campaign to End Homelessness, they are not “true” CoCs from a HUD perspective. Therefore, these local partnerships that are responsible for overseeing many of the same tasks of a CoC board/collaborative body are now called Local Planning Bodies.
Local HMIS Lead Agency		The Local HMIS Lead Agency is the agency that fills the following roles for a CoC, (if applicable) <ul style="list-style-type: none"> <li>• Holds the CoC’s HMIS Grant, or is funded by other dollars (such as ESG) to support CoC wide HMIS activities.</li> </ul> Employs the Local System Administrator for the CoC.
Local Planning Jurisdiction		A Local Planning Jurisdiction is the geography covered by a Local Planning Body in the Balance of State. Local Planning Jurisdictions usually consist of one or more counties from a regional perspective, and are designed to provide a local presence for Balance of State work.
Local System Administrator/System Administrator I	<b>LSA</b>	The Local System Administrator is responsible for overseeing the operation of the MSHMIS project in either a local CoC or a Local Planning Body/Jurisdiction. The Local System Administrator/System Administrator I maintains relationships with the agencies in the local community and supports the specific HMIS needs of the agencies and leadership teams they are responsible for.
The Michigan Campaign to End Homelessness	<b>CTEH</b>	The Michigan Campaign to End Homelessness is a statewide partnership between MSHDA, MDHHS, MCAH, MDVA, the Salvation Army, and a broad coalition of regional and local partners. The CTEH exists to provide coordinated leadership for initiatives to prevent and end homelessness within the State of Michigan.
Michigan Department of Health and Human Services	<b>MDHHS</b>	The Michigan Department of Health and Human Services oversees a wide range of health, public welfare and resource initiatives throughout the State of Michigan. It was formed in 2015 from the merger of the Department of Community Health (DCH) and the Department of Human Services (DHS).
Department of Military and Veterans Affairs	<b>DMVA</b>	The Department of Military and Veterans Affairs of the State of Michigan is responsible for overseeing the Michigan National Guard, as well as providing support to military personnel, civilian employees, families, retirees, and veterans.
Michigan Balance of State Continuum of Care Governance Council	<b>MI BOSCOCC</b>	The MI BOS CoC Governance Council oversees the Michigan Balance of State CoC. The Statewide HMIS project reports to MI BOSCOCC.
Michigan State Housing Development Authority	<b>MSHDA</b>	MSHDA is the grantee for the Statewide HMIS and subcontracts with MCAH for administration of the system.
Participation Agreement		The agreement between MSHMIS participating agencies and MCAH that specifies the rights and responsibilities of MCAH and participating agencies.

Point in Time Count	<b>PIT</b>	An annual count, usually in the last week of January that is required for all CoCs. In odd numbered years, the PIT Count must include an “unsheltered” or street count.
Projects for Assistance in Transition from Homelessness	<b>PATH</b>	PATH is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and administered by the Michigan Department of Health and Human Services. It provides services to persons experiencing homelessness with mental health conditions, primarily through street outreach, to link them to permanent supportive housing. This project has different reporting requirements than HUD funded projects and uses HMIS to collect this information.
Project Types		<p><b>HUD defines 12 Project Types in HMIS:</b></p> <ul style="list-style-type: none"> <li>• Coordinated Assessment – A CoC project that coordinates assessment and referrals of persons seeking housing and/or services, and may include the use of a comprehensive and standardized assessment tool.</li> <li>• Day Shelter – A facility/center for persons experiencing homelessness that does not provide overnight accommodations.</li> <li>• ES: Emergency Shelter- Overnight shelters or shelters with a planned length of stay of less than 3 months.</li> <li>• HP: Homeless Prevention- A project that helps those who are at imminent risk of losing housing, to retain their housing.</li> <li>• PH: Permanent Supportive Housing- Permanent Supportive Housing includes both services and housing. Permanent Supportive Housing requires a disability for entry and often serves persons who are chronically homeless.</li> <li>• PH: Housing Only - Permanent housing may be supported by a voucher but does not have services attached to the housing.</li> <li>• PH: Housing with Services (no disability required) – Permanent Housing that provides both housing and supportive services, but does not require a disability to be served by the project.</li> <li>• PH: RRH Rapid Rehousing- A project that rapidly rehouses those that are identified as literally homeless.</li> <li>• SH: Safe Haven - A project that provides low-demand shelter for hard-to-serve persons with severe disabilities. These clients have often failed in other sheltering environments.</li> <li>• SO: Street Outreach Project- A project that serves homeless persons that are living on the street or other places not meant for habitation.</li> <li>• SSO: Services Only Project- A project that serves persons only, with no residential component. These projects often provide case management and other forms of support and meet with clients in an office, at the client’s home, or in a shelter.</li> <li>• TH: Transitional Housing- Transitional environments with a planned length of stay of not more than 2 years that provide supportive services<sup>iii</sup></li> </ul>
Protected Personal Information	<b>PPI</b>	Protected Personal Information is a category of sensitive information that is associated with an individual person, and should be accessed only on a strict need-to-know basis and handled and stored with care. In HMIS, all portions of a client record outside of the Client Profile require a Sharing QSOBAA be in place and a client signed release of information before information can be shared.
Provider Page		A Provider Page or Provider in ServicePoint is a defined location in the database where information is stored and organized. Provider Pages are

		structured in levels and can represent the whole implementation, CoCs, agencies, projects, or subprojects.
Release of Information	<b>ROI</b>	A Release of Information comes in two forms, a paper ROI and an electronic ROI. A signed (paper) ROI giving informed client consent for sharing is also required to share data between agencies. An electronic ROI must be completed to share a client's data on the HMIS.
Runaway and Homeless Youth	<b>RHY</b>	Overseen by FYSB, the Runaway and Homeless Youth programs support street outreach, emergency shelter, transitional living and maternity group homes for youth experiencing homelessness <sup>iv</sup>
Sharing		In an HMIS context, sharing refers to the exchange of client data between agencies. External data sharing requires a Sharing QSOBAA be established between two or more agencies, and a client signed Release of Information authorizing the sharing of that client's information. Basic data entry does not require an ROI as there is implied consent for the agency to keep records when a client provides information.
Sharing Qualified Services Organization Business Associates Agreement	<b>Sharing QSOBAA</b>	The Agreement between agencies that elect to share information using the HMIS. The Agreement prevents the re-release of data and, in combination with the Participation Agreement, defines the rules of sharing.
Shelter Plus Care	<b>S+C</b>	Lead by the Michigan Department of Health and Human Services, Shelter + Care provides Permanent Supportive Housing to disabled persons in the State of Michigan and reports on the HMIS. Of note, the HUD CoC Interim Rule eliminated the Shelter Plus Care project type, merging it into Permanent Supportive Housing
SSI/SSDI Outreach, Access and Recovery	<b>SOAR</b>	Using the national "best practice" curriculum, the SOAR project, led by the Department of Health and Human Services, reduces barriers and supports the application for Social Security Benefits for Michigan's disabled homeless population.
User Agreement & Code of Ethics		The document each HMIS user signs that defines the HMIS standards of conduct.
Visibility		Refers to whether a provider page can see client data if it has been entered into another provider page. HMIS visibility is configured separately in each provider page. Visibility can be configured by individual provider pages or by Visibility Groups.
Visibility Group		A Visibility Group is a defined group of Provider Pages where data is shared to. Internal Visibility Groups control internal sharing within an organization. Internal Visibility is governed by an agency's internal privacy rule. External Visibility Groups control sharing with other agencies and are defined by a Sharing QSOBAA.
Youth (Homeless Youth)		Homeless Youth are youth who lack a fixed, regular or adequate nighttime residence. Depending on the program and funding source, the age and definition of youth homelessness varies. Some youth programs serve persons up to 18 years of age, while other definitions consider youth up to the age of 21 or 24. Additionally, the US Department of Education considers youth that are sharing housing due to loss of housing or economic hardship to be homeless for purposes of their programs. <sup>v</sup>

## I. POLICIES AND PROCEDURES SUMMARY:

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### A. Policy Disclaimers and Updates

Operating Procedures defined in this document represent the minimum standards of participation on the MSHMIS project and represent general “best practice” operational procedures. Local HMIS Lead Agencies in coordination with their CoCs may add additional standards to this base document, which govern MSHMIS participation for their local CoC.

Operational standards in this document are not intended to supersede grant specific requirements and operating procedures as required by funding entities. PATH, HOPWA and VA providers have operating rules specific to HHS and VA.

The MSHMIS Operating Policies and Procedures are updated routinely as HUD publishes additional guidance or as part of an annual review. Updates will be reviewed at the MSHMIS monthly System Administrator Call-In and included in the meeting minutes’ distribution email. To allow for evolution of compliance standards without re-issuing core agreements, updated policies supersede related policies in any previously published Policies and Procedures document or agreements. Any changes from the previous year will be highlighted. A current copy of the MSHMIS Policies and Procedures may also be found on the MSHMIS website [www.mihomeless.org](http://www.mihomeless.org)

## II. AGREEMENTS, CERTIFICATIONS, LICENSES AND DISCLAIMERS:

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CoCs, agencies and users are required to uphold specific rules and responsibilities as participants in the MSHMIS project.

### A. Required Agency Agreements, Certifications and Policies<sup>1</sup>

Participating CHOs or other partners on the MSHMIS project must have the following contracts, agreements, policies and procedures available for review:

1. All CoCs participating on the MSHMIS must sign a **Joint Governance Charter** that designates the Michigan Statewide HMIS Vendor and identifies the Michigan Coalition Against Homelessness as the Statewide Lead Agency for administration of the statewide database. Each jurisdiction will identify a local Lead Agency that coordinates with the Statewide Agency and is responsible for specific tasks. The Charter supports the ability for multiple jurisdictions to participate on a single HMIS information system.
2. All agencies must have the following fully executed documents on file and be in compliance with the policies and directives contained therein:
  - a. An **Administrative QSOBAA** governing administrative access to the system.

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<sup>1</sup> Templates and examples of all documents listed in section A are available for download at [www.mihomeless.org](http://www.mihomeless.org)

- b. A **Participation Agreement** governing the basic operating principles of the system and rules of membership.
- c. **Sharing QSOBAAs** (if applicable) governing the nature of the sharing and the re-release of data.
- d. A board certified **Confidentiality Policy** governing the privacy and security standards for the Agency.
- e. A board certified **Grievance Policy** outlining a structured process for resolving complaints or grievances within or filed against the organization

## B. HMIS User Requirements:

All agencies must have the following documents on file for all active users licensed in the MSHMIS project.

- 1. A fully executed User Agreement and Code of Ethics document governing the individual's participation in the system.
- 2. All agencies must keep training certificates for active users on file.
  - a. All users must take full privacy training when they are first licensed, and take privacy update training at least annually. Successful completion of the certification questionnaire is required for both the full privacy training and the privacy update. Documentation of completion of these trainings are to be available for review.
  - b. All users must complete workflow training, related workflow updates and have documentation of the training completion for all workflows they work with. If local CoCs or Agency Administrators have additional training requirements or offerings, they should have a method for documenting successful completion and have that documentation available at their local agencies for review as needed.
  - c. All users must be trained in the HUD Data Standards Universal Data Elements and any Program Specific Elements that apply to the programs they work with. This includes training on the processes for collecting client identifying information, the Homeless Definition and the Chronic Homeless Definition.

## C. Agency Administrator Requirements

All agencies participating on the system must have an assigned Agency Administrator.

- 1. Training Requirements - Agency Administrators must complete and maintain documentation of the following:
  - a. All trainings required for standard users on the system.
  - b. Provider Page training.
  - c. Workflow Training for all workflows used in their agency. This training will be developed by the MSHMIS Project, the funding agency or an agency authorized to train on behalf of the funding agency or MSHMIS.
  - d. Reports Training (agency users and leadership are tasked with supporting data quality as well as monitoring outcomes and other performance issues).
  - e. Other training as specified by the CoC.



2. Agency Administrator Participation Requirements – Agency Administrators should participate in the following CoC or agency meetings:
  - a. CoC HMIS Agency Administrator meetings and trainings
  - b. Agency specific HMIS user meetings or preside over an HMIS specific topic during routine staff meetings.
  - c. A local Reports Committee that reviews and governs the publication of CoC information.

### **III. PRIVACY:**

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#### **A. Privacy Statement**

MSHMIS is committed to making the project safe for participating agencies and the clients whose information is recorded on the system.

##### **Toward that end:**

- Sharing is a planned activity guided by sharing agreements between agencies (Sharing QSOBAAs). Agencies may elect to keep private some or all of the client record including all identifying data.
- All organizations will screen for safety issues related to the use of automation.
- The MSHMIS is compliant with HIPAA, and all Federal and State laws and codes. All privacy procedures are designed to ensure that the broadest range of organizations may participate in the project. Access to Personal Protected Information will be restricted to persons with a business need to know, as defined by the laws governing the implementation, (ex. HIPAA, 42 CFR Part 2), these Policies and Procedures and the privacy policies implemented by the CoC and local agencies.
- MSHMIS has systematized the risk assessment related to clients through the standard MSHMIS release. The standardized release offers options for the use of a client's Social Security number. It also provides guidance on using unnamed records and how the Privacy Notice is explained to clients.
- MSHMIS has adopted a Privacy Notice that was developed in close collaboration with organizations that manage information that may put a client at risk.
- Privacy Training is a requirement for all agencies and users on the MSHMIS.
- We view our privacy training as an opportunity for all participating organizations to revisit and improve their overall privacy practices. Many agencies choose to have all their staff complete the MSHMIS training curricula – not just those with user access to the system.
- All users issued access to the system must sign a User Agreement & Code of Ethics form, and agencies must sign a MSHMIS Participation Agreement. Taken together, these documents obligate participants to core privacy procedures. If agencies decide to share information, they must sign an agreement that defines their sharing and prevents release of information to unauthorized third parties (the Sharing QSOBAA).

- Policies have been developed that protect not only a client's privacy, but also an agency's privacy. Privacy practice principles around the use and publication of agency or CoC specific data have been developed are included in both the Participation Agreement and this MSHMIS Policies and Procedures document.
- The MSHMIS allows projects with multiple components/locations that serve the same client to operate on a single case plan. This reduces the amount of staff and client time spent in documentation of activities and ensuring that care is coordinated and messages to clients are reinforced and consistent.
- MSHMIS has incorporated continuous quality improvement training designed to help agency administrators use the information collected in the HMIS to stabilize and improve project processes, measure outcomes, report to funders, and be more competitive in funding requests.

## **B. Privacy and Security Plan:**

All records entered into and downloaded from the HMIS are required to be kept in a confidential and secure manner.

### **Oversight:**

1. All Agency Administrators with support of agency leadership must<sup>2</sup>:
  - a. Ensure that all staff using the system complete annual privacy and security training. Training must be provided by MSHMIS Certified Trainers and based on the MSHMIS Privacy/Security Training curricula.
  - b. Conduct a quarterly review of their provider page visibility, ensuring that it properly reflects any signed Sharing QSOBAAs.
  - c. Modify their adapted Release of Information, and script used to explain privacy to all clients, for any privacy changes made. These documents should also be audited quarterly to ensure they are compliant with current sharing agreements.
  - d. Ensure user accounts are removed from the HMIS when a staff member leaves the organization, or when changes to a staff member's job responsibilities eliminate their need to access the system.
  - e. Report any security or privacy incidents immediately to the CoC's HMIS Local System Administrator. The Local System Administrator must investigate the incident within one business day, by running applicable audit reports, and by contacting MCAH staff for assistance with the investigation. If the System Administrator determines that a breach has occurred, and/or the staff involved violated privacy or security guidelines, the client record(s) in question must be immediately locked down and the Local System Administrator will submit a written report to the MSHMIS Project Director and CoC Chair within two business days. A preliminary Corrective Action Plan will be developed and implemented within five business days. Components of the plan must include at minimum supervision and retraining. It may also include removal of HMIS license, client notification if a breach has occurred, and any appropriate legal action.<sup>vi</sup>

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<sup>2</sup> In lieu of revised Technical Standards, in 2015 the requirement for a privacy officer was removed. However, the function of data security has been assigned to the Agency Administrator. Reflecting Participation Agreement language, the quarterly review of Provider Visibility has been expressly added to this document.

2. Criminal background checks must be completed on all Local System Administrators by the Local Lead Agency. All agencies should be aware of the risks associated with any person given access to the system and limit access as necessary. System access levels will be used to support this activity.
3. The CoC HMIS Lead Agency will conduct routine audits of participating agencies to ensure compliance with the Operating Policies and Procedures. The audit will include a mix of system and on-site reviews. The CoC HMIS Lead Agency will document the inspection and any recommendations made, as well as schedule follow-up activities to identify any changes made to document compliance with the Operating Policies and Procedures.

**Privacy:**

4. Any agency that is subject to the Violence Against Women Act restrictions on entering data into an HMIS are not permitted to participate in the MSHMIS project. These providers will maintain a comparable database to respond to grant contracts and reporting requirements.<sup>vii</sup>
5. All agencies must have the **HUD Public Notice** posted and visible to clients in locations where information is collected.
6. All Agencies must have a **Privacy Notice**. They may adopt the MSHMIS sample notice or integrate MSHMIS language into their existing notice. All Privacy Notices must define the uses and disclosures of data collected on HMIS including:
  - a. The purpose for collection of client information.
  - b. A brief description of policies & procedures governing privacy including protections for vulnerable populations.
  - c. Data collection, use and purpose limitations. The Uses of Data must include de-identified data.
  - d. The client right to copy/inspect/correct their record. Agencies may establish reasonable norms for the time and cost related to producing any copy from the record. The agency may say “no” to a request to correct information, but the agency must inform the client of its reasons in writing within 60 days of the request.<sup>3</sup>
  - e. The client complaint procedure
  - f. Notice to the consumer that the Privacy Notice may be updated over time and applies to all client information held by the Agency.
7. All Notices must be posted on the Agency’s website.
8. All Agencies are required to have a **Privacy Policy**. Agencies may elect to use the Sample Privacy Policy provided by the MSHMIS project. All Privacy Policies must include:
  - a. Procedures defined in the Agencies Privacy Notice
  - b. Protections afforded those with increased privacy risks such as protections for victims of domestic violence, dating violence, sexual assault, and stalking. Protections include at minimum:
    - i. Closing of the profile search screen so that only the serving agency may see the record.
    - ii. The right to refuse sharing if the agency has established an external sharing plan.
    - iii. The right to be entered as an unnamed record, where identifying information is not recorded in the system and the record is located through a randomly generated number (note: this interface does allow for unduplication because the components of the unique Client ID are generated)

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<sup>3</sup> Language was added to clarify the HIPAA rule.

- iv. The right to have a record marked as inactive.
- v. The right to remove their record from the system.
- c. Security of hard copy files: Agencies may create a paper record by printing the assessment screens located within the HMIS. These records must be kept in accordance with the procedures that govern all hard copy information (see below).
- d. Client Information storage and disposal: Users may not store information from the system on personal portable storage devices. The Agency will retain the client record for a period of seven years, after which time the forms will be discarded in a manner that ensures client confidentiality is not compromised.
- e. Remote Access and Usage: The Agency must establish a policy that governs use of the system when access is approved from remote locations. The policy must address:
  - i. The use of portable storage devices with client identifying information is strictly controlled.
  - ii. The environments where use is approved. These environments are not open to public access and all paper and/or electronic records that include client identified information are secured in locked spaces or are password controlled.
  - iii. All browsers used to connect to the system must be secure. If accessing through a wireless network, that network must be encrypted and secured. **No user is allowed to access the database from a public or non-secured private network such as an airport, hotel, library, or internet café.**
  - iv. Access via a cellular network using 4G LTE or similar access is permitted if the connection is protected and encrypted. This permits users to access MSHMIS from cell phones, tablet devices or personal hotspots. If broadcasting a hotspot signal, the device must have a passcode or other security measures to restrict general access.
  - v. All computers accessing the system are owned by the agency.
- 9. Agencies must protect **hard copy data** that includes client identifying information from unauthorized viewing or access.
  - a. Client files must be locked in a drawer/file cabinet.
  - b. Offices that contain client files must locked when not occupied.
  - c. Client files must not be left visible to unauthorized individuals.
- 10. The agency provides a **Privacy Script** to all staff charged with explaining privacy rights to clients which standardize the privacy presentation. The script must:
  - a. Be developed with agency leadership to reflect the agency's sharing agreements and the level of risk associated with the type of data the agency collects and shares.
  - b. The script should be appropriate to the general education/literacy level of the agency's clients.
  - c. A copy of the script should be available to clients as they complete the intake interview.
  - d. All agency staff responsible for client interaction will be trained in use of the Privacy Script.
- 11. Agencies that plan to share information through the system must sign a **Sharing QSOBAA** (Qualified Services Organization Business Associates Agreement).
  - a. The Sharing QSOBAA prescribes the release of information shared under the terms of the agreement.
  - b. The Sharing QSOBAA specifies what is shared with whom.

- c. Agencies may share different portions of a client record with different partners, and may sign multiple Sharing QSOBAA's to define a layered sharing practice.
  - d. The signatories on the Sharing QSOBAA must be representatives who are authorized to sign such an agreement by senior agency leadership and/or the Agency Board of Directors.
  - e. All members of a Sharing QSOBAA are informed that by sharing, they are creating a common electronic record that can impact data reflected in reports. Members of the sharing group agree to communicate and negotiate data conflicts.
  - f. No agency may be added to the agreement without the approval of all other participating agencies.
    - i. Documentation of that approval must be available for review and may include such items as meeting minutes, email response or other written documentation.
    - ii. Agency approval of additions or changes to a Sharing QSOBAA must be approved by a staff member with authorization to make such decisions on behalf of the agency.
  - g. When a new member is added to the Sharing QSOBAA, the related Visibility Group in the system is end-dated and a new Visibility Group is begun. **A new member may not be added to an existing Visibility Group.**
12. Agencies must have appropriate **Release(s) of Information** that are consistent with the type of data the agency plans to share.
- a. The agency has adopted the appropriate MSHMIS Basic Release of Information that is applicable to their sharing practice to share basic demographic and transactional information.
  - b. If the agency integrates the MSHMIS Release into their existing releases, the release must include the following components:
    - i. A brief description of MSHMIS including a summary of the HUD Public Notice.
    - ii. A specific description of the Client Profile Search Screen and an opportunity for the client to request that the screen be closed.
    - iii. A listing of the Agencies sharing partners (if any) and a description of what is shared. These sections must reflect items negotiated in the agency's Sharing QSOBAA.
    - iv. A defined term of the Agreement<sup>4</sup>.
    - v. Interagency sharing must be accompanied by a negotiated and executed Sharing QSOBAA.
    - vi. For agencies subject to 42 CFR Part 2, both internal and external sharing will be done in accordance with the law.
  - c. A HIPAA compliant **Authorization to Release Confidential Information** is also required if the planned sharing includes any of the following:
    - i. Case notes/progress notes
    - ii. Information or referral for health, mental health, HIV/AIDS, substance use disorders, or domestic violence.

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<sup>4</sup> The change reflects changes in the HIPAA rule that allow for Releases that cover a term – rather than a specific date. The date in the electronic ROI will reflect the specific date defined by the term. The term should not be arbitrary but reflect the anticipated term of the agencies' planned coordinating activities.

- iii. To reduce paper usage, the basic HMIS Release may be adapted to include the language necessary for a HIPAA compliant release if sharing practice is likely to include the items listed above in ii.<sup>5</sup>
- 13. An **automated ROI** is required to enable sharing of any client's information between any provider pages on the system.
  - a. Agencies should establish **Internal Visibility**<sup>viii</sup> or sharing between only their agency's provider pages, by creating visibility group(s) that include all the agency's provider pages where sharing is planned and allowed by law.
    - i. Internal Visibility does not require a signed Client ROI unless otherwise specified by law. (However, an electronic release must still be entered in the system to permit Internal Visibility.)
    - ii. Unless otherwise specified by law, when new provider pages are added to the Agency tree, they may be included in the existing internal visibility group. The information available to that Provider Page will include all information covered by the visibility group from the beginning date of the Group – sharing will be retroactive.
  - b. Agencies may elect to share information with other agencies, a practice known as **External Sharing**, by negotiating a Sharing QSOBAA (see 8 above).
    - i. A signed and dated Client ROI must be stored in the Client Record (paper or scanned onto the system) for all Automated ROIs that release data between different agencies.
    - ii. Retroactive Sharing, or sharing historic information between two or more agencies without client consent is not permitted in HMIS. To prevent retroactive sharing, a new visibility group is constructed whenever a new sharing partner is added to the agency's existing sharing plan/Sharing QSOBAA.
  - c. MCAH's procedure for pulling a client's housing history across the entire database to verify a client's eligibility for specific housing options requires that:
    - i. Consent for obtaining the client's housing history is written into the agency's Outreach Sharing Plan of their ROI, and the client has agreed to permit this activity by initialing this section.
    - ii. An electronic copy of the signed ROI including the client authorization to release the housing history has been attached to the client record in HMIS.
  - d. Client information entered in HMIS may be used to create **By-Name Lists** and in **Prioritization Meetings** provided that:<sup>ix</sup>
    - i. The client provides written consent to participate in a By-Name List and/or Prioritization process. Consent for participating in this process is built into the current version of MCAH's ROI, under the Outreach Sharing Plan.
    - ii. Information that a client authorizes to be discussed within the Prioritization/By-Name List process may only be discussed directly at those meetings, and not re-released back to agencies, unless a separate release/Sharing QSOBAA exists releasing that information.
- 14. The Agency must have a procedure to assist clients that are hearing impaired or do not speak English as a primary language. For example:
  - a. Provisions for Braille or audio

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<sup>5</sup> Recognizes existing practice by participating CoCs.

- b. Available in multiple languages
  - c. Available in large print
15. **Agencies are required to maintain a culture that supports privacy.**
- a. Staff do not discuss client information in the presence of others without a need to know.
  - b. Staff eliminate unique client identifiers before releasing data to the public.
  - c. The Agency configures workspaces for intake that supports the privacy of client interaction and data entry.
  - d. User accounts and passwords must not be shared between users, or visible for others to see.
  - e. Project staff must be educated to not save reports with client identifying data on portable media. Agencies must be able to provide evidence of users receiving training on this procedure through written training procedures or meeting minutes.
  - f. Staff must be trained regarding use of email communication, texting, file sharing and other electronic means of transferring data related to client services.
    - i. By-name housing prioritization lists may not be printed with client identifying information without written client consent.

#### **Data Security:**

1. All licensed HMIS Users must be assigned **Access Levels** that are consistent with their job responsibilities and their business “need to know”.
2. All computers have **network threat protection software with automatic updates.**
  - a. Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to ensure:
    - i. The threat protection software is up-to-date.
    - ii. That various system updates are automatic, unless a specific, documented reason exists to maintain an older version of the software.
    - iii. Operating System updates are run regularly.
3. All computers are protected by a firewall.
  - a. Agency Administrators or designated staff are responsible for monitoring all computers that connect to the HMIS to ensure:
    - i. For single computers, the software and versions are current.
    - ii. For networked computers, the firewall firmware is current.
4. Physical access to computers that connect to the HMIS is controlled.
  - a. All workstations are in secured locations (locked offices).
  - b. Workstations are logged off when not manned.
  - c. All workstations are password protected.
  - d. **All HMIS Users are prohibited from using a computer that is available to the public.**
5. A **Plan for Remote Access** must exist if staff will be using the MSHMIS outside of the office such as working from home. Concerns addressed in this plan should include the privacy surrounding off-site access.
  - a. The computer and environment of entry must meet all the standards defined above.
  - b. Downloads to the computer may not include client identifying information.
  - c. Staff must use an agency-owned computer.

**Remember that your information security is never better than the trustworthiness of the staff you license to use the system. The data at risk is your own, that of your sharing partners and clients. If an accidental or purposeful breach occurs, you are required to notify MCAH. A full accounting of access to the record can be completed.**

## **IV. DATA BACKUP AND DISASTER RECOVERY PLAN:**

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The HMIS is a critically important tool in responding to catastrophic events. The HMIS data is housed in a secure server bank in Shreveport, Louisiana with nightly off-site backup. In case of a significant system failure at the main data center, MSHMIS can be brought back online within approximately four hours.

### **A. Backup Details for MSHMIS**

See “Mediware Information Systems Securing Client Data” for a detailed description of data security and Mediware’s Disaster Response Plan

1. The MSHMIS Project is required to maintain the highest-level disaster recovery service by contracting with Mediware Information Systems for Premium Disaster Recovery that includes:
  - a. Off site, out-of-state backup on a different Internet provider, and a separate electrical grid.
  - b. Backups of the application server occur on a regular basis, and align with the current version of the live MSHMIS site.
  - c. Near-instantaneous backups of the MSHMIS database (information is backed up within 5 minutes of entry.)
  - d. Additional nightly off-site replication to protect in case of a primary data center failure.
  - e. Priority level response (ensures downtime will not exceed 4 hours).

### **B. MSHMIS Project Disaster Recovery Plan:**

In the event of a major system failure:

1. The MSHMIS Project Director or designee will notify all participating CoCs and Local System Administrators should a disaster occur at Mediware Information Systems which affects the functionality and availability of ServicePoint. When appropriate, MCAH will notify Local System Administrators/CoC Leadership of the planned recovery activities and related time lines.
2. Local/assigned System Administrators are responsible for notifying their local agencies and users.
  - a. If a failure occurs after normal business hours, MSHMIS staff will report the system failure to Mediware Information Systems using their emergency contact line. An email will also be sent to Local System Administrators no later than one hour following identification of the failure.
3. The MSHMIS Project Director or designated staff will notify Mediware Information Systems if additional database services are required.
4. The MSHMIS Project will always have one staff member on-call 24/7/365 so agencies and users can report system outages. Contact information for this person is supplied by MCAH.



### **C. Local HMIS Lead Agencies:**

Local HMIS Lead Agencies within CoCs have an obligation, to secure and backup key information necessary for the administration and functioning of the MSHMIS Project within their own jurisdiction.

1. HMIS Lead Agencies are required to back-up their internal data system nightly.
2. Data back-ups will include a solution for maintaining at least one copy of key internal data off-site for their internal data systems. This location will be secure with controlled access.
3. Local HMIS Lead Agencies must have a disaster recovery plan documented which outlines the policies and procedures for the CoC in case of a major system disaster.
  - a. **Agency Emergency Protocols must include:**
    - i. Emergency contact information including the names/organizations and numbers of local responders and key internal organization staff, designated representative of the CoCs, local HMIS Lead Agency, and the MSHMIS Project Director.
    - ii. Delegation of key responsibilities. The plan should outline which persons will be responsible for notification and the timeline of notification.
4. In the event of a local disaster:
  - a. MSHMIS in partnership with the local Lead Agency will work to fill all reasonable requests to provide access to additional hardware and user licenses to allow the CHO(s) to reconnect to the database as soon as possible.
  - b. MSHMIS in collaboration with the local Lead Agencies will also provide information to local responders as required by law and within best practice guidelines.
5. MSHMIS in collaboration with the local Lead Agencies will also provide access to organizations charged with crisis response within the privacy guidelines of the system and as allowed by law.

### **V. SYSTEM ADMINISTRATION:**

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The position of the Local System Administrator/System Administrator I is key to the success of the CoC. This person is responsible for overseeing the operation of the MSHMIS project in either a local CoC or a local Planning Body/Jurisdiction. This position will be referred to in this section as a Local System Administrator. The following describes the typical list of responsibilities for a Local System Administrator within a CoC.

#### **A. Training Requirements for a Local System Administrator:**

1. All trainings required for standard users on the system.
2. Provider Page training and Workflow Training for all workflows used in their CoC.
3. Reports Training (Local System Administrators are tasked with supporting data quality as well as monitoring outcome and other performance issues).
4. System Administrator Training – This training usually takes place several weeks after a new Local System Administrator has been in their position.
5. Continuous Quality Improvement Training
6. All System Administrators are required to read and understand the HUD Data Standards that underpin the rules of the HMIS.

7. HUD Initiative Training (AHAR, PIT, APR, etc.)

## **B. Meetings Local System Administrators Are Required to Participate In:**

1. Regular CoC Meetings and/or workgroups as determined by the CoC
2. The CoC Reports Committee or meetings where data use and release is discussed.
3. The Monthly System Administrator Call-In (3<sup>rd</sup> Wednesday of every Month at 1pm).
4. Regular Agency Administrator/User Meetings within the CoC
5. Michigan's Campaign to End Homelessness work groups and Regional Meetings as assigned.

## **C. Local System Administrator Responsibilities:**

### **1. Help Desk and Local Technical Support**

- a. The Local System Administrator provides front-line technical support/technical assistance for users and agencies within the CoC they support. This support includes resetting passwords and troubleshooting/problem solving for users and agencies within their CoC. Where applicable, the Local System Administrator may train Agency Administrators to do fundamental system support activities, minimizing the burden for support on the Local System Administrator.
- b. The Local System Administrator builds relationships within the agencies they serve, working to understand the business practices of these agencies, and assisting them with mapping these business practices onto the system. The HMIS lead staff will be available, on request, to provide advanced technical assistance if requested by the Local System Administrator/Local CoC.

### **2. User and Provider Page Setup**

- a. Local System Administrators will setup new users in MSHMIS, or delegate the task to their Agency Administrators. If delegating this task, they will train Agency Administrators on proper setup of user accounts.
- b. Local System Administrators will supervise license allocation for users and agencies within the CoC they serve. When necessary or requested, the Local System Administrator will purchase additional licenses directly for the CoC.
- c. The Local System Administrator will work in partnership with agencies and Agency Administrators in the CoC they serve to ensure that agency provider pages are setup correctly per the HUD Data Standards.
- d. The Local System Administrator will work directly with Agency Administrators and agencies, through a collaborative process to ensure proper visibility is established for the provider pages in the CoC they serve. The agency, at all times will be directly involved in the visibility process, and will sign off on any visibility changes made.

### **3. Communication**

- a. The Local System Administrator will host regular User/Agency Administrator meetings for system users in the CoC(s) they serve. These meetings will cover important news on system changes, items of local interest within the CoC, and issues identified by the CoC's Local System Administrator.
- b. The Local System Administrator will share any key news items of local impact, interest, or relevance to the users and Agency Administrators in the CoC they serve.

#### **4. Training**

- a. The Local System Administrator will inform Agency Administrators and local users of required and recommended system trainings that are available through the HMIS Lead training website
- b. The Local System Administrator will provide localized training to CoC users and agencies for issues or items of importance related to the local community. These may include local PIT/HIC training, guidance on local data cleanup, or specific guidance on proper workflow and system usage that are identified through an audit process
- c. The Local System Administrator will provide training for local users on initiatives identified and agreed upon between the Local System Administrator and the local CoC.

#### **5. HUD Projects and Activities (Including AHAR, PIT/HIC, HMIS APR, SPMs, HUD NOFA):**

- a. The Local System Administrator will work directly with CoC leadership to complete CoC-wide HUD reporting activities such as the AHAR, PIT/HIC, System Performance Measures and the CoC HUD NOFA submission. The Local System Administrator will also assist the CoC with work surrounding state and local funding initiatives which require data from the HMIS.
- b. The Local System Administrator will assist with completing the HMIS Annual Performance Report (APR) for the CoC they serve, if the CoC has a HUD-funded CoC HMIS grant.
- c. The Local System Administrator will provide support/technical assistance for agencies completing the CoC APR within their jurisdiction. This will include providing technical assistance with problem solving data quality issues, reporting issues, etc.

#### **6. Local CoC Reporting**

- a. The Local System Administrator is responsible for providing reports to the CoC. These include, but are not limited to:
  - i. CoC wide demographics, performance outcomes, and data quality reports that are used for informational and evaluation purposes.
  - ii. Final reports on submissions made to HUD for various HUD mandated activities such as the AHAR, PIT/HIC, SPMs<sup>x</sup> and HMIS APR.
  - iii. General requests for data of interest to the local CoC.
  - iv. Any additional reporting requirements initiated by HUD that are required of the local CoC.

- b. The Local System Administrator will train local Agency Administrators and users on how to run reports at the agency level to monitor data quality and outcomes on a regular basis.
- c. The Local System Administrator will be responsible for generating reports on activities and expenditures to the local CoC which he or she serves, as directed by the CoC

**7. CoC/Agency/Project Auditing and Monitoring**

- a. The Local System Administrator will work with the local CoC to establish local HMIS policies and procedures using this Policies and Procedures document as a frame. The Local System Administrator will work with local CoC leadership and Agency Leadership/Administrators to update this document as needed.
- b. The Local System Administrator, collaborating with the Agency Administrators in the CoC they serve, will audit agencies and projects to ensure compliance. Audit activities may include, but are not limited to:
  - i. Ensuring the agency has all required contracts, agreements and policies in place for participation on the HMIS
  - ii. Verifying system users have completed all required training for system participation
  - iii. Ensuring provider pages are correctly setup per HUD Standards Guidance
  - iv. Ensuring agencies are following appropriate data entry protocol per the funding sources they receive funding from
  - v. Monitoring implementation of privacy, to ensure client rights are being protected
  - vi. Regularly monitoring data quality, completeness and outcomes to ensure projects are maintaining a high level of compliance with HUD and CoC requirements.

**8. Option 1 Balance of State Planning Jurisdictions** where MCAH is the Local System Administrator

In Planning Jurisdictions where MCAH serves as the Local System Administrator, MCAH will serve as the key agency performing the technical tasks of the Local System Administrator. However, the local Planning Body is responsible for:

- a. The Local Planning Body will designate a local person within the community to serve as the lead point of contact for HMIS initiatives in the Local Planning Jurisdiction
- b. The Local Planning Body will perform an annual PIT Count as specified by the Michigan Balance of State CoC. This count will be conducted on the ground by local leadership. Additionally, data entry of all PIT/HIC information into MSHMIS is the responsibility of the Local Planning Body.
- c. Leadership within the Local Planning Body is responsible for all federal, state and local level grant applications and reporting. The LSA assigned to the community from the MCAH staff will assist with any data/reporting pulls as needed.

**9. Option 2 Balance of State Planning Jurisdictions** with their own Local System Administrator  
Local System Administrators in a Local Planning Jurisdiction are responsible for the same duties of a Local System Administrator in a HUD CoC.

*(Note: Completion of these tasks are the responsibility of both the HMIS Lead (the Local System Administrator) and the agencies which participate on the system in the local CoC. The Local System Administrator can create a policy under which local agencies are responsible for monitoring themselves, and instructing them on application of that policy. The Local System Administrator can then assist agencies with implementing the policy locally to ensure compliance. The HMIS Lead has released a series of tools to help local HMIS Leads with the process of developing compliance tools.)*

## **VI. DATA QUALITY PLAN AND WORKFLOWS:**

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### **A. Provider Page Set-Up:**

1. Provider Pages are appropriately named per the MSHMIS naming standards **Agency Name – Location (CoC Name) – Project Name – Project Funding Descriptors**.  
For example: The Salvation Army – Marquette Alger CoC – Hotel Voucher Project – ESP.  
Identification of funding stream is critical to completing required reporting to funding organization.
2. Operating Start Dates are appropriately entered on provider pages and reflect when the project began offering housing and/or services. If the project began operating before October 1, 2012 and the exact start date is not known, the start date may be estimated (set to a date prior to October 1, 2012)<sup>xi</sup>
3. Inactive Provider Pages are properly identified with “XXX Closed” followed by the year of the last project exit >Provider Page Name. For example XXXClosed2017.
  - a. Close all clients in inactive/closed provider pages. Audit of inactive pages includes closing all open services and incomes and exiting all unexited clients.
4. The primary provider contact information reflects where the services are being delivered.
5. HUD Data Standards are fully completed on all Provider Pages:
  - a. Operating start date is correctly set. If a project is still functioning, the end date is null. If the project has stopped operations, the end date reflects the date the project stopped offering services.
  - b. CoC code is correctly set. If a project stops functioning in the CoC, the appropriate end date will be added to the CoC Code Entry.
  - c. Project type codes are correctly set.
  - d. Victim services code is correctly set.
  - e. If a project is an Emergency Shelter, the Method for Tracking Emergency Shelter Utilization field is correctly set. If a project is not an Emergency Shelter, this field is left null or “-Select-”
  - f. Geocodes are set correctly
  - g. The Continuum Project field must be properly completed.
  - h. If a project is HOPWA, RHY, PATH or SSVF, the Provider Grant Type is correctly filled out.
  - i. Bed and Unit Inventories are set for applicable residential projects. Bed and Unit Inventories for all projects should be reviewed at least annually, and updated as needed.

- j. Federal Partner Funding Source values are selected if a project is funded by one of the Federal Partners. Federal Partner Funding Sources are to be updated at least annually. If a project is not funded by a Federal Partner Funding Source, the option selected is NA.
- k. Assessments with the appropriate 3.917 Living Situation question are assigned based on Program Type
  - i. Emergency Shelter, Street Outreach or Safe Haven projects use 3.917a.
  - ii. All other project types use 3.917b.

## B. Data Quality Plan:

1. Agencies must require documentation at intake of the homeless status of consumers according to the reporting and eligibility guidelines issued by HUD. The “order of priority” for obtaining evidence of homeless status are (1) third party documentation, (2) worker observations, and certification from the person. Lack of third party documentation may not be used to refuse emergency shelter, outreach or domestic violence services. Local CoCs may designate the local HARAs to establish the homeless designation and maintain related documentation.
2. 100% of the clients must be entered into MSHMIS within 15 days of data collection. If the information is not entered on the same day it is collected, the agency must assure that the date associated with the information is the date on which the data was collected by:
  - a. Data is entered into the system using the Enter Data As function.
  - b. Entering the project start/exit data including the UDEs on the Entry/Exit Tab of ServicePoint or
  - c. Backdating the information into the System<sup>6</sup>
3. All staff are required to be trained on the definition of Homelessness.<sup>7</sup>
  - a. MSHMIS provides a homeless definition crosswalk and 3.917 flowchart to support agency level training.
  - b. There is congruity between the MSHMIS case record responses, based on the applicable homeless definition. (Elements to HUD Data Standard Element 3.917a or 3.917b are being properly completed).
4. The agency has a process to ensure the First and Last Names are spelled properly and that the DOB and Social Security numbers are accurate.
  - a. An ID is requested at intake to support proper spelling of the client’s name as well as the recording of the DOB.
  - b. If no ID is available, staff request the legal spelling of the person’s name. **Staff should not assume they know the spelling of the name.**
  - c. Projects that serve the chronic and higher risk populations are encouraged to use the scan card process within ServicePoint to improve un-duplication and to improve the efficiency of recording services.
  - d. Data for clients with significant privacy needs may be entered under the “unnamed record” feature of the system. However, while identifiers are not stored using this feature, great care should be taken in creating the unnamed algorithm by carefully

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<sup>6</sup> Clarification of existing policy.

<sup>7</sup> Specific instruction is available for PATH, HOPWA, DHHS-ESP and DHHS PSH projects at [www.dyns-services.com](http://www.dyns-services.com)

entering the first and last name and the DOB. Names and ServicePoint ID number crosswalks (that are required to find the record again) must be maintained off-line in a secure location.

5. Income, non-cash benefits and health insurance information are being updated at least annually and at exit, or at the frequency specified by program requirements.<sup>xii</sup>
  - a. For Permanent Housing Projects, the Housing Move-In Date is completed on an update when the client moves into housing.<sup>xiii</sup>
  - b. Annual Reviews will be completed in the 30 days prior to the anniversary of the client's entry into services.
  - c. For PH projects with long stays, at the annual review, incomes over two years old must be updated by closing the existing income and entering a new income record (even if the income has not changed). This assures that the income has been reconfirmed and will pull properly into reports.
  - d. For all other projects, any income(s) no longer available to the client should be closed for the day before intake (shared data from another provider), annual review and exit. If the income is over two years old please follow the procedure defined above.<sup>8</sup>
6. Agencies have an organized exit process that includes:
  - a. Clients and staff are educated on the importance of planning and communicating regarding discharge. This is evidenced through staff meeting minutes or other training logs and records.
  - b. Discharge Destinations are properly mapped to the HUD Destination Categories.
    - i. MSHMIS provides a Destination Definition document to support proper completion of exits. All new staff must have training on this document.
    - ii. Projects must have defined processes for collecting this information from as many households as possible.<sup>9</sup>
  - c. There is a procedure for communicating exit information to the person responsible for data entry if not entering real time.
7. Agency Administrators/staff regularly run data quality reports.
  - a. Report frequency should reflect the volume of data entered into the System. Frequency for funded projects will be governed by Grant Agreements, HUD reporting cycles, and local CoC Standards. However, higher volume projects such as shelters and services only projects must review and correct data at least monthly. Lower volume projects such as Transitional and Permanent Housing must run following all intakes and exits and quarterly to monitor the recording of services and other required data elements including annual updates of income and employment.<sup>10</sup>
  - b. The project start and exit dates should be recorded upon project start or exit of all participants. Project start dates should record the first day of service or initial contact

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<sup>8</sup> Reflecting the 2015 data quality review of client income, staff are being asked to close any incomes that are more than two years old and to enter a new income with the income review process and to prevent the further accumulation of open old incomes to add closing of the income to the routine discharge processes.

<sup>9</sup> Data indicates that some providers have regressed in completing discharge destination in the last year and accurately completing this field is vitally important to succeeding. Beyond data entry issues, projects must define processes that collect this information from as many households as possible.

<sup>10</sup> Additional detail was added for low volume environments that are required to annually update income and employment.

with a client. Exit dates should record the last day of residence before the participant leaves the shelter/housing project or the last day a service was provided.

- c. Data quality screening and correction activities must include the following:
    - i. Missing or inaccurate information in Universal Data Element Fields.
    - ii. The Relationship to Household assessment questions are completed.
    - iii. The 3.917 Living Situation series of questions are completed.
    - iv. The 3.16 Client Location question is completed
    - v. The Domestic Violence questions are completed
    - vi. HUD Verifications are completed on all Income, Non-Cash Benefits, Health Insurance and Disability sub-assessments.
    - vii. The Housing Move-in-Date is completed for all Permanent Housing projects as appropriate.
    - viii. All project specific data elements are completed as required by the various funding sources supporting the project.
  - d. Providers must audit unexited clients in the system using the length of stay and unexited client data quality reports.
- 8. CoCs and Agencies are required to review Outcome Performance Reports/System Performance Measures reports defined by HUD and other funding organizations. Measures are based on Project Type. The CoC Lead Agency, in collaboration with the CoC Reports Committee or other designated CQI Committee, establishes local benchmark targets for performance improvement on shared measures.
  - 9. MSHMIS publishes regional benchmarks on all defined measures annually.
  - 10. Agencies are expected to participate in the CoCs Continuous Quality Improvement Plan. See CQI materials designed to support data quality through continuous quality improvement.

### **C. Workflow Requirements:**

- 1. Assessments set in the Provider Page Configuration are appropriate for the funding stream.
- 2. Users performing data entry have latest copies of the workflow guidance documents.
- 3. If using paper, the intake data collection forms correctly align with the workflow.
- 4. 100% of clients are entered into the system within 15 days of intake.
- 5. Agencies are actively monitoring project participation and exiting clients. Clients are exited within 30 days of last contact unless project guidelines specify otherwise.
- 6. All required project information is being collected.<sup>11</sup>
  - a. All HMIS participating agencies are required to enter at minimum the Universal Data Elements.
  - b. Projects that serve clients over time are required to complete additional updates as defined by the funding stream. If the Agency is not reporting to a funding stream, they are encouraged to use the Michigan Update forms that are consistent with their workflows.

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<sup>11</sup> PATH, HOPWA and VA projects use project entry forms that correspond to the data collection requirements of those projects. For PATH, HOPWA, DHHS-ESP and DHHS PSH please contact [www.dyns-services.com](http://www.dyns-services.com)



## VII. RESEARCH AND ELECTRONIC DATA EXCHANGES

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### A. Electronic Data Exchanges:

1. Agencies electing to either import data to or export data from the MSHMIS must assure:
  - a. **Data Import** - The quality of data being loaded onto the System meets all the data quality standards listed in this policy including timeliness, completeness, and accuracy. In all cases, the importing organization must be able to successfully generate all required reports including but not limited to the CoC APR, the ESG CAPER, or other required reports as specified by the funder.
  - b. **Data Export** - Agencies exporting data from MSHMIS must certify the privacy and security rights promised participants on the HMIS are met on the destination system. If the destination System operates under less restrictive rules, the client must be fully informed and approve the transfer during the intake process. The agency must have the ability to restrict transfers to those clients that approve the exchange.
2. MSHDA/MCAH or your local CoC may elect to participate in de-identified research data sets to support research and planning.
  - a. De-identification will involve the masking or removal of all identifying or potential identifying information such as the name, Unique Client ID, SS#, DOB, address, agency name, and agency location.
  - b. Geographic analysis will be restricted to prevent any data pools that are small enough to inadvertently identify a client by other characteristics or combination of characteristics.
  - c. Projects used to match and/or remove identifying information will not allow a re-identification process to occur. If retention of identifying information is maintained by a “trusted party” to allow for updates of an otherwise de-identified data set, the organization/person charged with retaining that data set will certify that they meet medical/behavioral health security standards and that all identifiers are kept strictly confidential and separate from the de-identified data set.
  - d. CoCs will be provided a description of each study being implemented. Agencies or CoCs may opt out of the Study through a written notice to MCAH or the study owner.
3. MSHDA/ MCAH or your local CoC may elect to participate in identified research data sets to support research and planning.
  - a. All identified research must be governed through an Institutional Research Board including requirements for client informed consent.
  - b. CoCs will be provided a description of each Study being implemented. Agencies may opt out of the study through a written notice to MCAH or the study owner.

## APPENDIX A: DOCUMENT CHECKLIST FOR MSHMIS AGENCIES

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All agencies that participate on the MSHMIS project are required to keep either a physical or electronic binder containing each of the following fully executed documents.

### Contracts, Agreements, Policies and Procedures

- ☐ **Fully Executed Joint Governance Charter:** (Only the HMIS and/or CoC Lead Agency is required to maintain this document.)
- ☐ **HMIS Policies and Procedures Document for the CoC:** (Only the HMIS and/or CoC Lead Agency is required to maintain this document. It must have been formally approved by the CoC as evidenced by CoC meeting minutes.)
- ☐ **Administrative QSOBAA:** Fully signed and executed
- ☐ **Participation Agreement:** Fully signed and executed
- ☐ **Sharing QSOBAAs:** (Only necessary if the agency has engaged in external sharing). Document should be fully signed and executed. If any changes have been made to a Sharing QSOBAA written documentation and approval of those changes by all parties must be included also.
- ☐ **Confidentiality Policy:** (Approved by Agency Board)
- ☐ **Grievance Policy:** (Approved by Agency Board)

### MSHMIS User Documentation

- ☐ **User Agreement and Code of Ethics Document:** Fully initialed and signed. A User Agreement and Code of Ethics document must be on file for all users currently licensed on MSHMIS. It is recommended that the User Agreement and Code of Ethics documents for employees no longer at the agency be kept with their separated employee file
- ☐ **User Training Documentation/Certification:** Documentation of all MSHMIS trainings completed by active users are to be kept in the MSHMIS binder. These trainings are to be certified by either MCAH, a certified MCAH trainer, other identified statewide trainers or CoC identified trainers for CoC initiatives. Evidence of training include training completion certificates, successfully passed training quizzes, training logs, etc.

### Agency Privacy Documents

- ☐ **HUD Posted Public Notice:** HUD Public Notices should be posted in locations where clients are seen.
- ☐ **Agency Privacy Notice:** Agencies can adopt the sample MCAH Notice or customize to address agency needs.
- ☐ **Agency Privacy Policy:** Agencies can adopt the sample MCAH Policy or customize to address agency needs.
- ☐ **Current Agency Privacy Script:** That's been developed and approved by agency leadership.
- ☐ **Current Agency Release of Information:** Including all sharing partners and sharing outreach plan as applicable.

## APPENDIX B: End Notes of Key Changes for 2017

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The following reflects changes to the 2017 MSHMIS Operating Policies and Procedures document

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- <sup>i</sup> Added definition for 2017
  - <sup>ii</sup> Added definition for 2017
  - <sup>iii</sup> Updated list of project types
  - <sup>iv</sup> Added definition for 2017
  - <sup>v</sup> Added definition for 2017
  - <sup>vi</sup> Added specific language and timetables defining the length of time for conducting an investigation and who is responsible for what elements.
  - <sup>vii</sup> Numbering was continued from the previous section to maintain sectional integrity.
  - <sup>viii</sup> Updated language from Internal Sharing to Internal Visibility throughout Article IIIB Section 10a which better describes the relationship of internal agency data.
  - <sup>ix</sup> Section III.B.13.d was added to provide a baseline for By-Name Lists and Prioritization processes for CoCs, in implementing their Coordinated Entry Plans.
  - <sup>x</sup> Added to reflect the addition of System Performance Measures to the list of CoC required reports
  - <sup>xi</sup> Added to reflect changes to the 2017 HUD Data Standards.
  - <sup>xii</sup> Added Health Insurance and Disabilities to items included on the update
  - <sup>xiii</sup> Added to reflect changes to the 2017 HUD Data Standards

## 2018 HDX Competition Report

### PIT Count Data for MI-506 - Grand Rapids, Wyoming/Kent County CoC

#### Total Population PIT Count Data

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count	800	912	723
Emergency Shelter Total	594	654	517
Safe Haven Total	0	0	0
Transitional Housing Total	165	197	158
Total Sheltered Count	759	851	675
Total Unsheltered Count	41	61	48

#### Chronically Homeless PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	63	108	102
Sheltered Count of Chronically Homeless Persons	59	92	97
Unsheltered Count of Chronically Homeless Persons	4	16	5

## 2018 HDX Competition Report

### PIT Count Data for MI-506 - Grand Rapids, Wyoming/Kent County CoC

#### Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT	2018 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	83	81	73
Sheltered Count of Homeless Households with Children	83	79	70
Unsheltered Count of Homeless Households with Children	0	2	3

#### Homeless Veteran PIT Counts

	2011	2016	2017	2018
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	36	76	92	68
Sheltered Count of Homeless Veterans	36	71	83	65
Unsheltered Count of Homeless Veterans	0	5	9	3

## 2018 HDX Competition Report

### HIC Data for MI-506 - Grand Rapids, Wyoming/Kent County CoC

#### HMIS Bed Coverage Rate

Project Type	Total Beds in 2018 HIC	Total Beds in 2018 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	624	53	519	90.89%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	206	116	90	100.00%
Rapid Re-Housing (RRH) Beds	414	0	414	100.00%
Permanent Supportive Housing (PSH) Beds	855	0	855	100.00%
Other Permanent Housing (OPH) Beds	45	0	45	100.00%
Total Beds	2,144	169	1923	97.37%

## 2018 HDX Competition Report

### HIC Data for MI-506 - Grand Rapids, Wyoming/Kent County CoC

#### PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 HIC	2018 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	282	388	368

#### Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2016 HIC	2017 HIC	2018 HIC
RRH units available to serve families on the HIC	58	67	122

#### Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC	2018 HIC
RRH beds available to serve all populations on the HIC	236	274	414

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Summary Report for MI-506 - Grand Rapids, Wyoming/Kent County CoC

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

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and 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 October, 1, 2012.

**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.

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES and SH	3003	2733	72	83	11	36	48	12
1.2 Persons in ES, SH, and TH	3239	2951	77	87	10	41	52	11

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

The construction of this measure changed, per HUD's specifications, between FY 2016 and FY 2017. HUD is aware that this may impact the change between these two years.



## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2016	FY 2017	Submitted FY 2016	FY 2017	Difference	Submitted FY 2016	FY 2017	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	2984	2730	146	229	83	61	98	37
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	3221	2967	152	233	81	65	99	34

# 2018 HDX Competition Report

## FY2017 - Performance Measurement Module (Sys PM)

### Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited 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.

After entering data, please review and confirm your entries and totals. Some HMIS reports may not list the project types in exactly the same order as they are displayed below.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns	FY 2017	% of Returns
Exit was from SO	64	11	17%	4	6%	9	14%	24	38%
Exit was from ES	649	70	11%	48	7%	41	6%	159	24%
Exit was from TH	344	18	5%	16	5%	27	8%	61	18%
Exit was from SH	0	0		0		0		0	
Exit was from PH	557	12	2%	26	5%	46	8%	84	15%
TOTAL Returns to Homelessness	1614	111	7%	94	6%	123	8%	328	20%

### Measure 3: Number of Homeless Persons

#### Metric 3.1 – Change in PIT Counts

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2016 PIT Count	January 2017 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	800	912	112
Emergency Shelter Total	594	654	60
Safe Haven Total	0	0	0
Transitional Housing Total	165	197	32
Total Sheltered Count	759	851	92
Unsheltered Count	41	61	20

### Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2016	FY 2017	Difference
Universe: Unduplicated Total sheltered homeless persons	3290	2967	-323
Emergency Shelter Total	3041	2732	-309
Safe Haven Total	0	0	0
Transitional Housing Total	364	337	-27

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

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

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	402	229	-173
Number of adults with increased earned income	24	11	-13
Percentage of adults who increased earned income	6%	5%	-1%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	402	229	-173
Number of adults with increased non-employment cash income	108	74	-34
Percentage of adults who increased non-employment cash income	27%	32%	5%

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

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults (system stayers)	402	229	-173
Number of adults with increased total income	118	82	-36
Percentage of adults who increased total income	29%	36%	7%

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	364	185	-179
Number of adults who exited with increased earned income	83	59	-24
Percentage of adults who increased earned income	23%	32%	9%

#### Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	364	185	-179
Number of adults who exited with increased non-employment cash income	75	54	-21
Percentage of adults who increased non-employment cash income	21%	29%	8%

#### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2016	FY 2017	Difference
Universe: Number of adults who exited (system leavers)	364	185	-179
Number of adults who exited with increased total income	149	100	-49
Percentage of adults who increased total income	41%	54%	13%

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2990	2936	-54
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	720	809	89
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	2270	2127	-143

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2016	FY 2017	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	4007	3496	-511
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	1037	1030	-7
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	2970	2466	-504

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

#### Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2017 (Oct 1, 2016 - Sept 30, 2017) reporting period.

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

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2016	FY 2017	Difference
Universe: Persons who exit Street Outreach	237	301	64
Of persons above, those who exited to temporary & some institutional destinations	34	133	99
Of the persons above, those who exited to permanent housing destinations	37	61	24
% Successful exits	30%	64%	34%

Metric 7b.1 – Change in exits to permanent housing destinations

## 2018 HDX Competition Report

### FY2017 - Performance Measurement Module (Sys PM)

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	3317	2950	-367
Of the persons above, those who exited to permanent housing destinations	1595	1378	-217
% Successful exits	48%	47%	-1%

#### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2016	FY 2017	Difference
Universe: Persons in all PH projects except PH-RRH	1635	1025	-610
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1552	963	-589
% Successful exits/retention	95%	94%	-1%



## 2018 HDX Competition Report

### **FY2017 - SysPM Data Quality**

#### **MI-506 - Grand Rapids, Wyoming/Kent County CoC**

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

## 2018 HDX Competition Report

### FY2017 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017	2013-2014	2014-2015	2015-2016	2016-2017
1. Number of non-DV Beds on HIC	235	303	565	535	428	377	119	90	883	2190	2884	3316	61	206	236	274				
2. Number of HMIS Beds	235	303	565	535	346	377	119	90	883	863	1186	1032	26	206	236	258				
3. HMIS Participation Rate from HIC ( % )	100.00	100.00	100.00	100.00	80.84	100.00	100.00	100.00	100.00	39.41	41.12	31.12	42.62	100.00	100.00	94.16				
4. Unduplicated Persons Served (HMIS)	2213	2381	3052	2735	499	378	351	343	1379	1640	1668	1603	352	1124	1253	1161	64	246	117	387
5. Total Leavers (HMIS)	1909	1957	2582	2380	347	319	280	277	421	649	606	242	279	588	944	666	4	161	48	356
6. Destination of Don't Know, Refused, or Missing (HMIS)	1060	1023	1424	1291	40	62	73	61	9	5	4	11	2	1	4	4	1	60	38	88
7. Destination Error Rate (%)	55.53	52.27	55.15	54.24	11.53	19.44	26.07	22.02	2.14	0.77	0.66	4.55	0.72	0.17	0.42	0.60	25.00	37.27	79.17	24.72

## 2018 HDX Competition Report

### Submission and Count Dates for MI-506 - Grand Rapids, Wyoming/Kent County CoC

#### Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2018 PIT Count	1/31/2018	

#### Report Submission Date in HDX

	Submitted On	Met Deadline
2018 PIT Count Submittal Date	4/30/2018	Yes
2018 HIC Count Submittal Date	4/30/2018	Yes
2017 System PM Submittal Date	5/31/2018	Yes



## PRIORITIZATION OF PERSONS EXPERIENCING CHRONIC HOMELESSNESS POLICY GUIDANCE

### **Background**

The Grand Rapids Area Coalition to End Homelessness, also known as the Grand Rapids/Wyoming/Kent County Continuum of Care entity and here forward referenced as the CoC, is committed to ending homelessness across Kent County.

The US Department of Housing and Urban Development (HUD) issued *Notice CPD-16-11 on July 25, 2016*. This Notice provides guidance to Continuums of Care and recipients of CoC Program funding for permanent supportive housing (PSH) regarding the order in which eligible households should be served in all CoC Program-funded PSH. The Notice also establishes recordkeeping requirements for all recipient CoC Program-funded PSH that includes beds that are required to serve persons experiencing chronic homelessness as defined in 24 CFR 578.3, in accordance with 24 CFR 578.103.

“In order to meet the first goal of *Opening Doors*—ending chronic homelessness—it is critical that CoCs ensure that limited resources awarded through the CoC Program Competition are being used in the most effective manner and that households that are most in need of assistance are being prioritized. ... To ensure that all PSH beds funded through the CoC Program are used as strategically and effectively as possible, PSH needs to be targeted to serve persons with the highest needs and greatest barriers towards obtaining and maintaining housing on their own—persons experiencing chronic homelessness. HUD’s experience has shown that many communities and recipients of CoC Program-funded PSH continue to serve persons on a ‘first-come, first-serve’ basis and/or based on tenant selection processes that screen-in those who are most likely to succeed. These approaches to tenant selection have not been effective in reducing chronic homelessness, despite the increase in the number of PSH beds nationally.” (Notice, p. 3)

To achieve the greatest impact on chronic homelessness, it is resolved that the CoC incorporates the order of priority into policy, as described in the Notice. This policy requires recipients of CoC Program-funded PSH beds that are dedicated or prioritized to serve chronically homeless persons, to follow the order of priority in accordance with the details of the Notice and in a manner consistent with their current grant agreement.

### **Applicability**

This policy refers to permanent supportive housing units that are CoC Program funded and are dedicated or prioritized for chronic homelessness. This policy shall allow for transition time for projects that must work with additional funding source waitlist requirements, with the expectation that they will begin taking referrals from the prioritization list as quickly as possible.

### **Order of Priority**

All CoC Program-funded PSH beds dedicated to chronically homeless households are required through the project's grant agreement to only be used to house persons experiencing chronic homelessness unless there are no persons within the CoC that meet the criteria for chronic homelessness.

CoC Program-funded PSH beds that are prioritized for chronically homeless households implement an admissions preference for chronically homeless persons.

The following outlines the order for priority for both dedicated and prioritized PSH beds for chronically homeless households:

Order of Priority for Dedicated and Prioritized Permanent Supportive Housing	Meets HUD's Chronic Homelessness Definition	Has Severe Service Needs?	Other Requirements
1	Yes	Yes	At least 12 months continuous, prioritized based on length of homelessness.
2	Yes	No	At least 12 months continuous, prioritized based on length of homelessness.
3	Yes	Yes	4 episodes of homelessness in 3 years equaling at least 12 months.
4	Yes	No	4 episodes of homelessness in 3 years equaling at least 12 months.

Identification of households experiencing chronic homeless first occurs through coordinated entry. When coordinated entry is informed of an open CoC Program-funded PSH bed that is dedicated or prioritized to a chronically homeless household, the household meeting the highest threshold of prioritization will be referred by coordinated entry to the PSH provider. Severity of need is determined by the use of a standardized assessment tool at coordinated entry, such as the SPDAT.

"CoCs that adopt the order of priority in Section III of this Notice into the CoC's written standards are strongly encouraged to use their coordinated assessment system in order to ensure that there is a single prioritized waiting list for all CoC Program-funded PSH within the CoC. Under no circumstances shall the order of priority be based upon diagnosis or disability type, but instead on the severity of needs of an individual or family." (Notice, p. 10)

At which time a referral is requested for a dedicated or prioritized bed and no chronically homeless persons can be identified within the CoC, coordinated entry will provide verification to this effect and refer the next eligible person off the registry. This will ensure that the dedicated and prioritized beds remain in compliance with this policy.

### **Recordkeeping Requirements**

In accordance with the Notice, this policy also states that all recipients of CoC Program-funded PSH are required to document a program participant's status as chronically homeless as defined in 24 CFR 578.3 and in accordance with 24 CFR 578.103. The following is a list of required records for each recipient to maintain:

1. Written intake procedures
2. Evidence of chronically homeless status
  - a. Evidence of homeless status
  - b. Evidence of duration of homelessness
    - i. Evidence that the homeless occasion was continuous, for at least one year
    - ii. Evidence that the household experienced at least four separate homeless occasions over 3 years
  - c. Evidence of diagnosis with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in Section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability
3. Evidence of cumulative length of occasions
4. Evidence of severe service needs, as determined with a standardized assessment tool
5. Evidence that the recipient is following the CoC's written standards for prioritizing assistance

**Policy Approved by Steering Council:**

August 19, 2016