Steering Council Meeting Agenda
June 19, 2020 ▫ 8:30 – 10:30 am ▫ Zoom

1. Call to Order/Introductions

2. Approval of the Agenda*

3. Approval of Minutes*
   a. May 15, 2020

4. Public Comment on Agenda Items (Limit 3 minutes ea.)

5. Approval of Consent Agenda*
   a. Steering Calendar
   b. ESG Financial Assistance Report
   c. Committee Updates
   d. Budget Report: Statement of Activity
   e. Data Reports: 2020 PIT Count Overview; 2019 Annual Count Overview

6. Petitions and Communications

7. City of Grand Rapids Homelessness Outreach Taskforce Presentation

8. MSHDA ESG - *Steering to determine new priorities or reaffirm last year's priorities*

9. CoC COVID-19 Shelter and Housing Strategy
   a. Isolation Update – *re: Fulton Care Center and plans for isolation moving forward*

10. CoC Program Competition – *staff to share updates if available; Steering Council Funding Review Process will have to be tabled as there has been no updates from HUD as of 6/12. July Steering Council meeting?*

11. Strategic Visioning – *Courtney to provide update on ad-hoc and meetings with consultants*

12. Current Strategic Plan – *Steering had discussed approval at the full CoC but Exec had concerns around the feasibility of a virtual vote at full CoC. Instead suggest an interim plan with focus on racial equity is approved by Steering and then released for public comment*

13. Budget Review – *Courtney to provide updated budget worksheet*

14. MSHMIS Governance – *additional pre-read information can be found on page 15*

15. Any other matters by Steering Committee Member(s)

16. Public Comment on Any Matter (Limit 3 minutes ea.)

17. Adjournment

Next meeting: August 21st, 2020
8:30 – 10:30am

* denotes potential action item

STEERING COUNCIL
MEETING MINUTES - DRAFT
May 15, 2020
8:30-10:30

Facilitator:	Casey Gordon		
Meeting Attendees:	<u>Steering members present</u>: Adrienne Goodstal, Amanda Tarantowski, Casey Gordon, Cheryl Schuch, Elizabeth Stoddard, Erin Banchoff, Hattie Tinney, Karen Tjapkes, Lauren VanKeulen, Rebecca Rynbrandt, Tom Cottrell, Victoria Sluga, Shannon Bass, Scott Orr, Alonda Trammell (late) <u>Steering members absent with notification</u>: <u>Steering members absent without notification</u>: Brianna Lipscomb, Shontaze Jones, Thomas Pierce, Susan Cervantes, Cathy LaPorte, Kwan McEwen <u>Community Members</u>: Vera Beech, Wende Randall, Emily Madsen <u>Staff</u>: Courtney Myers-Keaton, Brianne Czyzio Robach		
Time Convened:	8:33	Time Adjourned:	10:29

Approval of Agenda		May 15, 2020	
Motion by:	Tom Cottrell	Support from:	Shannon Bass
Discussion	Remove Steering Calendar from consent agenda (6) Pull Annual Count comparison (7)		
Amendments			
Conclusion	All in favor, motion passes.		
Approval of Minutes		**April 17, 2020**	
Motion by:	Shannon Bass	Support from:	Cheryl Schuch
Discussion	Ensure there is consistency with names (e.g. Rebecca versus Becky)		
Amendments			
Conclusion	All in favor, motion passes.		
Approval of Consent Agenda		**May 15, 2020**	
Motion by:	Shannon Bass	Support from:	Victoria Sluga
Discussion			
Amendments			
Conclusion	All in favor, consent agenda is approved.		
Public Comment on Any Agenda Item			
Discussion			
None.			
Petitions and Communications			
Discussion			
None.			
Steering Annual Calendar			
Discussion			

Rebecca asked to pull this out to ensure we are n proactive with June calendar items. Regarding the Funding Process review, there have been no updates from HUD regarding the status of this year's program competition. Staff are continuing to receive information from HUD on the expenditures and have reached out for eLOCCS screenshots of all projects. Staff will be proactive in reaching out to Funding Review Committee and funded providers regarding status. There has been previous

conversation around reallocation, staff will ask for status from programs and bring conversation back to Steering if needed.

The annual open call for membership occurs each June. The usual process is to reach out via social media. Suggestion for a direct emailing to group that have been engaged in the housing space (GRUL, HCWM, GR Chamber, Rockford Construction, others). Steering should send any ideas to CoC staff. Staff will develop a marketing plan that can be updated each year as needed.

Action Items	Person Responsible	Deadline
Develop CoC membership marketing plan	CoC staff	

2019 Annual Count Comparison		
Discussion		

Review indicates that the largest population increase over the past year was single adults. Data Analysis will be reviewing the comparison and discussing insights at their meeting next week. Mel Trotter and DV providers have seen an increase in numbers over the past few years, particularly with single females. The senior population saw an increase as well. Increased tracking and data quality may also contribute to increases. This will be added to the website after review by Data Analysis Committee.

Action Items		

Budget Review		
Discussion		

Staff had shared different budget scenarios with Executive based on different personnel allocations. Based on conversations with other CoCs throughout the country, given our community's number of providers and HMIS users, the recommended structure is a full-time HMIS director and full-time HMIS specialist. Steering members affirmed the benefits of having an HMIS director in house but recognized the potential difficulty in finding quality candidate. Different budget scenarios implement this structure and move the administrative coordinator position to full time. Conversation around fundraising to meet the gap. Suggestions include reallocation of fund from the CE grant to HMIS, funds these would not be available until early 2021. KConnect may be an option for the data-related funding.

Staff came across a discrepancy and are working on this with finance team at United Way. Courtney will send updated budget once she hears back from the finance team.

Action Items	Person Responsible	Deadline
Provide updated budget once available	CoC staff	

MSHDA ESG CARES Act Funding		
Discussion		

The community's round 1 allocation is $539,513. The NOFA has been released. There is no due date, as MSHDA is awaiting HUD guidance. MSHDA also would like a comprehensive plan in place for the community The CoC will be required to identify sub-grantees in the application. Last month, Steering discussed prioritizing for these funds for family and youth shelter.

Discussion on how to move forward to select subgrantees and how to allocate funds. Staff can build off current work and research on anticipated need in the community to develop a recommendation for percentages. MSHDA indicated that communities can use a process of their choosing as long as it is endorsed by the CoC. Historically, the community has used the RFQ process. Staff will research other processes through the state and make recommendation based on feedback.

Conversations around reimbursement for expenses through FEMA. There is currently not a process in place with the county for reimbursement. There are several buckets of federal funds that have been placed with Kent County. Cheryl expressed responsibility falls on the county as well as the CoC. She suggested advocacy and coordination to develop a strategy for implementing these funding streams. Courtney can develop information on current state, capacity, funding timeline, and best practices to share with Kent County and the City of Grand Rapids EOCs.

Action Items	Person Responsible	Deadline
Compile information on current state, capacity, funding timeline, and best practices to share with EOC	Courtney Myers-Keaton	

CoC COVID-19 Shelter and Housing Strategy

Discussion

Isolation Update
An isolation facility has been established at Fulton Care Center (FCC). Staff and security are onsite, the facility can accommodate families. Those who are asymptomatic but tested positive were moved from hotels to FCC. After time in isolation is up, folks receive a clearance letter and transition back into shelter if they choose. There is room for continued advocacy to ensure that plans do not build in inequities by design. Courtney will provide updates around isolation as necessary.

Coordinated Entry
Previously, there had been discussion around prioritization during COVID-19. The Coordinated Entry (CE) committee met yesterday and decided not to use the COVID-19 risk from prioritization into housing. The committee will be collecting feedback on the VI-SPDAT tool as well as the CE system flow. Conversations will continue around the VI-SPDAT and other prioritization tools.

The group also discussed a lack of resources available in the community for all who are high risk of complications due to COVID-19. Members wondered if FCC could be used to shelter for those who are high risk but have not tested positive. Since the common space at FCC is congregate space, so it is not suitable for healthy households who are high-risk.

Action Item	Person Responsible	Deadline

Current Strategic Planning Timeline

Discussion

Recognition that the expectation was to have something in place by the end of April when the plan expired, but the pandemic delayed this timeline. Executive Committee recommends to extending the current plan and highlighting three priorities in light of the pandemic – ensure that those who need to access shelter can do so safely, increase access to housing, and increase prevention resources.

Given the current situation, it may not be realistic to say that current the current strategic plan has been extended if all measures are do not need focus on right now. The timeline for an interim plan is difficult. Steering members are in favor of moving into pandemic management mode with interim plan suspending the other plan for now. In regard to approval, agreement that if the CoC is going to implement new priorities/key metrics specific to the timeline of pandemic, this should go to the full membership for a vote.

Staff to develop pandemic interim strategic plan to follow the pandemic's timeline and bring back to Steering in for approval, this will then be taken to the full CoC for approval.

Action Item	Person Responsible	Deadline

Strategic Visioning		
Discussion		

Courtney has reached out to consultants and received updated proposals. Updated proposals will be sent to the ad-hoc group that previously reviewed proposals as well as Steering Council members for feedback. The ad-hoc will be tasked with developing a recommendation.

Action Item	Person Responsible	Deadline
Provide updated proposals to Steering Council for feedback	CoC staff	

KConnect Housing Stability Alliance		
Discussion		

Prior to the meeting, staff shared a presentation about transitions in KConnect's Housing Stability Alliance. In addition, a calendar invitation was shared for the alliance meeting next Thursday morning, those who would like more understanding of changes to KConnect's process should attend this event. KConnect staff have offered to provide an opportunity for feedback from Steering Council members who have not been participating in the process. CoC staff will coordinate with KConnect staff to provide a feedback form for Steering Council members.

Action Item	Person Responsible	Deadline
Coordinate to provide feedback form to Steering Council	CoC and KConnect	

Any other Matters by Steering Members		
Discussion		

Public Comment on Any Matter		
Discussion		
Staff will begin sharing Steering Council meeting information on the CoC's Facebook page.		

Adjourn		
Motion by:	Shannon Bass	Support from:	Tom Cottrell

GRAND RAPIDS/WYOMING/KENT COUNTY
STEERING COUNCIL ANNUAL CALENDAR
Updated November 2019

January
Steering Committee Orientation
Executive Officer Elections
Point in Time Count
Steering Council Annual Conflict of Interest
    Forms Completed

February
City of Grand Rapids Emergency Solutions Grant
    Application
Strategic Plan Update
Reallocation Discussion

March
Data Quality Committee Report
Budget Preparation
Strategic Plan Progress Review
CoC and ESG Mid-Term Monitoring

April
LIHTC Developer Presentations to Steering
    (October Round)
Point in Time Count Submitted to HUD
Budget Review

May
Strategic Plan Annual Review
Budget Approval
Nomination Committee forms

June
Steering Council Funding Process Review
Governance Charter Recommended Changes to
    CoC membership
Open Call for New CoC Members
PIT Data Released

July
NAEH Annual Conference
System Performance Measures Review
Strategic Plan Update

August
HUD CoC Program Funding Vote (Anticipated)
System Performance Measures Reported to CoC
CoC, Fiduciary, HARA MOU for ESG Execution

September
Data Quality Committee Report
MSHDA Emergency Solutions Grant Application
HUD CoC Program Application Due (Anticipated)
PIT Planning Begins

October
LIHTC Developer Presentations to Steering
    (April Round)
Governance Charter Review, including ENTF
    relationship affirmation & Fiduciary MOU

November
Strategic Plan Progress Review
Staff Evaluations Initiated by Fiduciary
Strategic Plan Update

December
Steering Council elections (at CoC meeting)
Staff Evaluations Concluded by Fiduciary

The Salvation Army Social Services, Housing Assessment Program (HAP)

ESG Financial Assistance Report

6/12/2020

Financial assistance funds are paid on an on-going basis as invoices are received from all partners. Staffing funds are invoiced quarterly (April, July, October, January).

FY18/19 Grant Name	Financial Assistance Amount	Grant Term	% of FY Complete	Tentative Amount Spent**	Tentative % Spent	Amount Spent	% Spent	Referred by HAP	Referrals Accepted
ESG - City of Grand Rapids - The Salvation Army - 61st District Court Eviction Prevention Pilot FY19	$50,000	1/01/2019-12/31/2019	100%	$50,000	100%	$50,000	100%	37	37
ESG - City of Grand Rapids - The Salvation Army - 61st District Court Eviction Prevention Pilot FY20	$61,420	7/1/2019-6/30/2020	83%	$61,420	100%	$61,420	100%	35	35
ESG - MSHDA - The Salvation Army - Prevention	$23,363	10/01/2019-09/30/2020	75%	$9,211	39%	$9,211	39%	6	4
ESG - MSHDA - The Salvation Army - RRH	$55,624	10/01/2019-09/30/2020	66%	$55,615	100%	$55,615	100%	43	28

*MOUs were completed in March
**Tentative Amount Spent dependent on participant's continued eligibility in the program.

HMIS Data Quality Committee –

During the meeting on 04/21/2020, System Administrator, Daniel, spoke about extending the Site Audit until the next quarter. Also discussed the PIT/HIC count and finalizing the number for Data Analysis to review. We spent majority of the time talking about COVID-19. We introduced the resources and tools page on the CoC website. Also, we introduced the screening tool to alert users about clients who are most vulnerable to COVID-19. Finally, we reminded Agency Administrator to let us know if their agency's inventory numbers change.

Coordinated Entry Committee –

The did not meet in June but will be collecting feedback from agencies on the use of the VI-SPDAT tool for prioritization as well as the coordinated entry system flow. The group will discuss feedback and will continue conversations around the VI-SPDAT and other prioritization tools. The next meeting is scheduled for July 7, 1-2:00pm.

Youth Action Board –

The action board is not currently meeting due to COVID-19.

CoC FYTD May Statement of Activity

	Admin (HWMUW)	MSHDA ESG	GR CDBG	Wyoming CDBG	HUD - CoC Program Funds	Kent County CUNP-HMIS Match	HMIS (Sal. Army)	TOTAL Actual	Annual Budget
City of Wyoming CDBG 19-20 CoC	$ -	$ -	$ -	$ 4,619.02	$ -	$ -	$ -	$ 4,619.02	$ 5,000.00
City of GR CDBG 19-20/Coc Full ENTF	-	-	16,172.04	-	-	-	-	16,172.04	17,286.00
HUD Planning - CoC	-	-	-	-	144,136.45	-	-	144,136.45	160,585.00
Salvation Army HMIS	-	-	-	-	-	-	72,222.94	72,222.94	77,458.00
Kent County CUNP - Local Match/Full ENTF	-	-	-	-	-	28,164.87	-	28,164.87	20,648.00
HWMUW - Local match/Full ENTF	19,621.95	-	-	-	-	-	-	19,621.95	14,069.00
MSHDA ESG - Passthrough	-	195,507.07	-	-	-	-	-	195,507.07	141,754.00
TOTAL REVENUE	$ 19,621.95	$ 195,507.07	$ 16,172.04	$ 4,619.02	$ 144,136.45	$ 28,164.87	$ 72,222.94	$ 480,444.34	$ 436,800.00
Personnel Costs	$ 9,781.69	$ -	$ 16,017.06	$ 4,199.06	$ 116,987.72	$ 19,498.49	$ 12,229.91	$ 178,713.93	$ 184,628.00
Professional Fees	5,413.80	-	-	-	1,183.15	-	55,000.00	61,596.95	60,000.00
Community Inclusion Activities	-	-	-	-	3,770.86	-	-	3,770.86	8,000.00
Grant Passthrough (ESG to Salvation Army)	-	189,492.07	-	-	-	-	-	189,492.07	138,569.00
Supplies	51.00	-	-	-	337.02	-	297.64	685.66	-
Printing/Copying	-	-	-	-	762.17	-	-	762.17	643.00
Conferences	-	-	-	-	2,968.85 .		1,281.04	4,249.89	6,516.00
Meetings	58.54	-	-	-	1,160.00	-	30.25	1,248.79	1,225.00
Parking/Transportation	300.00	-	154.98	-	3,084.34	2,464.50	84.10	6,087.92	5,628.00
Indirect	4,016.92	6,015.00	-	419.96	13,882.34	6,201.88	3,300.00	33,836.10	31,591.00
TOTAL EXPENSES	$ 19,621.95	$ 195,507.07	$ 16,172.04	$ 4,619.02	$ 144,136.45	$ 28,164.87	$ 72,222.94	$ 480,444.34	$ 436,800.00
Revenue Over(Under) Expenses	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

Notes:
1. Passthrough grant
2. CoC staff time:
   1 FTE - Courtney - CoC Coordinator/ Program Manager (86.5% HUD Planning, 10.8% City of GR CDBG, 2.7% City of Wyoming CDBG)
   .85 FTE - Brianne - Administrative Assistant (83% HUD, 11% GR CDBG, 6% CUNP)
   .80 FTE- Sierra - HMIS Specialist (20% HWMUW, 30% CUNP, 50% HUD Planning)
   .15 FTE - Wende - Program Director (47% HUD, 53% HMIS)
   Staff Total 2.8 FTE
3. Contracting - HMIS Administration-up to 50 hours/month.
4. Action board stipends (check and gift card), bus passes, materials
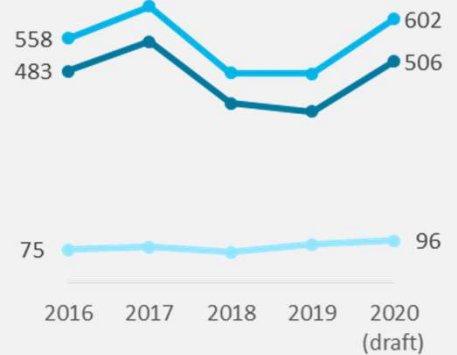5. Occupancy, Indirect staff expenses

2020 Point-In-Time (PIT) Count
MI-506 - Grand Rapids, Wyoming/Kent County CoC

The number of persons experiencing homelessness (**total**) and **chronic** homelessness both increased. [1,2]

Total **800**

912

723   728

923 ↑**15%**

Chronic **63**   107   102   122   185 ↑**194%**

2016   2017   2018   2019   2020 (draft)

Persons in **emergency shelter, transitional housing,** or unsheltered all increased.

Emergency Shelter   594   654   517   577   644 ↑**8%**

Transitional Housing   165   197   158   135   193 ↑**17%**

Unsheltered   41   61   48   16   86 ↑**110%**

2016   2017   2018   2019   2020 (draft)

Total adults (over 24) ↑8%.
Those with children ↑28%.
Those **without children** ↑5%.

558
483

602
506

75   96

2016   2017   2018   2019   2020 (draft)

Total adults (18-24) ↑66%.
Those with children ↑70%.
Those **without children** ↑64%.

53
33
20

88
54
34

2016   2017   2018   2019   2020 (draft)

Total children (under 18) ↑23%.
Those with adults ↑27%.
Those **unaccompanied** ↓36%.

189
178

233
226

11   7

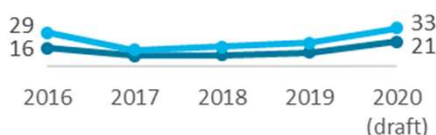2016   2017   2018   2019   2020 (draft)
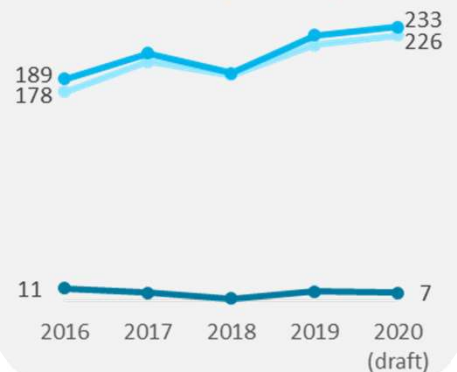
White individuals experiencing homelessness were underrepresented; whereas, **Black or African American** individuals were overrepresented when compared to Kent County's population, revealing a racial disparity. [3, 4]

White

Total	54%
Emergency Shelter	55%
Transitional Housing	61%
Unsheltered	26%

Kent County - 80%

Black or African American

Total	36%
Emergency Shelter	35%
Transitional Housing	26%
Unsheltered	62%

10% - Kent County

Total	Non-Hispanic or Non-Latino 93%

Kent County - 89%

Total	7% Hispanic or Latino

11% - Kent County

Females (F) made up more than half of those experiencing homelessness (total), in emergency shelter, and unsheltered. **Males (M)** were a majority in transitional housing.

Total
1% *
M 41%
F 58%

Emergency Shelter
1% *
M 38%
F 61%

Transitional Housing
1% *
F 42%
M 57%

Unsheltered
M 26%
F 74%

Veteran homelessness ↓9%.
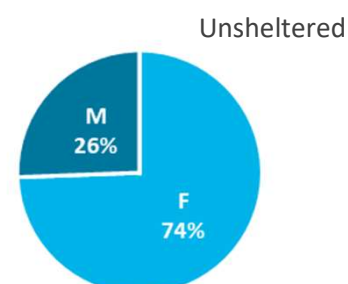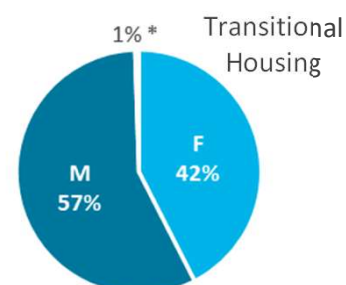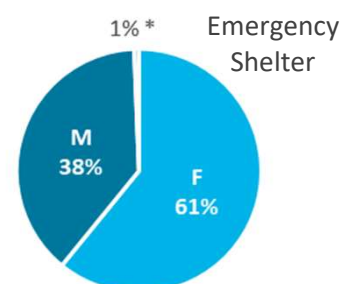
76 92 68 48 69

2016 2017 2018 2019 2020 (draft)

Parenting youth (18-24) ↑31%. **Children** (under 18) in parenting youth households ↑14%.

29 33
16 21

2016 2017 2018 2019 2020 (draft)
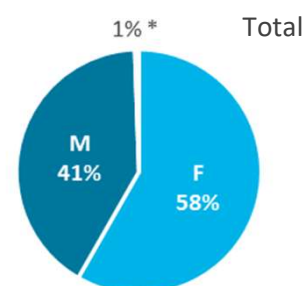
[1] The US Department of Housing and Urban Development (HUD) requires each Continuum of Care (CoC) to conduct a count annually of people experiencing homelessness on a single night.
[2] HUD generally defines chronically homeless persons as those in a household whose head has a disability and has been experiencing homelessness continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, where the combined occasions total a length of time of at least 12 months. For more information and a full definition see: https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule/
[3] Kent County data is from the 2018 American Community Survey 1-Year Estimates Tables B02001 - Race and B03003 - Hispanic or Latino Origin.
[4] Although data for remaining races are not shown here, "Two or more races" was overrepresented at 8-9% vs. 4% in Kent County in all categories except un-sheltered, where "American Indian and Alaska Native" were overrepresented at 6% vs. less than 0.5% in Kent County.

*Due to low number "Transgender" and "Gender Non-Conforming," responses were combined into one category.
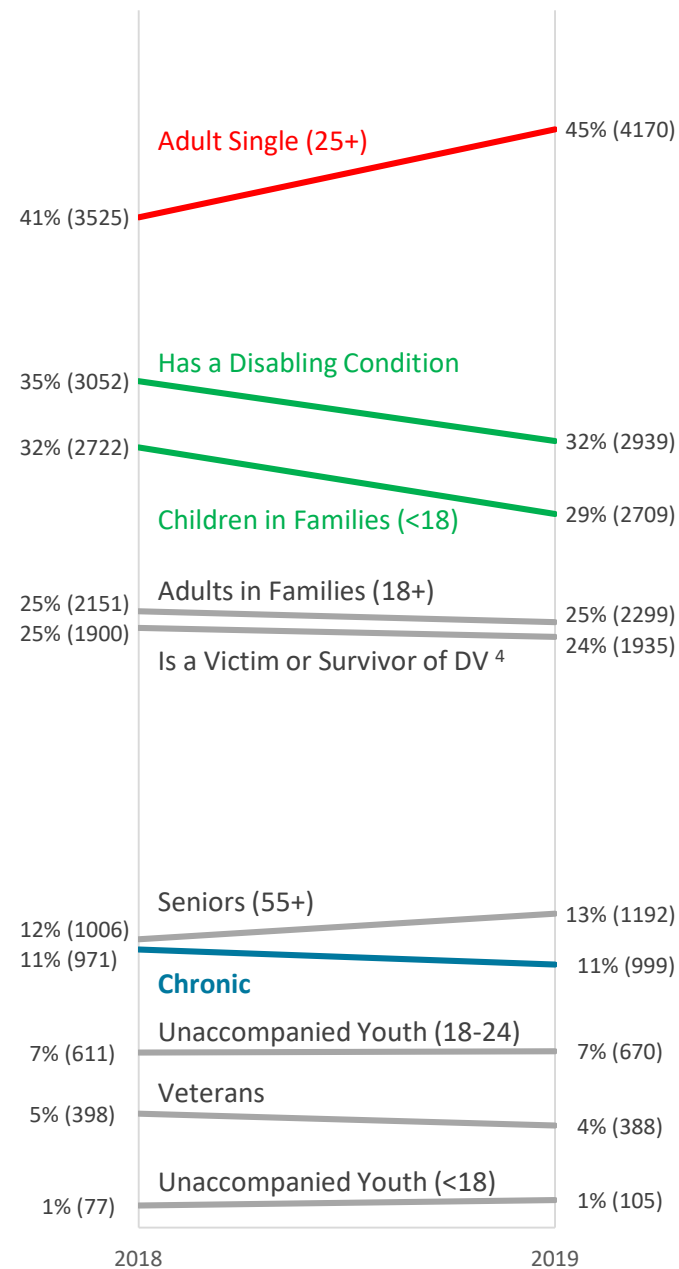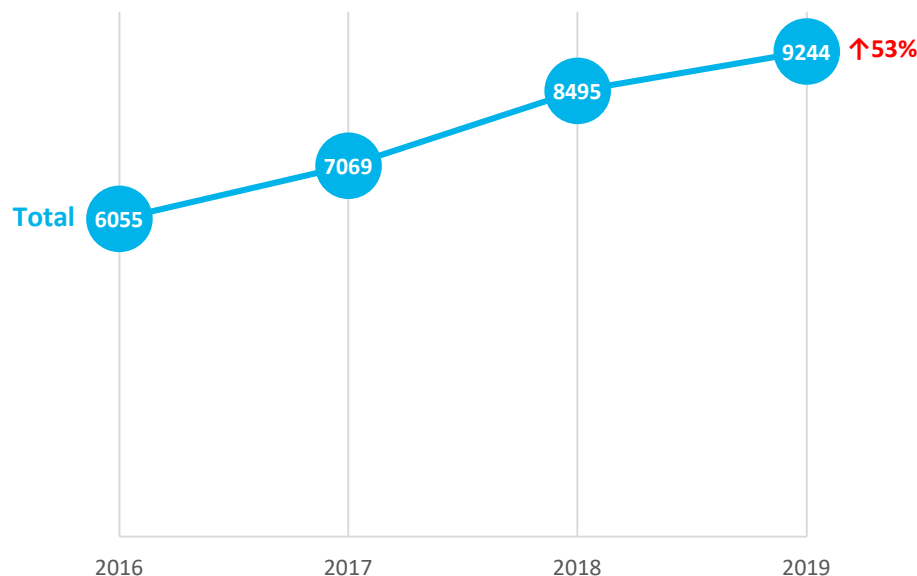
2019 Annual Count
MI-506 - Grand Rapids, Wyoming/Kent County CoC

In 2019, **9,244 total** people experienced at least one episode of homelessness in Kent County, a 53% increase over 2016, and **999** of those people experienced **chronic homelessness**. [1, 2]

While most numbers have increased since 2018, populations have remained relatively steady as a percentage of total people experiencing homelessness. [3] The largest increase has been among single adults (25+) and the largest decreases have been among children in families (<18) and those who have a disabling condition.

Total: 6055 (2016), 7069 (2017), 8495 (2018), 9244 (2019) ↑53%

Adult Single (25+): 41% (3525) → 45% (4170)
Has a Disabling Condition: 35% (3052) → 32% (2939)
Children in Families (<18): 32% (2722) → 29% (2709)
Adults in Families (18+): 25% (2151) → 25% (2299)
Is a Victim or Survivor of DV [4]: 25% (1900) → 24% (1935)
Seniors (55+): 12% (1006) → 13% (1192)
Chronic: 11% (971) → 11% (999)
Unaccompanied Youth (18-24): 7% (611) → 7% (670)
Veterans: 5% (398) → 4% (388)
Unaccompanied Youth (<18): 1% (77) → 1% (105)

2018   2019

Footnotes 1, 2, 3, and 4 are located on page 2.

When compared to Kent County's population, **Black or African American** individuals experiencing homelessness (5667) were overrepresented as a total (all household types) and within each household type, revealing a clear racial disparity. [5] This inequality was largest for children in families (<18) and un-accompanied youth (<18). Other races (not shown) make up less than 2.5% of those experiencing homelessness.
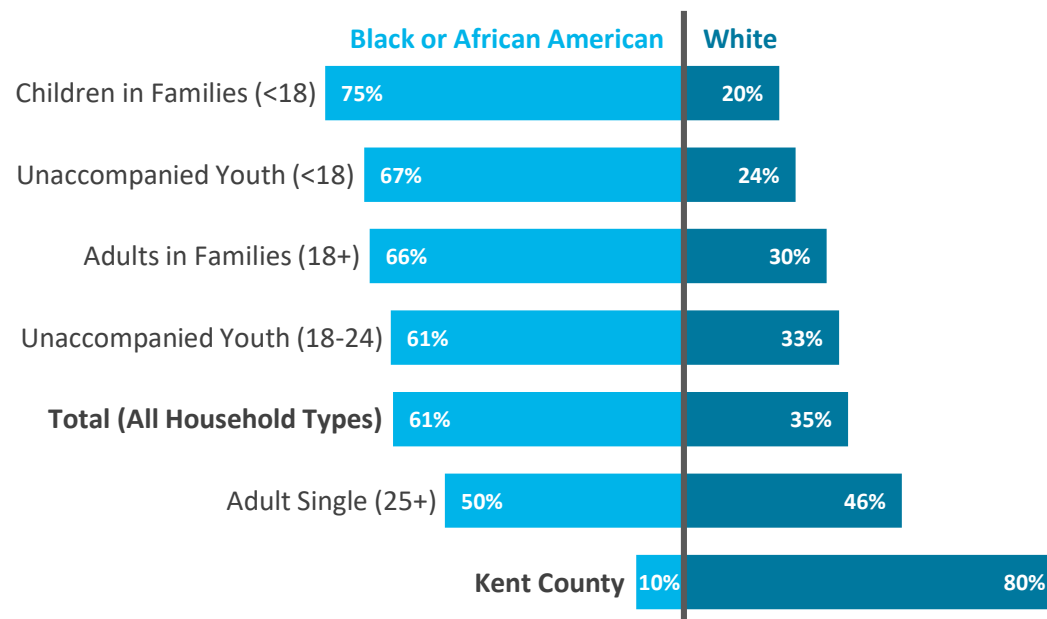
Although **Hispanic or Latino** individuals (973) were fairly represented as a total (all household types) when compared to Kent County's population, a small ethnic disparity existed for children in families (<18) and unaccompanied youth (<18).
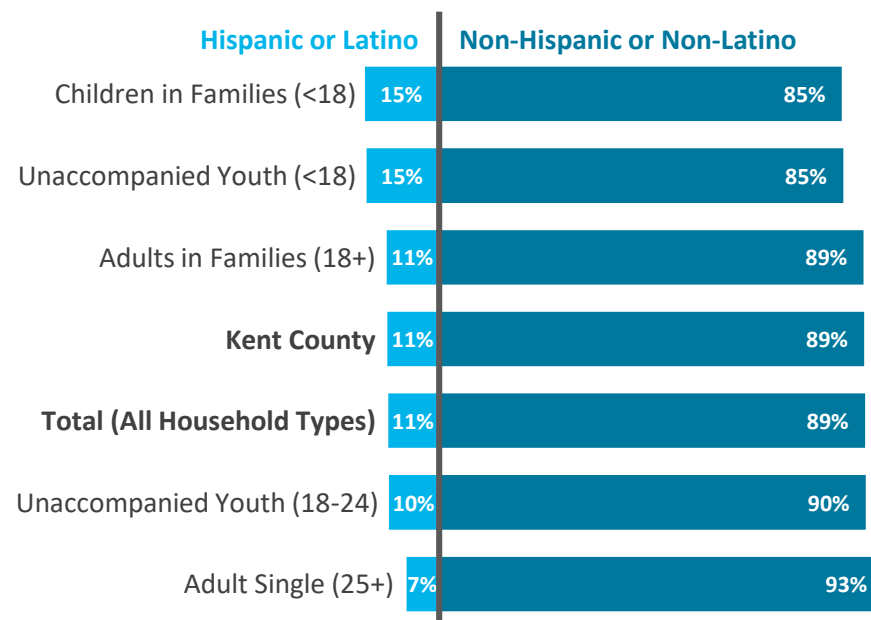
[1] Data is from the Grand Rapids, Wyoming/Kent County Continuum of Care's (CoC) Homeless Management Information System (HMIS).

[2] HUD generally defines chronically homeless persons as those in a household whose head has a disability and has been experiencing homelessness continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, where the combined occasions total a length of time of at least 1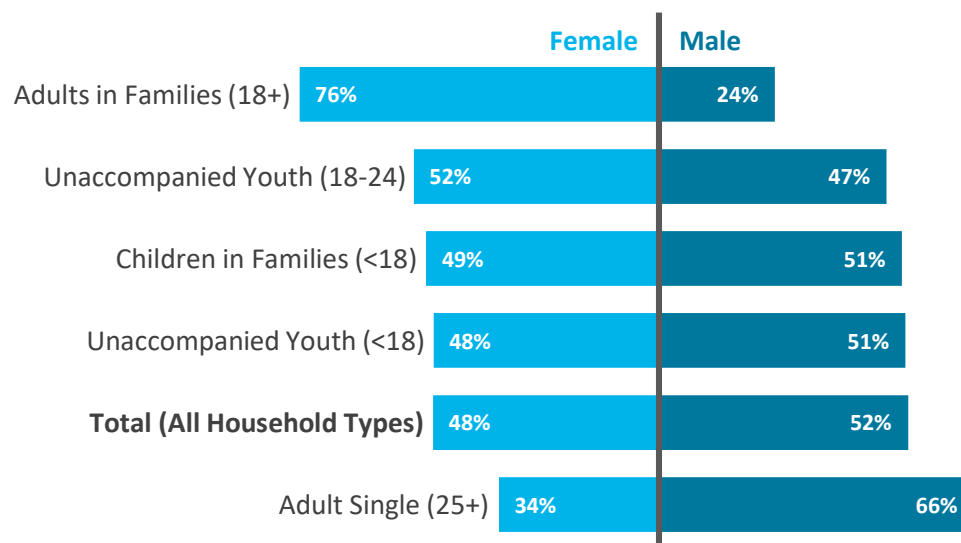2 months. For more information and a full definition see: https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule/

[3] Percentages add up to more than 100% because some people may be part of multiple populations. Percentages are calculated as the number divided by the total for all populations except "Has a Disabling Condition" and "Is a Victim or Survivor of DV" (Domestic Violence). Percentages for these two populations are calculated as the number divided by total responses to a specific yes/no question regarding each of these populations.

[4] Domestic Violence (DV) may have been experienced at any point in the person's life (survivor) and is not necessarily current (victim) or related to their experience of homelessness.

[5] Kent County data is from the 2018 American Community Survey 1-Year Estimates Tables B02001 - Race and B03003 - Hispanic or Latino Origin.

Black or African American | **White**

	Black or African American	White
Children in Families (<18)	75%	20%
Unaccompanied Youth (<18)	67%	24%
Adults in Families (18+)	66%	30%
Unaccompanied Youth (18-24)	61%	33%
Total (All Household Types)	61%	35%
Adult Single (25+)	50%	46%
Kent County	10%	80%

Hispanic or Latino | **Non-Hispanic or Non-Latino**

	Hispanic or Latino	Non-Hispanic or Non-Latino
Children in Families (<18)	15%	85%
Unaccompanied Youth (<18)	15%	85%
Adults in Families (18+)	11%	89%
Kent County	11%	89%
Total (All Household Types)	11%	89%
Unaccompanied Youth (18-24)	10%	90%
Adult Single (25+)	7%	93%

Males (4813) and **females** (4424) each make up roughly half the individuals experiencing homelessness total (all household types). However, adults in families (18+) are disproportionately **females**, and single adults (25+) are disproportionately **males.** Less than 0.5% of total individuals experiencing homelessness identified as transgender (14).
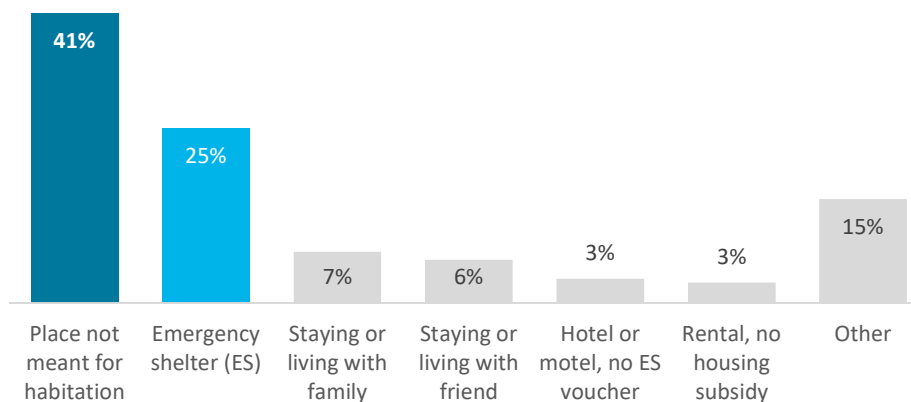
Female   **Male**

	Female	Male
Adults in Families (18+)	76%	24%
Unaccompanied Youth (18-24)	52%	47%
Children in Families (<18)	49%	51%
Unaccompanied Youth (<18)	48%	51%
Total (All Household Types)	48%	52%
Adult Single (25+)	34%	66%

The most common **services provided** to persons experiencing homelessness were **coordinated assessment** and **emergency shelter**. [6]

Service	Percentage
Coordinated Assessment	65%
Emergency Shelter	52%
Rapid Re-Housing	10%
Services Only	8%
Other	8%

The most common **prior living situations** of persons experiencing homelessness were **places not meant for habitation** and **emergency shelters (ES)**. [7]

Prior living situation	Percentage
Place not meant for habitation	41%
Emergency shelter (ES)	25%
Staying or living with family	7%
Staying or living with friend	6%
Hotel or motel, no ES voucher	3%
Rental, no housing subsidy	3%
Other	15%

[6] Percentages add up to more than 100% because some people may receive more than one service. Other services provided include transitional housing, street outreach, permanent supportive housing, homelessness prevention, housing only, housing with services, and other.

[7] Other prior living situations include safe haven; rental with housing subsidy or in a public housing unit; transitional housing; jail, prison, or juvenile detention facility; hospital or other residential medical or psychiatric facility; substance abuse treatment facility or detox center; residential project or halfway house with no homeless criteria; permanent housing (other than rapid re-housing) for formerly homeless persons; residence owned with or without subsidy; interim housing; foster care; host home (non-crisis); long-term care facility or nursing home; mission; unknown (data not collected, client refused, and client doesn't know).

MSHMIS Governance – Pre-Read Information

Problem: Ever since the statewide HMIS Sub-Committee was disbanded, our CoC has had no formal mechanism to make change - if needed - in the HMIS and has been unable to effectively ensure the HMIS is administered in compliance with HUD requirements, meets local needs and aligns with best practice, despite paying into the system and providing data for statewide reporting. This [short video](#) from HUD explains the CoC's role and responsibilities when it comes to designating and operating an HMIS.

Solution: The proposed solution is to proactively engage with our state partners (MCAH and MSDHA) in order to **re-establish an inclusive HMIS governance framework** where our CoC is represented, participates in decision making, and - most importantly - has a vote. Fortunately, HUD has given us [models in best practice](#) for multi-CoC HMIS governance, including [North Carolina](#) where MCAH also happens to serve as that state's HMIS Lead Agency. This solution would ensure our CoC shares in the responsibility for **1. designating HMIS software; 2. designating the statewide HMIS lead; 3. reviewing privacy, security and data quality plans; and, 4. ensuring HUD-compliant administration.**

Additional Considerations: According to [24 CFR, part 578.7](#), Responsibilities of the Continuum of Care, our CoC must "develop, follow, and update annually a governance charter, which will include *all procedures and policies* needed to comply with subpart B of this part and with HMIS requirements as prescribed by HUD" in consultation with the collaborative applicant and the HMIS Lead. Our [CoC Governance Charter](#) ("CoC charter") hasn't been amended since late 2018 and makes no mention of the MSHMIS Joint Governance Charter. The "MSHMIS charter" doesn't make any provision for our CoC's role and responsibilities in any joint-decision making related to HMIS. The proposed solution would likely entail changes to both the CoC charter and MSHMIS charter.

Attachments:
- [CoC Governance Charter](#)
- [MSHMIS Joint Governance Charter](#)