Before Starting the CoC Application

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

 The Collaborative Applicant is responsible for:

 1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.

 2. Ensuring all questions are answered completely.

 3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.

4. Ensuring all imported responses in the application are fully reviewed and updated as needed.

 5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.

 6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.

 - Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.
 - All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions click here.

1A. Continuum of Care (CoC) Identification

Instructions:

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

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

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

1A-3. CoC Designation: CA

1A-4. HMIS Lead: The Salvation Army

1B. Continuum of Care (CoC) Engagement

Instructions:

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

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

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

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

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

Bimonthly CoC meetings are open to the public and all attendees are invited to speak on any topic on the agenda, and there is an open agenda item at the end of each meeting. Following meetings, attendees are surveyed on whether they felt comfortable to speak at the meeting and ideas for improvement of and topics for future meetings. This feedback is reviewed by CoC staff and incorporated into future meetings. During the development of the Strategic Plan of the CoC, public meeting times are announced in advance and community members are recruited to give input on the plan goals and objectives during the process. The final plan is voted on by all CoC members. Membership is free and open to any agencies, governments, and businesses, or individuals who are or have been homeless. All committee agendas and minutes are available on the CoC website and the meetings are open to anyone who may wish to attend. The Steering Council invites presenters with new information or ventures regularly.

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

The CoC is gives membership information a prominent placement on its website. There is concerted annual effort to recruit new members through public posting, email, and personal appeals to agencies with work related to that of ending homelessness. Homeless and formerly homeless persons have been encouraged to attend CoC meetings by peer support specialists and case managers. To ensure that homeless or formerly homeless persons are engaged in the leadership of the CoC, a transportation stipend is provided to Steering Council members through either a monthly bus pass or a gas card of equal value. CoC Staff meets regularly with formerly homeless Steering members to explain upcoming agenda items and identify other areas of involvement (PIT Count, website blogs, etc). Finally, agencies that do not wish to become voting members are still engaged in specialized committees such as Outreach and can participate to the extent they wish.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to

proposals.
(limit 1000 characters)

The local application process opened on 8-4-2017 to all interested organizations. The applications were distributed via email to >100 CoC members and community partners and posted on the CoC website. It was also shared on the CoC's Facebook page, reaching an additional 233 people. The local application includes a document with directions for returning and new applicants and links to HUD-created instructions on completing eSnaps applications as well as threshold requirements all entities must meet. A scorecard for the applications was also included to clearly state the scoring criteria along with an outline of the scoring, rating and ranking process (via Funding Review scoring and ranking applications). The CoC also hosted a meeting on 8-7-2017 for all interested applicants to ask questions about the application process. This year, an applicant new to HUD funding attended the meeting and submitted a new project application that was considered and rated by the Funding Review committee.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

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

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

The City of Grand Rapids is the only jurisdiction that receives ESG funding. Funds are allocated in support of activities identified in the CoC's Strategic Plan. The CoC Funding Review Committee reviews responses to the City's

Request for Qualifications and identifies eligible service providers. The Committee evaluates agency performance and capacity and develops ESG funding recommendations. These recommendations are forwarded to the Grand Rapids City Commission for consideration and approval following a requisite public comment opportunity. CoC service standards are incorporated in contractual agreements executed between the City and service providers. The CoC provides the City data for the CAPER and PIT and HMIS data as needed. Three jurisdictions, including the City of Grand Rapids, collaborated on a Regional Con Plan. CoC Steering Council and other CoC members were involved in the planning process. All CoC member comments on the draft Plan are reflected in the final document.

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

Whether or not Domestic Violence is the direct cause of a current episode of homelessness, the CoC recognizes it is critical to address this experience through a trauma-informed lens and quickly establish safety. The Coordinated Entry entity accomplishes this by screening for DV early in the process, using language provided by DV service providers. If DV is identified, the household is connected with DV service providers for further risk assessment and safety planning, as needed. Based on need and assessment, services may include: Entry into emergency DV shelter, entry into DV-specific transitional housing, a housing/safety plan, or referral to general housing resources with wrap-around DV supportive services offered. Those fleeing DV are able to access housing and services that are DV-specific (DOJ funded) as well as general housing and services funded by the CoC, ESG, and DHHS. DV providers use a database that is comparable to HMIS but maintains confidentiality.

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

Coordinated Entry (CE) engages with DV service providers on a quarterly basis (at minimum) to coordinate housing needs, access and assessment processes for those experiencing DV, including ongoing training of CE staff by DV providers. Three times each year, the YWCA West Central Michigan offers training open to all community partners on the dynamics of domestic and sexual violence and how to respond to and support survivors. DV providers maintain statistical data on survivors utilizing emergency shelter (ES) and transitional housing. This data is provided on an aggregate level and client level in a de-identified format to the CoC for determining community need and strategy (identifying needs and gaps, etc). At CE, a safety screening assesses for

immediate safety needs; if any are identified, a referral to a DV provider utilizing a process designed for confidentiality is made to create a safety plan and access DV emergency shelter.

1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.
Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Grand Rapids Housing Commission	13.20%	Yes-HCV
Michigan State Housing Development Authority	100.00%	Yes-HCV
Kent County Housing Commission	96.00%	No
Wyoming Housing Commission	25.00%	No
Rockford Housing Commission	0.00%	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-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy.
(limit 1000 characters)

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

1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with

providers on how to effecctively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Idenity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy.
(limit 1000 characters)

After the release of the Equal Access Rule in 2016, the October CoC Meeting consisted of reviewed and training on the rule and the training materials created by HUD with encouragement to each agency to use the materials in further training within their agencies, this initial CoC-wide training will be built upon and continued annually, contracting with the local LGBTQ Advocacy organization. Additionally, the Coordinated Entry organization conducted a staff-wide training with these materials shortly after. The CoC has been involved in a community group focused on youth LGBTQ homelessness and recently began work as a partner community with the True Colors Fund to end LGBTQ youth homelessness. While all adult shelters in the community are faith-based and privately-funded, these organizations have sought out training and have begun work to better serve the LGBTQ population. The CoC implemented a CoC-wide anti-discrimination policy in August 2016.

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

Engaged/educated local policymakers:	X
Engaged/educated law enforcement:	X
Engaged/educated local business leaders	X
Implemented communitywide plans:	
No strategies have been implemented	
Other:(limit 50 characters)	

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

Foster Care:	X
Health Care:	X
Mental Health Care:	X
Correctional Facilities:	X
None:	

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

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

Foster Care:	X
Health Care:	X

Mental Health Care:	X
Correctional Facilities:	X
None:	

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

Instructions

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

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

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

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

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

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

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

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

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

Public Posting	
CoC or other Website	X
Email	X
Mail	
Advertising in Local Newspaper(s)	
Advertising on Radio or Television	
Social Media (Twitter, Facebook, etc.)	X

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

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

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between FY 2013 and FY 2017 CoC Program Competitions.
No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 1

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

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

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

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

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

Reallocation Supporting Documentation

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

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No	Reallocation Supp...	09/25/2017

Attachment Details

Document Description: Reallocation Supporting Documentation

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

Yes

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

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

1-2 of Joint Charter, 2 of Governance Charter

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

Yes

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

Mediware

2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area.

Statewide HMIS (multiple CoC)

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

in that project type.

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

2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months.
(limit 1000 characters)

NA

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

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

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

Instructions:

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

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

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

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

Instructions:

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

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

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

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017?
CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.
Yes

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

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

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

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

Youth outreach staff employed with the local Family & Youth Services Bureau (FYSB), Runaway & Homeless Youth (RHY) Program funded organization and staff from the youth drop-in center were deeply engaged in planning for the unsheltered count and identified both sleeping locations for the night of the count and day-after gathering locations (food kitchens, drop-in locations) where youth were asked about their sleeping location. Outreach staff interviewed several unsheltered youth about the best ways to connect with young people.

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

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

homelessness liaisons.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

The number of first-time homeless increased this year, but their percentage of the total homeless population remained the same. The CoC saw that many people becoming homeless for the first time were priced out by a growth of 9.4% in rental rates from 2015-2016. Risk factors include incomes that cannot match increases in housing costs, and housing costs rising too quickly. In response, the CoC has been involved in local efforts to improve affordable housing access and increase resources for eviction prevention, including the expansion of eviction prevention programs within local District Courts, after reviewing the outcomes of the first program. The CoC works closely with the Essential Needs Task Force within the county, which coordinates systems of care for employment and workforce development, food access, utility assistance, and transportation. The CoC Steering Council is responsible for overseeing the CoC's strategy, supported by staff.

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

The average and median length of time homeless decreased from 2015 to 2016 (average of -4 for ES, -20 for ES and TH). This took extraordinary work on the part of housing project staff in the face of a high-rent, low-vacancy housing market. Strategies that the CoC has used to decrease length of homelessness include increasing access to supports in the housing search process.

Additionally, targeted outreach was employed to those households that were identified as experiencing longer-term homelessness through partnerships between CE and the local mission. The CoC CE 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. The Steering Council of the CoC is responsible for this strategy with support of staff. Additionally, there is a special Chronic Homeless Committee working to end chronic homelessness.

3A-3. Performance Measures: Successful Permanent Housing Placement and Retention
  Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC's strategy for retention of, or placement in permanent housing.
(limit 1000 characters)

The CoC experienced very little change in exits to or retention of permanent housing between 2015 and 2016, with measures moving only 1% in either direction. Exits from Street Outreach improved 1% (67/29% to 37/30%), exits from ES, TH and RRH decreased by 1% (1189/49% to 1595/48%) and exits from all PH decreased by 1% (1523/96% to 1552/95%). The CoC strategy for the past year to improve performance on this metric is to study performance across the projects to determine those that are seeing positive outcomes, identify what has contributed to those outcomes, and seek to use those lessons to improve performance across other projects by replicating promising practices across projects. The Steering Council is ultimately responsible for this strategy, with support from CoC staff and the Data Analysis Committee.

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

The CoC saw small increases in returns to homelessness after 2 years in emergency shelter (25%-29%) and permanent housing (17%-21%) between 2015 and 2016, but in this timeframe it also saw much larger decreases in returns to homelessness from street outreach (43%-24%) and transitional housing (28%-18%). This change reflects the work of the CoC to reduce the number of TH projects to only those that were high-performing, and to better utilize and integrate street outreach with the Coordinated Entry process. Most recently, the CoC identified that certain projects had a more difficult time preventing returns to homelessness due to project design, and worked with the projects to change design, or reallocated funds to different projects. With these improvements implemented, the next year will focus on reducing unsuccessful exits from permanent housing. This strategy resides with the Steering Council

for overall guidance but is supported by CoC staff and the CoC's Data Analysis Committee.

3A-5. Performance Measures: Job and Income Growth
Describe: (1) the strategies that have been implemented to increase access to employment and mainstream benefits; (2) how the CoC program-funded projects have been assisted to implement the strategies; (3) how the CoC is working with mainstream employment organizations to help individuals and families increase their cash income; and (4) the organization or position that is responsible for overseeing the CoC's strategy to increase job and income growth from employment, non-employment including mainstream benefits.
(limit 1000 characters)

In order to increase access to employment and mainstream benefits, the CoC works closely with the county's Essential Needs Task Force (ENTF) and its Workforce Development Committee. This committee is similar in structure to the CoC, and coordinates the efforts of all the employment-focused services in the county. Through this group, the largest RRH provider has launched a pilot "Employment First" project, which will match individuals in CoC and ESG-funded housing projects with employment as well as supportive services through employment service providers to help keep them employed. Most of the housing service providers are MI Bridges sites (DHHS enrollment), which enables them to enroll consumers in mainstream benefits in their offices; others have strong partnerships with DHHS or the PATH grantee for referrals. The responsible entity for this outcome measure is the Steering Council, and this outcome has support from soC Staff, ENTF staff and the CoC's Data Analysis Committee.

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

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

NA

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

(mm/dd/yyyy)

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

Instructions

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

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

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

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

Total number of beds dedicated as Dedicated Plus	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	383
Total	383

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

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

History of or Vulnerability to Victimization	X
Number of previous homeless episodes	X

Unsheltered homelessness	X
Criminal History	
Bad credit or rental history (including not having been a leaseholder)	
Head of Household with Mental/Physical Disability	X

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

The CoC strategy to rehouse households with children consists of two parts: 1) a process with which to rehouse families quickly and 2) garnering sufficient community resources. Within the Coordinated Entry process, the level of need is assessed, the household is prioritized for assistance based on level of vulnerability and referred to an appropriate resource as available. At referral, the provider begins work with the household to quickly find housing. Part 2 of this strategy has been to use a variety of funding sources to increase the amount of RRH available in the community. The CoC supports RRH using HOME funds from the 3 IJs that receive them, and private donations. The CoC has contracted CSH for a financial modeling report to predict the resources needed to reach functional zero for families by 2020. The Steering Council, through the work of CoC staff and the Data Analysis Committee, monitors the effectiveness of this strategy, and makes recommendations for changes as necessary.

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

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

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

The CoC created a new Non-Discrimination Policy in August 2016 that prohibits discrimination by family makeup, age, gender identity or expression, marital status, or disability. All agencies receiving funding through the CoC funding review process must abide by this policy. The Coordinated Entry process does

not screen households out of referrals based upon any discriminatory criteria.

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

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

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

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	X
Number of Previous Homeless Episodes	X
Unsheltered Homelessness	X
Criminal History	X
Bad Credit or Rental History	X

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

This year was the first completed year of the first CoC-funded, youth-dedicated RRH project. This strategy was effective in rapidly ending homelessness for more than 40 youth headed households. In continually seeking to improve however, this year the project was reallocated into the new TH-RRH component type based on feedback from youth focus groups as they expressed the trauma of a lack of safe crisis housing. This project has been, and will continue to be measured by length of time participants are homeless, increases in income and exits to and retention of permanent housing. Currently, data is being reviewed to determine the best process of building a Youth By-Name List taking into considerations the differences in youth from veterans and chronic populations. The CoC has a special CoC committee on ending youth homelessness that is receiving HUD-contracted TA, in addition to a community group formed to end LGBTQ youth homelessness that is receiving TA from the True Colors Fund.

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

The McKinney-Vento District Leader is an active, formal member of the CoC who participates in many committees. CoC staff meet at least once annually with school liaisons to explain the system and process for addressing homeless families and youth. The CoC adopted a policy regarding homeless youth and their educational service eligibility, ensuring that all school-aged children are able to maintain their education with as little disturbance as possible. Each agency has a policy in place and process for ensuring that parents and youth are properly connected with these services that complies with the CoC Policy. Housing providers and emergency shelter providers connect with school liaisons regularly.

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

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

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

Through the work of the Ending Veteran Homelessness Committee, specific strategies were put in place to ensure that the community accurately identified all veterans who were homeless through a By-Name List. Veteran-specific outreach teams were developed that included Coordinated Entry, VA, and housing provider agency staff to make certain that outreach efforts are

comprehensive, cover a 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. Coordinated Entry actively partners with the VA through collaborations with SSVF and GPD service providers to ensure that veterans are able to receive the most comprehensive and equitable access to housing resources. The community has sought and secured USICH recognition for reaching functional zero (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 is assisted to quickly move into permanent housing using a Housing First approach? Yes

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

Instructions:

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

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

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

4A-1a. Mainstream Benefits

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

The CoC maintains partnerships with health care navigator projects through Priority Health and Health Net of West Michigan to ensure consumers are connected to assistance in Medicaid and ACA enrollment. The CoC works closely with the Kent County Department of Health and Human Services to ensure quick and easy access to mainstream benefit enrollment within the housing crisis response system with many housing providers as enrollment locations themselves. As changes to mainstream benefits occur, the CoC ensures that all providers have access to information regarding the changes, such as this year's changes to Food Stamp access that would no longer waive "able bodied" adults from proving they've looked for work. The CoC shared information through email and newsletter updates and brought in a presenter from DHHS to explain further and answer questions about the changes. These

updates are the responsibility of CoC staff and are included within the CoC Strategic Plan.

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

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	14.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	11.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	78.57%

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

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	14.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	11.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	78.57%

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

The CoC oversees/operates active and collaborative outreach activities throughout 100% of the CoC geographic area. The CoC coordinates a monthly meeting of agencies conducting outreach to homeless populations throughout the county. Although each agency has its own particular objective in its outreach efforts, all coordinate to ensure persons are connected to Coordinated Entry for housing resources. Agencies target specific populations that are less likely to seek out assistance, and choose to not engage with systems; including youth, people with mental health disorders, chronically homeless, immigrants, families, and veterans. Outreach by the PATH grantee, Runaway and Homeless Youth provider, downtown ambassadors, and rural outreach is conducted five days a week. Outreach by Coordinated Entry is conducted 3 days of the week, but will increase this five days a week as of October 1, 2017.

4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin,

religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach. Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

The CoC ensures that 24 CFR 578.93 is promoted by including equal housing opportunity language on websites and printed materials of housing providers and Coordinated Entry (CE) . Staff across the system have engaged in continual training from the Fair Housing Center; FHC staff are also CoC members and serve on Funding Review and Coordinated Assessment Committees. CoC members consult with organizations such as the Hispanic Center, Disability Advocates, and the Association for the Blind and Visually Impaired. Providers work to make units in projects accessible with Braille and barrier-free units. CE (including CE Outreach) has a Language Access Plan for staff working with persons who are Limited English Proficient. The plan ensures that CE provides timely and professional translation/interpreting services, as well as strategies for working with individuals that are deaf and/or have other communication needs. Other outreach providers have similar training and plans for accessibility.

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

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

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

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

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	CoC Communication...	09/26/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	Consolidated App:...	09/26/2017
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	CoC Rating and Re...	09/26/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	CoC's Rating and ...	09/26/2017
05. CoCs Process for Reallocating	Yes	CoCs Process for...	09/26/2017
06. CoC's Governance Charter	Yes	CoC's Governance ...	09/26/2017
07. HMIS Policy and Procedures Manual	Yes	HMIS Policy and P...	09/26/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Administratio...	09/26/2017
10. CoC-HMIS MOU (if referenced in the CoC's Goverance Charter)	No		
11. CoC Written Standards for Order of Priority	No	CoC Written Stand...	09/20/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	HDX-system Perfor...	09/26/2017
14. Other	No		
15. Other	No		

Attachment Details

Document Description: CoC Communication to Participants

Attachment Details

Document Description: Consolidated App: Public Posting Evidence

Attachment Details

Document Description: CoC Rating and Review Procedure

Attachment Details

Document Description: CoC's Rating and Review Procedure: Public Posting Evidence

Attachment Details

Document Description: CoCs Process for Reallocating

Attachment Details

Document Description: CoC's Governance Charter

Attachment Details

Document Description: HMIS Policy and Procedures Manual

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Administration Plan

Attachment Details

Document Description:

Attachment Details

Document Description: CoC Written Standards for Order of Priority

Attachment Details

Document Description:

Attachment Details

Document Description: HDX-system Performance Measures

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/12/2017
1B. Engagement	09/25/2017
1C. Coordination	09/25/2017
1D. Discharge Planning	09/12/2017
1E. Project Review	09/25/2017
1F. Reallocation Supporting Documentation	09/25/2017
2A. HMIS Implementation	08/30/2017
2B. PIT Count	08/30/2017
2C. Sheltered Data - Methods	09/25/2017
3A. System Performance	09/25/2017
3B. Performance and Strategic Planning	09/25/2017

4A. Mainstream Benefits and Additional Policies	09/26/2017
4B. Attachments	09/26/2017
Submission Summary	No Input Required

Jesica Vail

Attention:

The local competition for FY 2017 Federal HUD funding is now open. Renewal, New and Bonus Project applications are all being accepted until **5pm Friday, August 18, 2017**. Please share this information with your networks, as new project applications will be considered in this competition.

Applicants are invited to attend an informational session at **10am on Monday, August 7, 2017 at the United Way** (118 Commerce SW, Grand Rapids).

Attached to this email you will find instructions for new and returning applicants, three types of applications and scorecards for both renewal applications and for new and bonus applications. These documents may also be accessed online at: http://endhomelessnesskent.org/actions/2017-hud-coc-program-funding-competition/ or via Dropbox at: https://www.dropbox.com/sh/7vtd3bz9azo9q4d/AAAut9nP8Nh7jzyAerAEUXpDa?dl=0

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

Thank you

Jesica Vail
Program Manager
118 Commerce Ave SW
Grand Rapids, MI 49503
P: 616.752.8640
E: jvail@hwmuw.org
W: endhomelessnesskent.org

GRAND RAPIDS AREA
**COALITION TO END
HOMELESSNESS**

2017 HUD CoC Program Funding Competition

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. 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. All information provided by these applicants will be posted here, available for public viewing.

Additionally, there are opportunities for new applicants to join in on the process. This year the Coalition will be eligible to apply for roughly $321,054 in Bonus Projects. Additionally, all interested, 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, with the best success.

2017 Funding Process Timeline (http://endhomelessnesskent.org/wp-content/uploads/2017/08/Local-Application-Timeline-2017.pdf)

Reallocation Policy (http://endhomelessnesskent.org/wp-content/uploads/2017/08/Reallocation-Policy-2016Final.pdf)

Renewal Project Forms

FY2017 Renewal Instructions (http://endhomelessnesskent.org/wp-content/uploads/2017/08/FY2017RenewalInstructionsPV1.pdf)

2017 Renewal Local Application (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017RenewalLocalAppPV1.docx)

2017 Renewal Score Card (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017Renew_App_ScoreCardPV1.pdf)

New and Bonus Project Forms

FY2017 New and Bonus Instructions (http://endhomelessnesskent.org/wp-content/uploads/2017/08/FY2017New_BonusInstructionsPV1.pdf)

2017 New and Bonus Local Application (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017_New-Bonus_CoCLocalAppPV1.docx)

2017 New and Bonus Score Card (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017New_Bonus_App_ScoreCardPV1.pdf)

Infrastructure Project Forms

2017 Infrastructure Application (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017_HMIS_CELocalAppPV1.docx)

(http://mindutopia.com)

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Posts

Grand Rapids Area Coalition to End Homelessness
Published by Jesica Vail [?] · August 4 at 2:12pm · 🌐

The 2017 federal fiscal year funding competition is now open to applicants for permanent housing projects. Any organization working to end homelessness is welcome to apply if they meet federal eligibility requirements. For more information, visit the Coalition website:
http://endhomelessnesskent.org/.../2017-hud-coc-program-fund.../

2017 HUD CoC Program Funding Competition - Coalition to End Homelessness

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. Most projects seek to renew their funding, in order to provide housing stability to those they serve. To do so, they must demonstrate their eff...
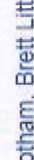ENDHOMELESSNESSKENT.ORG

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COALITION TO END HOMELESSNESS
GRAND RAPIDS AREA

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 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

Well House
600 Cass SE
Grand Rapids, MI 49503

August 25, 2017

Ms. Crison,

Thank you for submitting a new project application for the permanent supportive housing project, Well House Permanent Supportive Housing, in the 2017 Continuum of Care Program Application process.

The Funding Review Committee is not recommending the project to be included in the Project Listing submitted to HUD in this competition round. The committee suggests that you consider working with Coalition staff to further develop the project into one that more fully aligns with the most appropriate component type and reapply in the next competition.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager
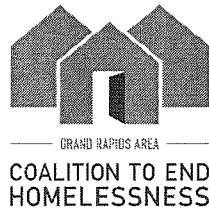
Inner City Christian Federation
920 Cherry St SE
Grand Rapids, MI 49503

August 25, 2017

Ms. Rolffs,

This letter is to confirm that you did not seek a renewal of the ICCF RRH project in the HUD FY 2017 CoC Program Competition. You opted to utilize the voluntary reallocation provision within the reallocation policy of the CoC.

This action on your part means that the CoC will reallocate these funds, totaling $82,872 without having gone through a full review and ranking of this project application. Per the policy, you were eligible to reapply for these funds in a new project application if you chose and you remain eligible to reapply in future competitions. Thank you for your participation in this process and thinking about what use of funds will best serve the goal of ending homelessness in Kent County.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

Inner City Christian Federation
920 Cherry St SE
Grand Rapids, MI 49503

August 25, 2017

Ms. Rolffs,

Thank you for submitting your renewal application for the permanent supportive housing project, ICCF PSH, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 87.5, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

YWCA
25 Sheldon Blvd SE
Grand Rapids, MI 49503

August 25, 2017

Mr. Cottrell,

Thank you for submitting your renewal application for the transitional housing project, Project HEAL, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 80, while the community's median score was 94.3. This project is recommended to be in both 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

The Salvation Army
1215 Fulton St East
Grand Rapids, MI 49503

August 25, 2017

Ms. Soulard,

Thank you for submitting your new project application for the new support services only—coordinated entry project, Coordinated Entry in the 2017 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). If you believe your project was considered incorrectly, you are able to appeal this recommendation by outlining the discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

The Salvation Army
1215 Fulton St East
Grand Rapids, MI 49503

August 25, 2017

Ms. Soulard,

Thank you for submitting your renewal project application for the support services only—HMIS project, HMIS Dedicated Grant, in the 2017 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). If you believe your project was considered incorrectly, you are able to appeal this recommendation by outlining the discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail

Jesica Vail
Program Manager

The Salvation Army
1215 Fulton St East
Grand Rapids, MI 49503

August 25, 2017

Ms. Soulard,

Thank you for submitting your renewal project application for the support services only—coordinated entry project, Coordinated Entry, in the 2017 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). If you believe your project was considered incorrectly, you are able to appeal this recommendation by outlining the discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

The Salvation Army
1215 Fulton St East
Grand Rapids, MI 49503

August 25, 2017

Ms. Soulard,

Thank you for submitting your renewal project application for the support services only—coordinated entry project, Housing Assessment Program, in the 2017 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). If you believe your project was considered incorrectly, you are able to appeal this recommendation by outlining the discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

County of Kent
82 Ionia Avenue NW Suite 390
Grand Rapids, MI 49503-3036

August 25, 2017

Mr. Singleton,

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

This project was scored as reflected in the attached scorecard. This project's score was 96.5, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

County of Kent
82 Ionia Avenue NW Suite 390
Grand Rapids, MI 49503-3036

August 25, 2017

Mr. Singleton,

Thank you for submitting your renewal application for the permanent supportive housing project, Shelter + Care SRA, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 98, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

GRAND RAPIDS AREA
COALITION TO END
HOMELESSNESS

Grand Rapids Housing Commission
1420 Fuller SE
Grand Rapids, MI 49503

August 25, 2017

Ms. Clay,

Thank you for submitting your renewal application for the rapid re-housing housing project, Hope Community, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 110, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

GRAND RAPIDS AREA
COALITION TO END
HOMELESSNESS

Community Rebuilders
1120 Monroe Avenue NW Suite 220
Grand Rapids, MI 49503

August 25, 2017

Ms. Beech,

Thank you for submitting your new project application for the new transitional housing—rapid rehousing project, First Step Housing, in the 2017 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). If you believe your project was scored incorrectly, you are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.
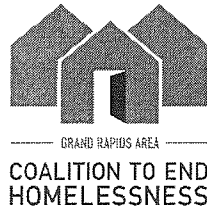
Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

Community Rebuilders
1120 Monroe Avenue NW Suite 220
Grand Rapids, MI 49503

August 25, 2017

Ms. Beech,

Thank you for submitting your renewal application for the permanent supportive housing project, HEROES, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 100, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

Community Rebuilders
1120 Monroe Avenue NW Suite 220
Grand Rapids, MI 49503

August 25, 2017

Ms. Beech,

Thank you for submitting your renewal application for the permanent supportive housing project, Housing Solutions, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 95, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail

Jesica Vail
Program Manager

Community Rebuilders
1120 Monroe Avenue NW Suite 220
Grand Rapids, MI 49503

August 25, 2017

Ms. Beech,

Thank you for submitting your new/expansion project application for the new permanent supportive housing project, Housing Solutions II, in the 2017 Continuum of Care Program Application process.

This project is recommended to be included in Tier 2 of the Project Priority Listing as the community's bonus project application 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 outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.
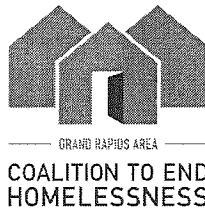
Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

Community Rebuilders
1120 Monroe Avenue NW Suite 220
Grand Rapids, MI 49503

August 25, 2017

Ms. Beech,

Thank you for submitting your renewal application for the rapid rehousing project, Keys First, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 107, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

------ GRAND RAPIDS AREA ------
COALITION TO END
HOMELESSNESS

Community Rebuilders
1120 Monroe Avenue NW Suite 220
Grand Rapids, MI 49503

August 25, 2017

Ms. Beech,

Thank you for submitting your renewal application for the permanent supportive housing project, LOFT, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 115, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

Heartside Nonprofit Housing Corporation
101 Shelden Blvd SE Suite 2
Grand Rapids, MI 49503

August 25, 2017

Ms. Long,

Thank you for submitting your renewal application for the permanent supportive housing project, Verne Barry, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 79, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.
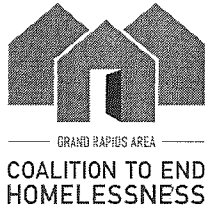
Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail
Program Manager

Heartside Nonprofit Housing Corporation
101 Shelden Blvd SE Suite 2
Grand Rapids, MI 49503

August 25, 2017

Ms. Long,

Thank you for submitting your renewal application for the permanent supportive housing project, Ferguson, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 75, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.
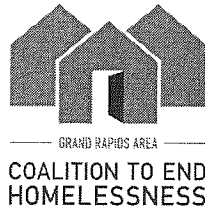
Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail

Jesica Vail
Program Manager

Heartside Nonprofit Housing Corporation
101 Shelden Blvd SE Suite 2
Grand Rapids, MI 49503

August 25, 2017

Ms. Long,

Thank you for submitting your renewal application for the permanent supportive housing project, Commerce Apartments, in the 2017 Continuum of Care Program Application process.

This project was scored as reflected in the attached scorecard. This project's score was 89, while the community's median score was 94.3. 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 are able to appeal this scoring by outlining the scoring discrepancy in a letter that should be sent to Coalition staff at jvail@hwmuw.org by September 1, 2017.

Coalition staff will follow up with you throughout the process to ensure all information is accurately provided to HUD via *e-snaps*. In order to maintain this project's placement in the Project Priority Listing, all required forms must be completed correctly within *e-snaps* in advance of the September 26, 2017 deadline.

Please contact Coalition staff with any questions or comments.

Sincerely,

Jesica Vail

Jesica Vail
Program Manager

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. 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. All information provided by these applicants will be posted here, available for public viewing.

Additionally, there are opportunities for new applicants to join in on the process. This year the Coalition will be eligible to apply for roughly $321,054 in Bonus Projects. Additionally, all interested, 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, with the best success.

2017 Funding Process Timeline (http://endhomelessnesskent.org/wp-content/uploads/2017/08/Local-Application-Timeline-2017.pdf)

Reallocation Policy (http://endhomelessnesskent.org/wp-content/uploads/2017/08/Reallocation-Policy-2016Final.pdf)

Draft Consolidated Application 9-12-17 (http://endhomelessnesskent.org/wp-content/uploads/2017/09/Draft-Consolidated-Application-9-12-17.pdf) Submit changes and edits to the consolidated application to jvail@hwmuw.org by Wednesday, September 20, 2017.

Consolidated Application 9-25-17 with Changes and Attachments (http://endhomelessnesskent.org/wp-content/uploads/2017/09/Consolidated-Application-9-25-17-with-Changes-and-Attachments.pdf)

Funding Review Panel Recommendations

Steering Council Minutes 9-15-2017 (http://endhomelessnesskent.org/wp-content/uploads/2017/09/CTEH-Steering-Council-Minutes-9-15-17.pdf)

2017 Project Priority Listing (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-Project-Priority-Listing.pdf)

Funding Review Panel Minutes from August 24, 2017 (http://endhomelessnesskent.org/wp-content/uploads/2017/09/FRC_Minutes_8_24_17.pdf)

Link to Submitted Applications (http://endhomelessnesskent.org/actions/2017-hud-coc-program-funding-competition/2017-coc-program-project-applications/)

Renewal Project Forms

FY2017 Renewal Instructions (http://endhomelessnesskent.org/wp-content/uploads/2017/08/FY2017RenewalInstructionsPV1.pdf)

2017 Renewal Local Application (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017RenewalLocalAppPV1.docx)

2017 Renewal Score Card (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017Renew_App_ScoreCardPV1.pdf)

New and Bonus Project Forms

FY2017 New and Bonus Instructions (http://endhomelessnesskent.org/wp-content/uploads/2017/08/FY2017New_BonusInstructionsPV1.pdf)

2017 New and Bonus Local Application (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017_New-Bonus_CoCLocalAppPV1.docx)

2017 New and Bonus Score Card (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017New_Bonus_App_ScoreCardPV1.pdf)

Infrastructure Project Forms

2017 Infrastructure Application (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017_HMIS_CELocalAppPV1.docx)

 (http://mindutopia.com)

Jesica Vail

Attention:

The local competition for FY 2017 Federal HUD funding is now open. Renewal, New and Bonus Project applications are all being accepted until **5pm Friday, August 18, 2017**. Please share this information with your networks, as new project applications will be considered in this competition.

Applicants are invited to attend an informational session at **10am on Monday, August 7, 2017 at the United Way** (118 Commerce SW, Grand Rapids).

Attached to this email you will find instructions for new and returning applicants, three types of applications and scorecards for both renewal applications and for new and bonus applications. These documents may also be accessed online at: http://endhomelessnesskent.org/actions/2017-hud-coc-program-funding-competition/ or via Dropbox at: https://www.dropbox.com/sh/7vtd3bz9azo9q4d/AAAut9nP8Nh7jzyAerAEUXpDa?dl=0

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

Thank you

Jesica Vail
Program Manager
118 Commerce Ave SW
Grand Rapids, MI 49503
P: 616.752.8640
E: jvail@hwmuw.org
W: endhomelessnesskent.org

—— GRAND RAPIDS AREA ——
**COALITION TO END
HOMELESSNESS**

2017 HUD CoC Program Funding Competition

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. 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. All information provided by these applicants will be posted here, available for public viewing.

Additionally, there are opportunities for new applicants to join in on the process. This year the Coalition will be eligible to apply for roughly $321,054 in Bonus Projects. Additionally, all interested, 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, with the best success.

2017 Funding Process Timeline (http://endhomelessnesskent.org/wp-content/uploads/2017/08/Local-Application-Timeline-2017.pdf)

Reallocation Policy (http://endhomelessnesskent.org/wp-content/uploads/2017/08/Reallocation-Policy-2016Final.pdf)

Renewal Project Forms

FY2017 Renewal Instructions (http://endhomelessnesskent.org/wp-content/uploads/2017/08/FY2017RenewalInstructionsPV1.pdf)

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Infrastructure Project Forms

2017 Infrastructure Application (http://endhomelessnesskent.org/wp-content/uploads/2017/08/2017_HMIS_CELocalAppPV1.docx)

(http://mindutopia.com)

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Grand Rapids Area Coalition to End Homelessness

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Posts

Grand Rapids Area Coalition to End Homelessness
Published by Jesica Vail [?] · August 4 at 2:12pm · 🌐

The 2017 federal fiscal year funding competition is now open to applicants for permanent housing projects. ==Any organization working to end homelessness is== welcome to apply if they meet federal eligibility requirements. For more information, visit the Coalition website:
http://endhomelessnesskent.org/.../2017-hud-coc-program-fund.../

2017 HUD CoC Program Funding Competition - Coalition to End Homelessness

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. Most projects seek to renew their funding, in order to provide housing stability to those they serve. To do so, they must demonstrate their eff...

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Deborah Huey if those greedy landlords didnt raise their rent to high you wouldnt have this problem. I just moved out of Michigan because of one of the greedy ones, and I lived in a dump
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From:	Jesica Vail
Sent:	Tuesday, September 12, 2017 3:42 PM
To:	Jesica Vail
Cc:	Bree Butler; Wende Randall
Subject:	CoC HUD Application

Good afternoon,

The first draft of the HUD CoC Program Consolidated Application is available for review on the website at: http://endhomelessnesskent.org/actions/2017-hud-coc-program-funding-competition/

Please submit any feedback on the application to me by Wednesday, September 20, 2017.

Thank you,

Jesica Vail
Program Manager
118 Commerce Ave SW
Grand Rapids, MI 49503
P: 616.752.8640
E: jvail@hwmuw.org
W: endhomelessnesskent.org

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☎ ☰

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. 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. All information provided by these applicants will be posted here, available for public viewing.

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Draft Consolidated Application 9-12-17 (http://endhomelessnesskent.org/wp-content/uploads/2017/09/Draft-Consolidated-Application-9-12-17.pdf) Submit changes and edits to the consolidated application to jvail@hwmuw.org by Wednesday, September 20, 2017.

Funding Review Panel Recommendations

2017 Project Priority Listing (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-Project-Priority-Listing.pdf)

Funding Review Panel Minutes from August 24, 2017 (http://endhomelessnesskent.org/wp-content/uploads/2017/09/FRC_Minutes_8_24_17.pdf)

Link to Submitted Applications (http://endhomelessnesskent.org/actions/2017-hud-coc-program-funding-competition/2017-coc-program-project-applications/)

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 (http://mindutopia.com)

Here you can find all of the project applications that were submitted in the HUD FY 2017 competition round.

Renewal Applications

Heartside Non-Profit Housing Corporation/Commerce Apartments Local
(http://endhomelessnesskent.org/wp-
content/uploads/2017/09/HeartsideNonprofitHousingCorporationCommerceApartmentsLocal17.pdf)

Heartside Non-Profit Housing Corporation/Commerce Apartments (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/HeartsideNonprofitHousingCorporationCommerceApartmentsES17.pdf)

Heartside Non-Profit Housing Corporation/Ferguson Apartments Local
(http://endhomelessnesskent.org/wp-
content/uploads/2017/09/HeartsideNonprofitHousingCorporationFergusonApartmentsLocal17.pdf)

Heartside Non-Profit Housing Corporation/Ferguson Apartments (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/HeartsideNonprofitHousingCorporationFergusonApartmentsES17.pdf)

Heartside Non-Profit Housing Corporation/Verne Barry Place Local (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/HeartsideNonprofitHousingCorporationVerneBarryPlaceLocal17.pdf)

Heartside Non-Profit Housing Corporation/Verne Barry Place (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/HeartsideNonprofitHousingCorporationVerneBarryPlaceES17.pdf)

Grand Rapids Housing Commission/Hope Community Local (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/Hope-Community-Renewal-Application-2017.pdf)

ICCF/Permanent Supportive Housing Program Local (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/InnerCityChristianFederationPSHLocal17.pdf)

Kent County/Shelter Plus Care SRA_CR Local (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/CountyofKentShelterPlusCareSRA_CRLocal17.pdf)

Kent County/Shelter Plus Care SRA_CR (http://endhomelessnesskent.org/wp-
content/uploads/2017/09/CountyofKentShelterPlusCareSRA_CRES17.pdf)

Kent County/Shelter Plus Care TRA_CR Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/CountyofKentShelterPlusCareTRA_CRLocal17.pdf)

Kent County/Shelter Plus Care TRA_CR (http://endhomelessnesskent.org/wp-content/uploads/2017/09/CountyofKentShelterPlusCareTRA_CRES17.pdf)

The Salvation Army/Housing Assessment Program Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/TSAHAPLocal17.pdf)

The Salvation Army/Homeless Assistance Program (http://endhomelessnesskent.org/wp-content/uploads/2017/09/TSAHAPES17.pdf)

The Salvation Army/HMIS Dedicated Project Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/TSAHMISLocal17.pdf)

The Salvation Army/HMIS Dedicated Project (http://endhomelessnesskent.org/wp-content/uploads/2017/09/TSAHMISES17.pdf)

The Salvation Army/Coordinated Entry (http://endhomelessnesskent.org/wp-content/uploads/2017/09/TSACErenewalES17.pdf)

YWCA/Project HEAL Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017RenewalLocalAppPV1.pdf)

YWCA/Project HEAL (http://endhomelessnesskent.org/wp-content/uploads/2017/09/ESNAPS-application.pdf)

New Project Applications

Community Rebuilders/Housing Solutions (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-Housing-Solutions-Local-App-Final.pdf)

Community Rebuilders/First Step Housing Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-New-Project-App-from-Reallocated-Funds-First-Step-Housing.pdf)

Community Rebuilders/First Step Housing (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-First-Step-Housing-eSnaps.pdf)

Community Rebuilders/HEROES Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-HEROES-Local-App-Final.pdf)

Community Rebuilders/HEROES (http://endhomelessnesskent.org/wp-content/uploads/2017/09/HEROESeSnaps.pdf)

Community Rebuilders/Keys First Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-Keys-First-Local-App-Final.pdf)

Community Rebuilders/Keys First (http://endhomelessnesskent.org/wp-content/uploads/2017/09/KeysFirsteSnaps.pdf)

Community Rebuilders/LOFT Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-LOFT-Local-App-Final.pdf)

Community Rebuilders/LOFT (http://endhomelessnesskent.org/wp-content/uploads/2017/09/LOFTeSnaps.pdf)

The Salvation Army/Coordinated Entry (http://endhomelessnesskent.org/wp-content/uploads/2017/09/TSACoordinatedEntryLocalNew17.pdf)

Well House/Permanent Supportive Housing (http://endhomelessnesskent.org/wp-content/uploads/2017/09/WellHousePermanentSupportiveHousingLocal17.pdf)

Bonus Project Applications

Community Rebuilders/Housing Solutions 2 Local (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-New-Project-App-Expansion-Bonus-Housing-Solutions-2.pdf)

Community Rebuilders/Housing Solutions 2 (http://endhomelessnesskent.org/wp-content/uploads/2017/09/2017-HousingSoluntionsIIeSnaps.pdf)

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HOMELESSNESS

Applicant and Project Name:

Rater Name:

Project Quality Requirements		
Renewal projects must ensure they continue to meet HUD thresholds for funding.	Maximum Score Possible	125
	Total Project Score	
	Weighted Rating Score	

Section I: Project Effectiveness	Possible Points: 70	Section Score:
3. How many beds are dedicated/prioritized for priority population(s)?		
Veterans		
Chronic		
Domestic Violence	Prioritized by Ranking Tool	
Youth		
Families		
4. Does the project qualify as low barrier?		
Yes	4	
No	0	
5. Does the project meet all Housing First criteria?		
Yes	6	
No	0	
6. Did the project take 100% of all referrals from Coordinated Entry in the past grant year? (Or community process if Category 4 homelessness) (Verified by HMIS Staff, next year verified by HMIS Reports)		
Yes	10	
No	0	
Efficient Use of Funding: These question are for projects that have been operating for at least one year at the time of the NOFA release		
7. What is the project's utilization rate?		
95% or higher	5	
80%-94%	0	
79% or lower	-5	
8. Percent of funding recaptured in last completed grant year		
a. Amount authorized in most recent completed HUD grant year		
b. Remaining balance in eLOCCS		
7% or less	5	
8% or more	0	
9. Were drawdowns made at least quarterly?		
Yes	5	
No	0	
HMIS Participation (Or alternate database for domestic violence projects)		

10. Percentage of APR Data Quality Elements (6a.-6d.) with 5% or less null or missing values		
85% or greater	5	
Less than 84%	0	

HUD Monitoring Findings

11. Does the recipient have any HUD monitoring findings in any of the agency's projects? If yes, findings must be resolved or explained to the satisfaction of the Funding Review Panel for the application to meet standards.	Standard Met: Yes/No	

Impact on Homelessness

12. Evaluate how the project would impact homelessness in the CoC if it were not awarded funding through this competition.		
The project would close and _____ individuals would immediately become homeless if it were to not be funded.		Not Scored Taken into consideration in a tie score situation
Loss of funding would result in loss of housing options and could mean eventual displacement or increase in homelessness.		
Loss of funding would negatively impact services and resources but not a clear loss of housing options.		
Loss of funding would minimally impact the number of housing options or resources available.		

13. Is this project the only CoC funded project with dedicated beds to a particular target population? (Answered by Funding Review based on all submitted applications)		
Yes		Not Scored Taken into consideration in a tie score situation
No		

Serving High Need Populations

15. What percentage of the households met "hard to serve" criteria defined as having zero income at Start/entry? (APR 23)		
PSH		
80% or more	10	
70-%79%	8	
50%-69%	5	
Less than 50%	0	
RRH & TH		
50% or more	10	
40%-49%	8	
30%-39%	5	
Less than 30%	0	

16. What percentage of participants met "hard to serve" criteria defined as having two or more physical or mental health conditions known at Start/entry? (APR 13.A.2)		
PSH		
More than 50%	10	
30%-49%	8	
10%-29%	5	
Less than 10%	0	
RRH & TH		
More than 10%	10	
5%-10%	5	
Less than 5%	0	

17. What percentage of the households served were chronically homeless? (APR Q26a.)		

PSH		
80% or more	10	
70-%79%	8	
50%-69%	5	
Less than 50%	0	
RRH & TH		
15% or more	10	
10%-14%	8	
5%-9%	5	
1%-4%	2	
Less than 1%	0	

Section II: Project Performance	Possible Points: 55 Possible Deductions: -30	Section Score:
Performance Data		
18. Length of Stay		
PSH—Percentage of leavers that remained in project more than 180 days (APR 22a.1)		
95% and more	20	
85%-94%	15	
75%-84%	10	
65%-74%	5	
55%-64%	0	
RRH—Percentage of participants that took 30 days or less from project entry to lease up (CAPER 22C)		
80%-100%	20	
60%-79%	15	
40%-59%	10	
20%-39%	5	
0%-19%	0	
TH- Average length of project stay in days (APR 22b)		
180 or less	20	
181-270	15	
271-390	10	
391-728	5	
More than 728 days	0	
19. Exits to Permanent Housing		
PSH- Percent who remain in or move to PH		
95% or higher	25	
90%-94%	20	
85%-89%	15	
80%-84%	10	
75%-79%	5	
Less than 75%	0	
RRH & TH- Percent who exit to PH		
95% or higher	25	
90%-94%	20	
85%-89%	15	
80%-84%	10	

75%-79%	5	
Less than 75%	0	

20. New or Increased Income and Earned Income

a. PSH Project Stayers: New or increased earned income (APR 19a.1)

8% and higher	2.5	
5%-7%	1.5	
Less than 5%	0	

b. PSH Project Stayers: New or increased other (non-employment) income (APR 19a.1)

50% and higher	2.5	
25%-49%	1.5	
Less than 25%	0	

c. PSH Project Leavers: New or increased earned income (APR 19a.2)

8% and higher	2.5	
5%-7%	1.5	
Less than 5%	0	

c. RRH and TH Project Leavers: New or increased earned income (APR 19a.2)

30% and higher	5	
20%-29%	2.5	
Less than 20%	0	

d. PSH Project Leavers: New or increased non-employment income (APR 19a.2)

50% and higher	2.5	
25%-49%	1.5	
Less than 25%	0	

d. RRH and TH Project Leavers: New or increased non-employment income (APR 19a.2)

10% and higher	5	
5%-9%	2.5	
Less than 5%	0	

Section III: Completion of Application	Possible Points: 0 Deductions: -20 Minimum: -10	Section Score:
21. Is the application complete and accurate?		
Yes	0	
No	-5	
22. Are all required attachments provided?		
Yes	0	
No	-5	
23. Was the application submitted by the deadline?		
Yes	0	
No	-10	

2017 COC PROGRAM COMPETITION
NEW and BONUS PROJECT SCORECARD
HOUSING PROJECTS

GRAND RAPIDS AREA
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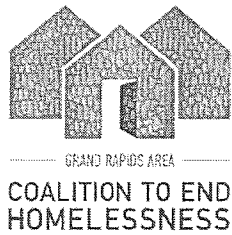Applicant and Project Name:

Rater Name:

Project Quality Requirements			
All new and bonus projects must pass threshold requirements before being considered for funding on the merit of the project. Threshold requirements are pass/fail rather than scored.	Maximum Score Possible		145
	Total Project Score		
	Weighted Rating Score		
Section I: Design of Housing and Supportive Services		Possible Points: 25	Section Score:
1.a. Description of project: Does it meet the needs of the community and persons experiencing homelessness?			
Score given according to how well the project design demonstrates: Understanding of the needs of the target population to be served Type, scale, and location of the housing fit the needs of those to be served Type and scale of supportive services, regardless of funding source How assistance in obtaining mainstream benefits is provided Performance measures that meet or exceed HUD HEARTH or CoC benchmarks		15	
1.b. Description of the plan to assist in participants securing and maintaining PH that is safe, affordable, accessible and acceptable to their needs.		5	
1.c. Description of how participants will be assisted to rapidly increase employment and/or income to maximize their ability to live independently		5	
Section II: Experience		Possible Points: 40	Section Score:
2. Experience of the applicant (and any sub-recipients) in working with the proposed population and in providing housing similar to that proposed in the application.		15	
3. Description of experience with utilizing a Housing First approach			
Include eligibility criteria, process for accepting new participants, process and criteria for exiting participants. Must demonstrate that there are no preconditions to entry (substance use, income, criminal records, marital status, familial status, actual or perceived sexual orientation, gender identity. Must show able to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated only in most severe cases.		10	
4. Description of applicant experience in utilizing federal funds.			
Score according to how well applicant can demonstrate past proficiency in utilizing federal funds.		5	
5. Description of the determination of type, amount and duration of rental assistance for participants.			
Answers should explain use of the progressive engagement and strength based philosophies as well as plans to prevent persons from exiting into homelessness or becoming homeless post project exit.		10	

Section III: Project Effectiveness	Possible Points: 20	Section Score:
6. Does the project commit to taking all referrals through the community's Coordinated Assessment process?	5	
7. Will all participating households served in this project be recorded in HMIS or an equivalent database for Domestic Violence, in accordance with the community's Data Quality Standards?	5	
8. Description of a plan for rapid implementation of the project, documenting how the project will be ready to begin housing the first participant. Provide a detailed schedule of proposed activities for 60 days, 120 days and 180 days after grant award.	10	

Section IV: Organizational Capacity	Possible Points: 20	Section Score:
9. Describe agency key staff positions and qualifications of individuals who will carry out the project	10	
10. Describe the agency's financial management system, including financial reporting, record keeping, accounting systems, payment procedures, procurement processes, and audit requirements:	10	

Section V: Financial Information	Possible Points: 40	Section Score:
11. Do project costs appear reasonable when compared to project costs of similar project types?	5	
12. Audit		
a. Most recent audit found no exceptions to standard practices	3	
b. Most recent audit identified agency as "low risk"	3	
c. Most recent audit indicates no findings	4	
13. Documented match amount	5	
14. Budgeted costs are reasonable, allocable, and allowable	20	

Completion of Application		Possible Points: 0 Deductions: -10	Section Score:
Are all required attachments provided?			
	Yes	0	
	No	-5	
Was the application submitted by the deadline?			
	Yes	0	
	No	-5	

2017 COC PROGRAM COMPETITION
RENEWAL PROJECT APPLICATION
HOUSING PROJECTS

GRAND RAPIDS AREA
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HOMELESSNESS

AGENCY PROFILE	
Legal Name of Agency	
Project Name	
Contact Person	
Title	
Address	
Email	
Phone	

Check one:

☐   Permanent Supportive Housing

☐   Rapid Re-Housing

☐   Transitional Housing

Authorized Representative: *I hereby certify that the information contained in this proposal is true and accurate. Any falsification of information will render the application void, and the application will not be accepted. This application has been reviewed and authorized for submission by the agency's board of directors as of the date indicated.*

Name:	Title:
Date of Board Authorization:	
Date of Anticipated Board Authorization:	

All projects requesting renewal must demonstrate they have met minimum project eligibility, capacity, timeliness, and performance standards to be considered for funding.

GENERAL PROJECT INFORMATION

1a. Provide a narrative describing how the project's performance met the plans and goals established in the current project's application the project's performance in assisting program participants to achieve and maintain independent living, and record of success. (Include target populations and preferences as specified and/or allowed by the Notice of Funding Availability (NOFA) under which the project was initially funded.)

1b. Use the last completed grant year APR for this and all other data/outcome measure questions.

Number of Units	Number of Stayers	Number of Leavers
Click here to enter text.	Click here to enter text.	Click here to enter text.

2. Has the project had any significant changes since the last funding approval
   Yes/No   if "yes" complete the chart below to indicate the change.

Check change type		Previous	New
☐	Decrease in the number of persons served		
☐	Change in number of units		
☐	Change in project site location		
☐	Change in target population		
☐	Change in component type		
☐	Change in grantee/applicant		
☐	Line item or cost category budget changes more than 10%		
☐	Other: Click here to enter text.		
If change was made include as many of the following that apply as attachments to your application:			
Attached (check)			
☐	Attachment: Written communication to HUD requesting the significant change		
☐	Attachment: HUD's written approval of the change requested		
☐	N/A: HUD has not yet provided written approval of the requested change		

3. Does the project serve priority populations (Veterans, Chronically Homeless, Families, Youth, Domestic Violence Survivors)? Enter the number of units dedicated or prioritized for each population at turnover.

	Number of Units		
	Dedicated	Dedicated Plus	Prioritized
Veterans	Click here to enter text.	Click here to enter text.	Click here to enter text.
Chronically Homeless	Click here to enter text.	Click here to enter text.	Click here to enter text.
Families	Click here to enter text.	Click here to enter text.	Click here to enter text.
Youth	Click here to enter text.	Click here to enter text.	Click here to enter text.
Domestic Violence	Click here to enter text.	Click here to enter text.	Click here to enter text.

4. Low Barrier

To earn points as Low Barrier, the project must answer affirmatively to all the following questions

Does the project ensure that participants are NOT screened out (or denied project entry) due to the following:	
Having too little or not enough income	Yes/No
Active substance use or history of substance abuse	Yes/No
Having a criminal record (other than for state-mandated restrictions)	Yes/No
Domestic violence (requiring survivor to take specific actions or demonstrate distance from assailant)	Yes/No

5. Housing First

In addition to the answers above, a project must also answer affirmatively to the following questions to qualify as Housing First.

Does the project work to ensure that participants are NOT terminated from the program due to the following:	
Failure to participate in supportive services	Yes/No
Failure to make progress on a service plan	Yes/No
Loss of income or failure to improve income	Yes/No
Being a victim of domestic violence	Yes/No
Any other activity not typically covered in a lease agreement typically found in the project's geographic area.	Yes/No
Does the project quickly move participants into permanent housing?	Yes/No

6. Did the project take 100% of all referrals from Coordinated Entry in the past grant year? (Or community process if Category 4 homelessness) (Verified by HMIS Staff, next year verified by HMIS Reports) Yes/No

Efficient Use of Funding

7. What was the project's utilization rate? (*Average of Quarterly Point- in-Time Counts in APR 9 divided by total contracted units. New Projects will only use average of last two quarters in the operating year.*) Click here to enter text.

8. Expenditure of Funds: Use last **completed** HUD FY year. Projects that have not completed a grant year should not answer.

a. Total amount authorized within eLOCCS	Click here to enter text.
b. Remaining balance in eLOCCS	Click here to enter text.
c. Percentage recaptured Divide answer b. by answer a. and multiply by 100	Click here to enter text.

9. Were drawdowns made to eLOCCS at least quarterly? (*Demonstrated in eLOCCS attachment*)

Choose an item.

HMIS Participation

10. Indicate how many APR Data Quality Elements (DQE) have 5% or less null or missing values *(APR Q06)*:

Data Quality Element APR 6a.-6d.			
Number of elements with 5% or less null or missing values			
DQE 6a.	DQE 6b.	DQE 6c.	DQE 6d.
Choose an item.	Choose an item.	Choose an item.	Choose an item.
Total the numbers above, divide by 16, multiply by 100 for a percent: Click here to enter text.			

HUD Monitoring

11. a. Does the recipient have any HUD monitoring findings in any of the agency's projects? Yes/No

If yes, explain below findings in detail for the Funding Review Panel. Include details on the nature of the finding, resolution and corrective actions taken, if any.

Click here to enter text.

b. Has your organization been monitored by HUD in the past three (3) years? Yes/No

If yes, include as attachments: Monitoring report from HUD, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

If no, provide most recent monitoring by an entity other than HUD for federal or state funding (ESG, CDBG, etc) and include as attachments: Monitoring report, your organization's response to any

findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

Impact on Homelessness

12. Please evaluate how the project would impact homelessness in the CoC if it were not awarded funding through this competition.

☐	The project would close and _____ individuals would immediately become homeless if it were to not be funded.
☐	Loss of funding would result in loss of housing options and could mean eventual displacement or increase in homelessness.
☐	Loss of funding would negatively impact services and resources but not a clear loss of housing options.
☐	Loss of funding would minimally impact the number of housing options or resources available.

13. Is this project the only CoC funded project with dedicated beds to a particular target population? *Answered by Funding Review based on all submitted applications*

14. This year, funds that are reallocated may be added to renewal projects to increase the number of households served. If funding is available, would this project be a good candidate to add additional funding to and how might it be used?

Click here to enter text.

Serving High Need Populations

15. What percentage of the households served met "hard to serve" criteria defined as having zero income at Start/entry? *(APR 23. Add values for No Income and divide by Total in last row)*:

Click here to enter text.

16. What percentage of the households served met "hard to serve" criteria defined as having two (2) or more physical or mental health conditions known at Start/entry *(APR 13.a.2. add totals for one, two and three or more conditions, then divide by total)*:

Click here to enter text.

17. What percentage of the households served were chronically homeless? *(APR Q26a. divide total chronically homeless by total households)*:

Click here to enter text.

Section II. Project Performance

18. Length of Stay

a. Permanent Supportive Housing: Calculate the percentage of leavers that remained in project more than 180 days *(APR 22a.1)*

Click here to enter text.

b. Rapid Re-Housing: Calculate the percentage of participants that took 30 days or less from project entry to lease up *(CAPER 22C)*

Click here to enter text.

c. Transitional Housing: Calculate the average length of project stay in days *(APR 22b)*

19. Exits to Permanent Housing

a. Permanent Supportive Housing: Calculate the percentage of participants who remained in project, or exited to permanent housing destinations. *(Total Persons Exiting to Positive Housing Destinations APR Q23.a.+ Q23b. + Stayers 5.a.8/ [Total Served 5.a.1. – Excluded Q23.a. + Q23.b.])*

Click here to enter text.

b. Rapid Re-Housing: Calculate the percentage of participants who exited to permanent housing destinations *(Total Persons Exiting to Positive Housing Destinations APR Q23.a.+ Q23b./ [Total Leavers 5.a.5. – Excluded Q23.a. + Q23.b.])*

Click here to enter text.

c. Transitional Housing: Calculate the percentage of participants who exited to permanent housing destinations *(Total Persons Exiting to Positive Housing Destinations APR Q23.a.+ Q23b./ [Total Leavers 5.a.5. – Excluded Q23.a. + Q23.b.])*

Click here to enter text.

20. New or Increased Income and Earned Income

a. PSH Only Project Stayers: What percent of project stayers had new or increased earned income with in the project contract year? *APR 19a.1*

Click here to enter text.

b. PSH Only Project Stayers: What percent of project stayers had new or increased other (non-employment) income? *APR 19a.1*

Click here to enter text.

c. Project Leavers: What percent of project leavers had new or increased earned income? *APR 19a.2*

Click here to enter text.

d. Project Leavers: What percent of project leavers had new or increased other (non-employment) income? *APR 19a.2*

Financial Information

PROJECT BUDGET

Activity	Requested Funds	% of Requested Funds	Other Funding	Total Project Cost
Acquisition		%		
New Construction		%		
Rehabilitation		%		
Leasing		%		
Rental Assistance		%		
Supportive Services		%		
Operating Costs		%		
HMIS		%		
Project Administration (limited to 7%)		%		
Total Project Cost				

Attachment A

Identify all match and leveraging funds. Only those dollars or non-cash contributions (in-kind) that directly support the project should be listed. This may include federal, state, or local government funds, private funds, grants, and/or other sources, including donations. Worksheet should reflect information in eSnaps application.

Match must be at least 25% of total funding requested.

Resource	Cash or In Kind	Committed or Planned/ Pending	Available (MM/YY)	Amount/ Value	% of HUD Project Award	Serves as CoC Program Match? (Y/N)
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%	Yes/No
	Cash/Kind	C/PP	MM/YY		%.	Yes/No
		Total leveraged from other sources			%	

Attach additional forms as necessary

Attachment B

Attachments listed below are required but unscored. Failure to include any documentation that is required may result in application being out of the competition.

All projects must include:

☐ Annual Progress Report (APR) for the project's most recent completed contract year. (If a full year has not yet been completed for the project, attach an APR with an end date of 6/25/2015) Other structured outcome report for non-HMIS participating agencies are allowed (i.e. domestic violence agencies).

☐ Line of Credit Control System (LOCCS) report showing drawdowns and final balance

☐ Project Application submitted in *e-snaps*

Each applicant must include one of the following two:

☐ Monitoring report from US Department of Housing and Urban Development (HUD)

☐ Monitoring report from an entity other than HUD for federal or state funding (ESG, CDBG, etc)

If relevant include:

☐ Organization's response to any findings

☐ Documentation from HUD (or other entity) that finding or concern has been satisfied

☐ Any other relevant documentation

☐ Written communication to HUD requesting the significant change indicated in question 2.

☐ HUD's written approval of the change requested in question 2.

Attachment C

HUD General Section Certificates

The agency certifies to the Grand Rapids Area Coalition to End Homelessness that it and its principals are in compliance with the following requirements as indicated by checking the box.

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

☐ *Equal Access to Housing in HUD Programs Regardless of Sexual Orienation 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.

☐ *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.

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

☐ *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.

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

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

☐ *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.

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

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

☐ *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 NOFA are subject to environmental review by a responsible entity under HUD regulations at 24 CFR part 58.

☐ *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.

☐ *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.

☐ *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.

☐ Attestation that all attachments as required by HUD are uploaded in *e-snaps.* See Notice of Funding Availability for the 2015 Continuum of Care Program Competition FR-5900-N-25; Section VI. C. 2.

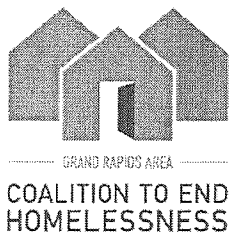This list is not exhaustive of all HUD requirements. Applicants are encouraged to review the 2015 General Section, found at: http://portal.hud.gov/hudportal/HUD?src=/program_offices/administration/grants/fundsavail/2015gen sec to ensure eligibility.

Agency:

Acknowledged By:

Title:

Date:

2017 COC PROGRAM COMPETITION
NEW/BONUS PROJECT APPLICATION

GRAND RAPIDS AREA
COALITION TO END
HOMELESSNESS

AGENCY PROFILE	
Legal Name of Agency	
Project Name	
Contact Person	
Title	
Address	
Email	
Phone	

Check one:

☐ Permanent Supportive Housing for Chronically Homeless

☐ DedicatedPLUS Permanent Supportive Housing

☐ Rapid Re-Housing

☐ Joint Transitional Housing-Rapid Re-Housing

☐ Support Services Only Coordinated Entry

☐ Support Services Only HMIS

Check one:

☐ New Project Application from Reallocated Funds

☐ Bonus Project Application

Authorized Representative: *I hereby certify that the information contained in this proposal is true and accurate. Any falsification of information will render the application void, and the application will not be accepted. This application has been reviewed and authorized for submission by the agency's board of directors as of the date indicated.*

Name:	Title:
Date of Board Authorization:	
Date of Anticipated Board Authorization:	

ELIGIBILITY THRESHOLDS

Basic HUD Eligibility Thresholds must be satisfied before the CoC may consider a new or bonus project application for funding.

1. Please indicate by checking the boxes if the agency has any of the following:

   a. Outstanding obligation to HUD that is in arrears for which a payment schedule has not been agreed upon;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

   b. Debarments and/or Suspensions- In accordance with 2 CFR 2424, no award of federal funds may be made to debarred or suspended applicants, or those proposed to be debarred or suspended from doing business with the federal government;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

   c. Unresolved monitoring findings or outstanding (agency or HUD) audit findings;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

   d. Inadequate financial management or accounting practices within the past three years;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

   e. Evidence of untimely expenditures on prior award;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

   f. Major capacity issues that have significantly impacted the operation of a project and its performance within the past three years;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

   g. Issues impacting the timeliness in reimbursing subrecipients for eligible costs;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

   h. Served ineligible persons, expended funds on ineligible costs, or failed to expend funds within statutorily established timeframes within the past three years;
   ☐ Yes   ☐ No   If yes, please explain: Click here to enter text.

2. Does applicant have a financial management system that meets federal standards as described at 2 CFR 200.302? ;
☐ Yes   ☐ No   Please describe: Click here to enter text.

3. Does the agency employ or contract services of an accountant who is familiar with Generally Accepted Accounting Principles (GAAP)?
☐ Yes   ☐ No

4. Does the agency obtain an annual audit by an independent certified public accountant?
☐ Yes   ☐ No

5. Has your organization been monitored by HUD in the past three (3) years? Yes/No
   If yes, include as attachments: Monitoring report from HUD, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.
   If no, reference most recent monitoring by an entity other than HUD for federal or state funding (ESG, CDBG, etc) and include as attachments: Monitoring report, your organization's response to any findings, documentation from HUD that finding or concern has been satisfied, and any other relevant documentation.

All projects must include as attachments:

☐ Proof of 501(c)3 status from the IRS

☐ Financial statements, including cash flow statement

☐ Non-profit Corporation Update (2013) or equivalent

☐ DUNS number and Standard Form 424 (SF-424)

☐ Active registration in SAM

☐ Most recent audit by an independent certified public accountant

☐ Monitoring report by HUD or other federal or state funding entity, including any responses if there were findings noted in the report

☐ Project Application in e-Snaps (If available)

☐ Preliminary Rendering and Site Plan (if applicable)

NEW AND BONUS PROJECT APPLICATION

See scorecard for scoring criteria in each question.

PROJECT OVERVIEW

1.a. Provide a description that addresses the entire scope of the proposed project. (Include target population(s), the plan for addressing identified needs/issues of the identified target population, projected outcomes, how the project type, scale and location of housing and support services fit the needs of the identified target population.)

Click here to enter text.

1.b. Describe the plan to assist in participants securing and maintaining permanent housing that is safe, affordable, accessible and acceptable to their needs.

Click here to enter text.

1.c. Describe how participants will be assisted to rapidly increase employment and/or income to maximize their ability to live independently.

Click here to enter text.

EXPERIENCE

2. Describe the experience of the applicant and sub-applicants in working with the proposed target population and in providing housing similar to that proposed in the application.

Click here to enter text.

Chronically homeless	☐	Families	☐
Veterans	☐	Youth (18-25)	☐

3. Describe the experience of the applicant and sub-applicants with utilizing a Housing First approach.

Click here to enter text.

4. Describe the experience of the applicant and sub-applicants in utilizing federal funds.

Click here to enter text.

5. Describe the process for the determination of the type, amount, and the duration of rental assistance for participants.

Click here to enter text.

6. Does the project commit to taking all referrals through the community's Coordinated Assessment process?

Yes/No   If no, explain: Click here to enter text.

7. Will all participating households served in this project be recorded in HMIS or an equivalent database for Domestic Violence, in accordance with the community's Data Quality Standards?

Yes/No   If no, explain: Click here to enter text.

8. Describe the plan for rapid implementation of the project, documenting how the project will be ready to begin housing the first participant. Provide a detailed schedule of proposed activities for 60 days, 120 days and 180 days after grant award.

Click here to enter text.

ORGANIZATIONAL CAPACITY

9. Describe agency key staff positions and qualifications of individuals who will carry out the project:
Click here to enter text.

10. Describe the agency's financial management system, including financial reporting, record keeping, accounting systems, payment procedures, procurement processes, and audit requirements:
Click here to enter text.

Scope of Proposed Project		Proposed Households Served	
Total units	Click here to enter text.	Households with at least one adult and one child	Click here to enter text.
Total beds	Click here to enter text.	Adult households without children	Click here to enter text.

PROJECT BUDGET

Activity	Requested Funds	Other Funding	Total Project Cost	% of Total Budget
Acquisition				%
New Construction				%
Rehabilitation				%
Leasing				%

Rental Assistance				▓ %
Supportive Services				▓ %
Operating Costs				▓ %
HMIS				▓ %
Project Administration (limited to 7%)				▓ %
Total Project Cost				

Complete Match and Leveraging worksheet, Attachment A.

See scorecard for scoring criteria based on budget information, questions 11-14

FY 2017 Continuum of Care Program
Local Application Guidelines and Instructions
Housing and Infrastructure Renewal Applications

The Grand Rapids Area Coalition to End Homelessness (Coalition) invites applications under HUD's FY 2017 Continuum of Care (CoC) Program 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 2017 Continuum of Care Program by the U.S. Department of Housing and Urban Development.

CoC PROGRAM PURPOSE AND OBJECTIVES
The purpose of the CoC Program as established by the U.S. Department of Housing and Urban Development (HUD) is to:
- Promote community-wide commitment to the goal of ending homelessness
- Provide funding for efforts by nonprofit providers, States, and local governments to quickly re-house homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness
- Promote effective utilization of mainstream programs by homeless individuals and families
- Optimize self-sufficiency among individuals and families experiencing homelessness
- Provide funding to support the CoC structure and process

FY 2017 CoC APPLICATION TIMING
At this time, the Coalition will concurrently consider both renewal project applications as well as new projects (from reallocated funding) and bonus projects. Those seeking to renew an existing project should continue following these directions. For new and bonus projects, follow the New and Bonus Applications Instructions published on the Coalition website.

The Coalition will submit one collaborative "Continuum of Care Application" for 2017 - the portion of the Coalition's application that reflects community-wide planning and performance. The score received for this application will be applied to funding requested for FY 2017 funds. It is expected that by September 28, 2017, the Coalition will submit completed HUD Project Applications and Priority Listings for the FY 2017 CoC Program competition. A more detailed timeline can be found on page 9 of this document.

HUD FUNDING AMOUNT
For FY 2017 renewal projects, the Coalition is eligible to apply to HUD for a maximum $5,350,900, which constitutes the Annual Renewal Demand (ARD). The ARD is the total sum of all renewal projects eligible for renewal.

HUD will continue to require projects be ranked in two (2) tiers representing financial thresholds. It is possible that lower scoring Collaborative Applicants will not have all projects ranked in the second tier funded. CoC Planning is not ranked again this year, and therefore the funds are not included in either Tier.

Any agency interested in voluntarily reallocating funding to better reach the goal of ending homelessness is encouraged to create a new project that will better achieve that goal. The types of new projects allowed are outlined in the *FY 2017 NOFA FR-6100-N-25* (https://www.hudexchange.info/resource/5419/fy-2017-coc-program-nofa/) on page 10. These are: new permanent supportive housing projects that serve chronically homeless individuals and families, or meet the new criteria of "DedicatedPLUS"; new rapid rehousing projects for homeless individuals and families, including unaccompanied youth, coming directly from the streets or emergency shelter, fleeing domestic violence situations and other persons meeting the criteria of paragraph (4) of the definition of homelessness, residing in a transitional housing unit within a joint RRH/TH project; or receiving services through a VA funded homeless assistance program; new projects for dedicated HMIS; or new Supportive Services Only (SSO) projects for centralized or coordinated assessment systems. Additionally this year, new project applications will be considered for a new component type: Joint Transitional Housing and Rapid Re-Housing (TH and RRH). (See page 6 of this application for more detail.)

The amount anticipated to be available in PH Bonus Projects is $321,054 and more than one PH Bonus project may be submitted to HUD by the CoC. Allowable Bonus Projects are: new permanent supportive housing projects that serve chronically homeless persons, or are Dedicated PLUS; new rapid rehousing projects serving the same population as noted above; Joint TH-RRH component projects as defined in the NOFA section III.A.3.h.

New this year, existing renewal projects may seek to add funding to grow their renewal projects without being required to submit the existing project for reallocation as a new project. Interested applicants should complete the renewal application for their existing project as well as a new project application for the additional amount they seek. If both are approved and submitted to HUD by the Coalition, and HUD awards both grants, HUD will merge both requests into the one existing project after the conditional award has been granted. See page 12 of the NOFA for more details.

Agencies wishing to reallocate and apply as a new project or wishing to submit a bonus project application have the ability to do so at this time. All agencies considering applying for a new project should familiarize themselves with HUD threshold requirements that can be found in the FY 2017 NOFA on https://www.hudexchange.info/e-snaps/fy-2017-coc-program-nofa-coc-program-competition/

HUD PROJECT SELECTION PRIORITIES

Given the limited availability of funding, HUD asks communities to ensure CoC resources are used in the most strategic way possible.

HUD's Homeless Policy and Program Priorities this for the 2017 FY are as follows, not in order of importance:
- Ending Homelessness for All Persons
- Creating a Systemic Response to Homelessness
- Strategic Resource Allocation
- Using a Housing First Approach

Communities receiving higher scores on the FY 2017 CoC Application will be in the strongest position to have Tier 2 projects, and PH Bonus projects funded. The selection process will seek to maximize the community's ability to secure and retain funds by ranking projects in line with HUD priorities. This year, bonus projects submitted will not be ranked higher than renewal projects.

DEVELOPMENT OF LOCAL PRIORITY LISTING

The Coalition's Funding Review Committee is responsible for reviewing all applications and making funding recommendations to the Steering Council for approval. The committee is responsible for determining ranking, or Priority Listing, of the HUD CoC projects to be included in the application.

Further information regarding eligible applicants and projects; grant terms; and project evaluation criteria and ranking is detailed in subsequent sections of this document. Local priorities will focus on funding for permanent housing programs and infrastructure that are essential to helping people experiencing homelessness obtain permanent housing as quickly as possible and with appropriate levels of services to support housing stability, as well as building available housing resources for target populations.

The Funding Review Committee currently consists of representatives from the following organizations: ACSET, Grand Rapids Community Foundation, Fair Housing Center of West Michigan, Degage Ministries, Legal Aid of West Michigan, and Reliance Community Care Partners. The panel also includes a local affordable housing advocate who does not represent a particular agency.

Further information regarding eligible applicants and projects; grant terms; and project evaluation criteria and ranking is detailed in subsequent sections of this document.

PROJECT MATCH REQUIREMENTS

All eligible funding costs except leasing must be matched with no less than a 25% cash or in-kind match. Project administration must be matched. For further information, see 24 CFR 578.73.

REQUEST FOR PROPOSAL SUBMISSION

Applicants must submit to the Coalition a completed Local Application Form in the manner detailed below. Further, for an application to be considered complete, an applicant must also submit a project application via HUD's "e-snaps" system.

1) Local Application Form. Applicants are to complete the Local Application Form electronically. Handwritten forms will not be accepted. The form is locked, meaning answers must be contained within the space allowed. Click inside the boxes to respond, and tab to move to the next required field. To check a box, simply click inside the shape.

All questions within the application pertaining to data or outcomes reference either the Annual Performance Report (APR) or CAPER in HMIS, or funding tracked in eLOCCS. Applicants should use reports for the last completed funding year for the project. Projects that had not completed a full year of operation by this application due date are not required to answer those questions. Domestic Violence service providers should use data from a system comparable to HMIS.

E-mail the completed application and all required attachments to jvail@hwmuw.org. You will receive a reply confirming the application was received. Please note this response confirms receipt only. No review will have occurred at this point.

Local Application forms are to be saved as Word Documents or saved pdf. documents. Files should be saved by the name: "AgencyNameProjectNameLocal17" wherein the Agency and Project names should be inserted where indicated.

2) E-snaps. In addition to the Local Application, 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.onecpd.info/e-snaps/guides/coc-program-competition-resources/.

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 as Word Documents or saved pdf. documents (no scanned documents) should be submitted. Files should be

saved by the name: "AgencyNameProjectNameES17" 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 eSnaps application for the agency.

APPLICATION DEADLINE: 5:00 P.M., FRIDAY, August 18, 2017

Late applications will not be accepted.

SIGNATURE
An original signature is not required, but the name and title of the authorized 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:

Jesica Vail
616-752-8640
jvail@hwmuw.org

There is no guarantee of reply for inquires made after 5:00 p.m., Thursday, August 17, 2017.

IMPORTANT NOTICE

Applicants are strongly encouraged to review e-snaps requirements well in advance of the application deadline as there are items (e.g. changing the Authorized Representative) that may require additional processing time.

Further, applicants are strongly encouraged to review HUD's Notice of Funding Availability (NOFA) for the FY 2017 CoC Program Competition and other resources referenced in this document. This document is not intended to serve as a substitute for HUD's NOFA or the CoC Program Interim Rule.

ELIGIBILITY INFORMATION

The CoC Program Interim Rule (24 CFR Part 578) provides detailed information about allowable activities, documentation requirements, and other regulatory requirements with which applicants should be familiar. HUD's FY 2017 NOFA further restricts allowable activities and sets additional requirements. The Interim Rule and NOFA will govern use of all grant funds applied for under this solicitation. Requirements summarized here are not all inclusive. Applicants are strongly encouraged to review the Interim Rule and NOFA directly and in detail.

ELIGIBLE PROJECT APPLICANTS
- Include Coalition member agencies that meet the CoC Program definition of eligible applicant per 24 CFR 578.15 (i.e. nonprofit organizations, States, local governments, or instrumentalities of State or local governments), and public housing agencies, as such term is defined in 24 CFR 5.100. Per the CoC Program Interim Rule, for-profit entities are not eligible to apply for grants or to be subrecipients of grant funds.
- Must have a DUNS number and be registered in the System for Award Management (SAM), formerly Central Contractor Registration (CCR).
- Must meet all statutory and regulatory requirements in the McKinney–Vento Homeless Assistance Act, as amended, and CoC Program Interim Rule.

Renewal Applicants
- Must have a signed CoC Program grant agreement with HUD that will expire between January 1, 2017 and December 31, 2017 for the project for which funds are requested. (Note: Prospective applicants are responsible for knowing when grant terms expire and must anticipate when to apply for renewal funding. If an applicant fails to apply for a renewal in the appropriate year, it will not be eligible for renewal in the next funding competition.)
- May not request more for each renewing project than the FY 2017 Annual Renewal Amount approved by HUD for that project.

ELIGIBLE PROJECTS

Renewal Projects
- Must be included on the Grant Inventory Worksheet (GIW) accepted by HUD as part of the FY 2017 CoC Program registration process.
- May not request total funding in excess of the Annual Renewal Amount approved by HUD for that project in the renewal application. Any additional funding requested must be done through a new project application.
- Are renewable as set forth in 24 CFR 578.33 of the interim rule to continue on-going leasing, operating, supportive services, rental assistance, HMIS, and project administration costs.

New Projects
- Will only be considered from applicants within the FY 2017 Collaborative Application process for:
  - Permanent supportive housing projects that meet the requirements of Dedicated PLUS as defined in Section IIIA.3.d. of the NOFA or new permanent supportive housing projects where 100% of the beds are dedicated to chronic homelessness;
  - Rapid re-housing projects created for individuals, families, including unaccompanied youth who meet the following criteria: a) residing in a place not meant for human habitation, b) residing in an emergency shelter, c) persons meeting the criteria of category 4 of the definition of homelessness (including fleeing or attempting to flee domestic violence), d) residing in transitional housing funded by a Joint TH and PH-RRH component project, and e) receiving services from a VA-funded homelessness assistance program who are experiencing homelessness and who enter directly from the streets or emergency shelter.
  - Joint TH and PH-RRH projects as defined in Section III.A.3.h. in the NOFA to better serve homeless families and individuals or families fleeing or attempting to flee domestic violence.
  - Dedicated HMIS project for the costs at 24 CFR 578.37(a)(2) that can only be carried out by the HMIS Lead, which is the recipient or subrecipient of an HMIS grant, and is listed on the HMIS Lead form in the CoC Applicant Profile in e-Snaps.
  - Supportive services only project to develop or operate a new centralized or coordinated assessment system.

- May only be created through reallocation of dollars from existing CoC Program-funded projects.

Permanent Housing Bonus Projects
- Will only be considered from applicants within the FY 2017 Collaborative Application process for the first three types of allowed projects listed above under "New Projects".
- New projects created through a permanent housing bonus must meet the project eligibility and threshold requirements established by HUD in Section V. of the NOFA.
- More than one Bonus project may be submitted by the Coalition for FY 2017 funding.

GRANT TERM
All renewal project applications, including rental assistance, are limited to 1-year grant terms and 1-year of funding. The initial grant term for new projects created through reallocation can vary. Refer to the NOFA for detailed information (Section I.V. Award Information, 2. Distribution of Funds, b. New Project Grant Terms).

PROJECT REVIEW AND RANKING

All applicants/projects must meet basic threshold requirements. The Coalition reserves the right to reject any application that is not consistent with the CoC Program Interim Rule and/or the FY 2017 NOFA.

PROJECT EVALUATION CRITERIA
Local project evaluation criteria are guided primarily by relevant HUD policy priorities and Application Review Criteria identified in the FY 2017 NOFA. The specific criteria that will be used are reflected in the New and Bonus Project Application and Scorecard.

PROJECT RANKING
Once applications are reviewed and scored using the above-described criteria, projects will be ranked by score and HUD Policy Priorities. Adjustments may be made to the rankings to:

- Maximize funds for projects identified in Tier I.
- Ensure adequate resources for system infrastructure by ranking HMIS and centralized intake projects within Tier I.

RESOURCES

Document Name	Document Link
FY 2017 CoC Funding Process Opening Announcement	https://www.hudexchange.info/news/fy-2017-continuum-of-care-coc-program-competition-e-snaps-is-now-available/
FY 2017 CoC Program Competition Notice of Funding Availability (NOFA)	https://www.hudexchange.info/resources/documents/FY-2017-CoC-Program-Competition-NOFA.pdf
CoC Program Competition: e-snaps Resources	https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources/
Continuum of Care Program: Interim Final Rule	https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/

Jesica Vail

Attention:

The local competition for FY 2017 Federal HUD funding is now open. Renewal, New and Bonus Project applications are all being accepted until **5pm Friday, August 18, 2017**. Please share this information with your networks, as new project applications will be considered in this competition.
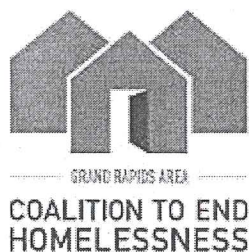
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For questions about the application process, please contact me at the information provided below.

Thank you

Jesica Vail
Program Manager
118 Commerce Ave SW
Grand Rapids, MI 49503
P: 616.752.8640
E: jvail@hwmuw.org
W: endhomelessnesskent.org

GRAND RAPIDS AREA
**COALITION TO END
HOMELESSNESS**

2017 HUD CoC Program Funding Competition

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. 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. All information provided by these applicants will be posted here, available for public viewing.

Additionally, there are opportunities for new applicants to join in on the process. This year the Coalition will be eligible to apply for roughly $321,054 in Bonus Projects. Additionally, all interested, 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, with the best success.

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(http://mindutopia.com)

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@grcoalition

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Posts

Grand Rapids Area Coalition to End Homelessness
Published by Jesica Vail [?] · August 4 at 2:12pm · 🌐

The 2017 federal fiscal year funding competition is now open to applicants for permanent housing projects. ==Any organization working to end homelessness is== welcome to apply if they meet federal eligibility requirements. For more information, visit the Coalition website:
http://endhomelessnesskent.org/.../2017-hud-coc-program-fund.../

2017 HUD CoC Program Funding Competition - Coalition to End Homelessness

Each year, the Coalition and its partner agencies must reapply for the funding that provides much of the housing available to end homelessness for the area. Most projects seek to renew their funding, in order to provide housing stability to those they serve. To do so, they must demonstrate their eff...

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Deborah Huey if those greedy landlords didnt raise their rent to high you wouldnt have this problem. I just moved out of Michigan because of one of the greedy ones, and I lived in a dump
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Grand Rapids Area
COALITION TO END HOMELESSNESS

Jesica Vail

GRAND RAPIDS AREA

COALITION TO END HOMELESSNESS

Welcome to the Grand Rapids Area Coalition to End Homelessness Newsletter!
Please feel free to share this newsletter with others who may be interested in
receiving it. If you would like any email addresses added to the mailing list or If you
have updates that you would like included, please share them with
Bree Butler at bbutler@hwmuw.org

CoC Program Competition

The Local Competition For FY 2017 Federal HUD funding Is Now Open!
Renewal, New, and Bonus Project applications are all being accepted until **5pm Friday,
August 18, 2017**. The full timeline is included below.

1

For the FY 2017 Continuum of Care Program Local Application Guidelines and Instructions for **New and Bonus Applications**, click here.

For the FY 2017 Continuum of Care Program Local Application Guidelines and Instructions for **Housing and Infrastructure Renewal Applications**, click here.

CoC Local Application Timeline
Federal Fiscal Year 2017

	Due Date	Task	Responsible Party
	8/1-3/17*	Funding Review Finalizes Local Application	Funding Review, CoC Staff
	8/4/17	Release Local Project Application	CoC Staff
	8/7/17	Applicant Meeting/APR Training: 10am, United Way	CoC Staff
	8/18/2017	Local and eSnaps Applications Due	Applicants
	8/23-24/17	Funding Review Meeting- Scoring/Ranking	Funding Review, CoC Staff
	8/25/17	Funding Review Recommendations Shared	
	9/1/17*	Appeals Due	Applicants
	9/1/17	Changes in Due eSnaps Applications	Applicants
	9/4/17	Appeals Committee Meets (if required)	Appeals Panel
	8/25/17	Draft of Consolidated Application Posted Online	CoC Staff
	9/6/17	Funding and Ranking Recommendations to Steering Council	CoC Staff
	9/6/17	Funding and Ranking Recommendations Posted Publicly	CoC Staff
	9/13/17	Public Feedback on Ranking and Consolidated Application Due to Staff	CoC Members
	8/25-9/15/2017	Improvement to Consolidated Application	CoC Members and Staff
	9/15/2017	Steering Council Vote	Steering Council
	9/26/2017	Consolidated Application Submitted	CoC Staff

Homeless-Preference Housing Choice Voucher Report

The Homeless Preference Housing Choice Voucher Report:
Please see the report **here** for the number of individuals on the Homeless Preference Waiting List for Kent County compared to the number of homeless reported or added to the Homeless Preference Waiting List during the month of July, and the number of individuals the Housing Agent has pulled from the Homeless Preference Waiting List.

Spectrum Health
Healthy Happenings

Spectrum Health offers various classes focused on health and well being. They have a wide variety of classes including smoking cessation classes, balance classes, learning effective communication, and many more! For more information and the full list of classes, please click here.

Grand Rapids Area Chamber of Commerce
Institute for Healing Racism

The Grand Rapids Area Chamber of Commerce invites you to join a 2-day seminar that will arm you with the resources to engage in critical conversations and activities to end racism within your organization.

The Institute for Healing Racism is the Chamber's leading program for uncovering racism and understanding its impact on individuals and the workplace. The new curriculum is designed to help inform, inspire, and address the need to formulate the policies, procedures, conversations, and cultures that lead to organizational change.

Upcoming Dates:
Thursday & Friday, November 9 & 10, 2017

To learn more or register please click **here**.

2017 Coalition Member Meeting Schedule

Fourth Thursdays 9:30-11:00am
Meetings are held at the Kroc Center, 2500 S Division, Grand Rapids, MI 49507

August 24th
October 26th
December 14th (Exception: This meeting is on the second Thursday)

Please send email responses to:
bbutler@hwmuw.org

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GRAND RAPIDS AREA
COALITION TO END
HOMELESSNESS
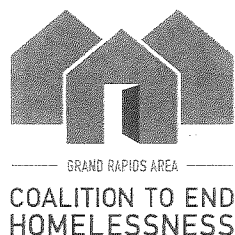
Facilitator:	Jesica Vail		
Meeting Attendees:	Karen Tjapkes, Denise Price, Jennifer Grostic, Laurie Craft,		
	Also Present: Wende Randall, Jim Talen, Bree Butler, Jesica Vail		
Time Convened:	11:33 am	Time Adjourned:	1:00 pm

Conflict of Interest Disclosure	
Discussion	
Each voting member completed a Conflict of Interest disclosure form to disclose any potential conflicts. The committee did not determine that there were any conflicts necessitating a vote or any other action.	
Review of Preliminary Rating	
Discussion	
The committee reviewed renewal projects by working down the list auto-populated by the HUD Rating and Ranking tool, discussing how each project scored and reviewing that they continue to meet thresholds and community needs. Some points of note were that while the rating and ranking tool can be used to set priority of project types for specific populations, it is not enough to say a particular population type "has priority", the priority must be set in relation to every other population and project type as well. The committee agreed it could not do this priority setting without a wider community conversation. Therefore, priority for specific populations would be considered outside of the tool, and the rating was manually adjusted to reflect such priorities.	
Additionally, it was noted that the primary barrier to higher scores for some PSH projects were factors that will be changed in the current or next grant year, however the applications only asked about the last completed. Once the changes are fully realized, the projects' impact on homelessness is expected to increase.	
The criteria in the Serving High Needs Populations area was difficult for most applicants, however it impacted applications consistently across agencies, and did not significantly impact projects' relation to each other. The expectation is to be able to change this criteria for next year's scoring and to rely more on referrals from the prioritization list.	
Conclusions	
Review of Reallocation, New and Bonus Submissions	
Discussion	
The new and bonus projects submitted were as follows:	
Reallocation of the RRH Youth project into a TH-RRH project to better address the needs youth have expressed about immediate housing and safety needs while searching for RRH units.	
Reallocation of Kindred RRH by The Salvation Army to address system infrastructure funding needs and better serve special populations.	
Reallocation of ICCF's RRH project- a portion of these funds were requested by the Salvation Army in their infrastructure request	

FUNDING REVIEW
MEETING MINUTES
August 24, 2017
11:30am – 2:00pm

GRAND RAPIDS AREA
COALITION TO END
HOMELESSNESS

New Project Application by Well House for permanent supportive housing (PSH) that included acquisition and rehabilitation in the budget.
New Project Application by Community Rebuilders for the amount in the bonus, seeking to add 21 units of PSH to the existing Housing Solutions project.

Applications were discussed relative to community need and ability to serve identified populations. The committee discussed acquisition and rehab costs included in the Well House application and that the larger CoC community had not discussed if these items were of interest for HUD funds.

The committee identified questions relative to the housing and services part of the budget with consideration of only funding this part of the request, that was most aligned with community priorities. Upon receiving answers to questions from Well House, the committee discussed that the project was more suited to serving populations with less intensive needs than PSH is currently targeted, and the need to use HUD funds to target the most vulnerable is the community's top priority at this time (the rental/leasing assistance was not a permanent, continuing subsidy, and emphasis was placed on participants gaining income through employment—more in line with RRH project development for populations with less intensive needs). Therefore, the committee determined the Well House application was not the best fit for funding available in this round.

The committee discussed the remaining $23,223 in funding and where it could house the most households with the least amount of risk in losing the funds. It was determined that adding it to the TH-RRH proposal by Community Rebuilders would serve more households without risk of losing it in a new application or one mixed into a bonus project.

Motion on Project Priority Listing	
Conclusion	
Motion by Laurie for the recommendation to Steering Council for the acceptance of the Ranking tool project priority order as created in this meeting, with the additional $23,223 to be added into First Step Housing. Seconded by Denise, all in favor, motion passed.	
Addendum	
Discussion	Following the Funding Review meeting, it was noted that the New TH-RRH project submitted did not list the same partners as the original RRH Collaborative project it was replacing had. The applicant was contacted who assured that they were still interested in working with partners but the application deadline had limited the amount of time to contact all partners.
Conclusion	No changes recommended to the previously approved motion.

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 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

Jesica Vail

From:	Jesica Vail
Sent:	Friday, August 04, 2017 11:26 AM
To:	Jesica Vail
Subject:	Local CoC Funding Competition is Open
Attachments:	2017New_Bonus_App_ScoreCardPV1.pdf; 2017Renew_App_ScoreCardPV1.pdf; FY2017New_BonusInstructionsPV1.pdf; FY2017RenewalInstructionsPV1.pdf; 2017_New-Bonus_CoCLocalAppPV1.docx; 2017RenewalLocalAppPV1.docx; 2017_HMIS_CELocalAppPV1.docx

Importance:	High
Follow Up Flag:	Follow up
Flag Status:	Flagged

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GRAND RAPIDS AREA
COALITION TO END HOMELESSNESS

📞 ☰

2017 HUD CoC Program Funding Competition

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(http://mindutopia.com)

Grand Rapids Area Coalition to End Homelessness[1]
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). 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.

---

[1] 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:
- o Fiscal Agent (Entity that provides paid staff support for the CoC)
- o HMIS Lead Agency (entity holding responsibility for Homeless Management Information System (HMIS) management and maintenance)
- o 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.   <u>Committees</u>

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: _____   Date: _9/9/16_____

HMIS Lead Agency: Salvation Army Social Services, Kent   **Title:** Exec Dir of Soc Srvcs

Signed: _____   Date: _9.9.16_____

CoC Representative: Rebecca Rynbrandt   **Title:** Chairperson

2016 MSHMIS Operating Policies and Procedures

rev. 2016.11.04

MICHIGAN COALITION
AGAINST HOMELESSNESS

TABLE OF CONTENTS

2016 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 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
Homeless Management Information System	HMIS	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.
Continuum of Care	CoC	Planning body charged with guiding the local response to homelessness.
Independent Jurisdiction CoCs	IJs	CoCs that are recognized by HUD and are usually organized around higher population counties.
Balance of State CoC	BOS	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.
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 that a CoC board/collaborative body are now called Local Planning Bodies.
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.

Michigan Homeless Assistance Advisory Board	MHAAB	The BOS CoC Governance Board. The Statewide HMIS project reports to MHAAB.
Michigan State Housing Development Authority	MSHDA	MSHDA is the grantee for the Statewide HMIS and subcontracts with MCAH for administration of the system.
Michigan Department of Health and Human Services	MDHHS	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).
The Michigan Campaign to End Homelessness	CTEH	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.
Joint Governance Charter		The Agreement between Michigan's IJ CoCs and MSHMIS that supports a statewide HMIS operating in a single system environment.
Contributing HMIS Organizations	CHO	An organization that participates on the HMIS.
The Health Insurance Portability and Accountability Act of 1996	HIPAA	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.
42 CFR Part 2	Part 2	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.
Participation Agreement		The agreement between MSHMIS participating agencies and MCAH that specifies the rights and responsibilities of MCAH and participating agencies.
Administrative Qualified Services Organization Business Associates Agreement	Admin QSOBAA	The agreement signed by each CHO, the local HMIS Lead Agency, MCAH and MSHDA that governs the privacy standards for participants that can see data from multiple organizations.
Sharing Qualified Services Organization Business Associates Agreement	Sharing QSOBAA	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.
User Agreement & Code of Ethics		The document each HMIS user signs that defines the HMIS standards of conduct.
Release of Information	ROI	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.
Sharing		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.
Protected Personal Information	PPI	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.
Visibility		Refers to whether or not a provider page can see client data if it has been entered into another provider page. Visibility is configured on the HMIS system 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.
Coverage Rate		Coverage rate refers to the percentage of the homeless population in a geographic area that is measured on the HMIS, divided by the total number of homeless persons in that geographic area. Coverage estimates are used to project a total homeless count if there are homeless service providers in a jurisdiction 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.
Project Types		HUD defines 12 Project Types in HMIS: • 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. • ES: Emergency Shelter- Overnight shelters or shelters with a planned length of stay of less than 3 months. • TH: Transitional Housing- Transitional environments with a planned LOS of not more than 2 years that provide supportive services. • PH: PSH Permanent Supportive Housing- Permanent Housing for the formerly homeless with services attached to persons served under this project. • PH: Permanent Housing- Permanent housing that may be supported by a voucher but does not have services attached to the housing. • RR: Rapid Rehousing- A project that rapidly rehouses those that are identified at Literally Homeless. • HP: Homeless Prevention- A project that helps those are at imminent risk of losing housing, to retain their housing. • SO: Street Outreach Project- A project that serves homeless persons that are living on the street or other places not meant for habitation. • 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. • Safe Haven: A project that provides low-demand shelter for hard-to-serve persons with severe disabilities. The clients have often failed in other sheltering environments.
Length of Stay	LOS	The number of days between the beginning of services and the end of services. It is calculated using entry and exit dates or shelter stay dates. MSHMIS offers calculations for discrete stays as well as the total stays across multiple sheltering events.

Point in Time Count	PIT	An annual count, usually in the last week in January that is required for all CoCs. Every other year, the PIT Count must include an "unsheltered" or street count.
Housing Inventory Chart	HIC	The HIC Chart 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.
SOAR Across Michigan	SOAR	Using the national "best practice" curriculum, the SOAR project, led by Department of Health and Human Services, reduces barriers and supports the application for Social Security Benefits for Michigan's disabled homeless population.
Department of Health and Human Services Emergency Services Project	DHHS ESP	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.
Homeless Definition		See Homeless Definition Crosswalk. The HEARTH Act defines 4 categories of homelessness. 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. • Category 1: Literally Homeless • Category 2: Imminent Risk of Homelessness • Category 3: Homeless under other Federal Statutes • Category 4: Fleeing/Attempting to Flee DV
Projects for Assistance in Transition from Homelessness	PATH	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 mentally ill homeless people, primarily through street outreach, to link them to permanent community housing. This project has different reporting requirements than HUD funded projects and uses HMIS to collect this information.
Shelter Plus Care	S+C	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.
Housing Opportunities for Persons with AIDS	HOPWA	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.
Housing Assessment and Resource Agencies	HARAs	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.

I. POLICIES AND PROCEDURES SUMMARY:

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

II. AGREEMENTS, CERTIFICATIONS, LICENSES AND DISCLAIMERS:

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

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.

b. A **Participation Agreement** governing the basic operating principals of the system and rules of membership.

c. **Sharing QSOBAA's** (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 will have training certificates for active users on file.

   a. All users are required to 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 will 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 are 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 both 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 outcome 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:

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.
- 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 (with minor modifications) that was developed in close collaboration with providers that manage information that may put a client at risk.
- The MSHMIS system is compliant with HIPAA, and all Federal and State laws and codes. All privacy procedures are designed to ensure that the broadest range of providers may participate in the project.
- Privacy Training is a requirement for all agencies and users on the MSHMIS system.
- 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 of 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 re-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 and included in both the Participation Agreement and this HMIS Policies and Procedures document.
- The MSHMIS System 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[1]:
   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 to the CoC's HMIS Local System Administrator. The System Administrator investigates the incident including running applicable audit reports. If the System Administrator determines that a breach has occurred and/or the staff involved violated privacy or security guidelines, the System Administrator will report the issue immediately to the MSHMIS Project Director and CoC Chair. This will be followed up by a written description of the Local System Administrator's findings to the MSHMIS Project Director and CoC Chair. A Corrective Action Plan will be implemented. 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.
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 should 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

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[1] 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.

recommendations made, as well as schedule follow-up activities to identify any changes made to document compliance with the Operating Policies and Procedures.

Privacy:
1. 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.
2. All agencies are required to have the **HUD Public Notice** posted and visible to clients in locations where information is collected.
3. 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.[2]
   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.
4. All Notices must be posted on the Agency's website.
5. 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)
      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).

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[2] Language was added to clarify the HIPAA rule.

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 none-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.

6. Agencies must protect **hard copy data** that includes client identifying information from unauthorized viewing or access.

a. Client files are locked in a drawer/file cabinet.

b. Offices that contain files are locked when not occupied.

c. Files are not left visible to unauthorized individuals.

7. 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.

8. 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 re-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 QSOBAAs 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 their 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.**

9. 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[3].
      v. Interagency sharing must be accompanied by a negotiated and executed Sharing QSOBAA.
      vi. If an agency is subject to stricter privacy laws (ex. 42 CFR Part 2), that only permit external sharing between a subset of their provider pages, all provider pages within that agency that will be sharing must be listed on any Sharing QSOBAAs that agency is a party of. Visibility cannot be added to new projects within such an agency without adding those provider page(s) to the sharing QSOBAA.

   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.
      iii. To streamline paper, 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 above in ii.[4]

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[3] The change reflects changes in the HIPAA rule that allow for Releases the 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.

[4] Recognizes existing practice by participating CoCs.

10. An **automated ROI** is required to enable sharing of any particular client's information between any provider pages on the system.
    a. Agencies should establish **Internal Sharing** or sharing between only their agency's provider pages, by creating visibility group(s) that include all of the agency's provider pages where sharing is planned and allowed by law.
        i. Internal Sharing does not require a signed Client Release of Information unless otherwise specified by law. (However, an electronic release must still be entered into the system to permit Internal Sharing.)
        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 Release of Information 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 on the system. 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 has defined a procedure for pulling a client's housing history across the entire database to verify a client's eligibility for specific housing options. This procedure requires that:
        i. Consent for obtaining the client's housing history is written into the agency's Outreach Sharing Plan of their Release of Information, and the client has agreed to permit this activity by initialing this section.
        ii. An electronic copy of the signed Release of Information including the client authorization to release the housing history has been attached to the client record on the system.
11. 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
    b. Available in multiple languages
    c. Available in large print
12. **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 are not shared between users, or visible for others to see.
    e. Project staff are educated to not save reports with client identifying data on portable media as evidenced through written training procedures or meeting minutes.

f. Staff are trained regarding use of email communication, texting, file sharing and other electronic means of transferring data related to client services.
   i. By-name housing lists may not be printed with client identifying information without written client consent.

Data Security:
1. All licensed Users of the System 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 insure:
      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 System 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 from 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 and that of your sharing partners. 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:

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 "Bowman Systems Securing Client Data" for a detailed description of data security and Bowman's Disaster Response Plan

1. The MSHMIS Project is required to maintain the highest level disaster recovery service by contracting with Bowman 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 Bowman 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 Bowman 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 Bowman 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.

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:

The position of the Local System Administrator/System Administrator I is key to the success of the CoC. This individual 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 local 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 (3rd 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 CoCs they support. This support includes resetting passwords and troubleshooting/problem solving for users and agencies within their CoCs. 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 if requested by the Local System Administrator/Local CoC.

2. **User and Provider Page Setup**
   a. Local System Administrators will setup new users in NC HMIS, or delegate the task to their Agency Administrators. In the case of 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 users of the system in the CoC they serve. These meetings will cover important news on changes in the system, items of local interest within the CoC, and issues identified by the Local System Administrator within the CoC.
   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 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 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 APR for the CoC they serve in.
   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 will be responsible for providing reports to the CoC it serves as the HMIS Lead for regarding requests made by the local CoC for data. 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, 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 for the purpose of monitoring data quality and outcomes on a regular basis in the agencies that it serves.
   c. The Local System Administrator will be responsible for reporting out on activities and expenditures to the Local CoC in which it 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 the systemwide 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 not be 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 is responsible for performing an annual PIT Count as specified by MHAAB. 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:

A. Provider Page Set-Up:
1. Provider Page 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. Inactive Provider Pages are properly identified with "XXX Closed" followed by the year of the last project exit >Provider Page Name. For example XXXClosed2016.[5]
    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.
3. The primary provider contact information reflects where the services are being delivered.
4. HUD Data Standards are fully completed on all Provider Pages:
    a.   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.
    b.   Project type codes are correctly set
    c.   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-"
    d.   Geocodes are set correctly
    e.   The Continuum Project field is properly completed.
    f.   If a project is HOPWA, RHY, PATH or SSVF, the Provider Grant Type is correctly filled out.
    g.   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.
    h.   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.
    i.   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

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[5] Original language focused on "entries" and subsequent practice has changes this to "exits".

designate the local HARA's to establish the homeless designation and maintain related documentation.

2. 100% of the clients must be entered into the System 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 entry/exit data including the UDEs on the Entry/Exit Tab of ServicePoint or

    c.   Backdating the information into the System[6]

3. All staff are required to be trained on the definition of Homelessness.[7]

    a.   MSHMIS provides a homeless definition crosswalk and 3.917 flowchart to support agency level training.

    b.   There is congruity between the following 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 the DOB is 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 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 and non-cash benefits are being updated at least annually and at exit, or at the frequency specified by program requirements.

    a.   Annual Reviews will be completed in the 30 days prior to the anniversary of the client's entry into services.

    b.   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.

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[6] Clarification of existing policy.

[7] Specific instruction is available for PATH and HOPWA projects at www.dyns-services.com

    c.   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. [8]

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.[9]

    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.[10]

    b.   The project entry and exit dates should be recorded upon project entry or exit of all participants. Entry dates should record the first day of service or project entry with a new project entry date for each period/episode of service. 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 (red) Universal Data Element Fields.

        ii.   The Relationship to Household assessment questions is 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 Residential move-in-date is completed for all PH: RRH projects.

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[8] 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.

[9] 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.

[10] Additional detail was added for low volume environments that are required to annually update income and employment.

        viii.   All project specific data elements are completed as required by the various funding sources supporting the project.
- d.   Providers are auditing 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. [11]
- a.   All HMIS participants 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 form.

VII. RESEARCH AND ELECTRONIC DATA EXCHANGES

A. Electronic Data Exchanges:

1.   Agencies electing to either import 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

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[11] PATH, HOPWA and VA projects use project entry forms that correspond to the data collection requirements of those projects. For PATH and HOPWA, please contact www.dyns-services.com

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[12]

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.

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[12] The previous Appendix A, has been removed due to a full revamping of the MCAH training protocol and documentation storage functionality on our website. MCAH will be releasing an updated version of this document as a real time tool during the HUD FY 2016.

☐ **Current Agency Release of Information:** Including all sharing partners and sharing outreach plan as applicable.

INTRODUCTION

This document describes the Homeless Management Information System (HMIS) data quality plan for the Grand Rapids Area Coalition to End Homelessness – Kent/GR/Wyoming Continuum of Care. This document provides the data quality plan and protocols that meet specific requirements set forth by the Department of Housing and Urban Development (HUD). It is developed by the Grand Rapids Area Coalition to End Homelessness Data Quality Committee and approved by the Steering Council. This HMIS Data Quality Plan is to be updated and/or reviewed annually, considering the latest HMIS data standards and locally developed performance plans.

Accurate data is an important component of understanding and, ultimately, ending homelessness. It is also significant tool for meeting HUD expectations for reporting on community work, including System Performance Measures, APR and AHAR. This Data Quality Plan is a community-level document that facilitates and confirms the ability of the CoC to achieve statistically valid and reliable data. The Data Quality Committee has been charged with developing and updating a data quality plan that:

- Identifies the responsibilities of all parties within the CoC that affect data quality
- Establishes specific data quality benchmarks for timeliness, completeness, and accuracy
- Describes the procedures that responsible parties will take to implement the plan and monitor progress to meet data quality benchmarks
- Establishes a timeframe for implementing the plan to monitor the quality of data on a regular basis

The Data Quality Plan sets concise expectations for the community, HMIS Administrators and the end users to capture reliable and valid data about persons accessing the homeless assistance system. The Data Quality Monitoring Plan (a separate document) outlines a regular, on-going process for analyzing and reporting on the reliability and validity of the data entered into HMIS.

CLARIFICATION OF TERMS

Project vs. Program

The 2014 HUD HMIS Data Standards, published August 2014, describes the use of the terms Project and Program because federal agencies use the terms in unique ways. In this document, and for the purposes of data collection in HMIS, a **Program** refers to a federal funding source (e.g., HUD CoC, ESG, HHS PATH, VA SSVF, etc.). A **Project** refers to a distinct unit of an agency, which may or may not be funded by HUD or the federal partners, that provides services and/or lodging and is identified by the CoC as part of its service.

DATA QUALITY PLAN COMPONENTS

COMPONENT 1 - DATA TIMELINESS: *The number of days by which data must be entered, depending on the project type.*

Benchmark: Entering data in a timely manner can reduce human error that occurs when time has elapsed between the data collection (or service transaction) and the data entry. Timely data entry also ensures that the data is accessible when it is needed. All data shall be entered into the HMIS in a timely manner. To that end, the following timeliness benchmarks are set forth:

- Emergency Shelter, Transitional Housing, Permanent Supportive Housing, Rapid Re-Housing, Homelessness Prevention, Outreach and Supportive Services Only Projects will enter all Universal Data Elements and required HUD Program Specific Data Elements within 7 calendar days of the intake and exit.
- Coordinated Assessment Projects will enter all Universal Data Elements and required HUD Program Specific Data Elements within 24 business hours of intake and exit.
- SSVF Projects will enter all Universal Data Elements and required VA Program Specific Data Elements within 24 hours of intake and exit.

COMPONENT 2 - DATA COMPLETENESS: *Rate of completeness for All Clients Entered and each of the HUD data element sets goals.*

Benchmark: The CoC's goal is to collect 100% of HUD required data elements but we recognize that this may not be possible in all cases. Complete data facilitates confident reporting and analysis on the nature and extent of homelessness. In effect, complete data tells the full "story" of homelessness to the agencies, the CoC, and the general public. Therefore, the CoC has established a target range of null/missing and unknown/don't know refused responses depending on the type of project entering data. All projects using the HMIS shall enter data on one hundred percent (100%) of the clients they serve.

All participating projects, no matter their funding source are required to collect and report in HMIS the following data. The target range of missing (null) and unknown (don't know/refused) responses are found in the table below:

Data Element | % Error Rate	Outreach	Coordinated Entry	Prevention, Diversion	Emergency Shelter	TH, SSVF, All PH
First & Last Name	0%	0%	0%	0%	0%
SSN	10%	35%	10%	35%	5%
Date of Birth	0%	0%	0%	0%	0%
Race	2%	2%	2%	2%	2%
Ethnicity	2%	2%	2%	2%	2%
Gender	0%	0%	0%	0%	0%
Veteran Status	0%	0%	0%	0%	0%
Project Start Date	0%	0%	0%	0%	0%
Relationship to HoH	0%	0%	0%	0%	0%
Client Location	0%	0%	0%	0%	0%
Disabling Condition	2%	0%	0%	2%	0%
Destination	50%	5%	0%	50%	0%
Income & Sources at Start	2%	2%	2%	N/A	2%
Income & Sources at Annual	N/A	N/A	N/A	N/A	2% (PSH)
Income & Sources at Exit	2%	2%	2%	N/A	2%
All other required *HUD and/or Program Specific Data Elements*	2%	2%	N/A	N/A	2%

COMPONENT 3 - BED UTILIZATION RATE:

Benchmark: One of the primary features of an HMIS is the ability to record the number of client stays or bed nights in a homeless residential facility. Case managers or shelter staff enter a client into the HMIS, assign them to a bed or unit and the client remains there until they exit the project. When the client exits the project, the bed or unit becomes available and is considered "unoccupied" until filled. Bed utilization rates for differing homeless residential facilities assist the project and community as a whole in evaluating gaps and needs for the area. The rate is calculated by dividing the Total Number of Occupied Beds by the Total Number of Beds available.

For effective evaluation of available data, bed utilization rates should fall within a set acceptable range. Deviation from those rates may indicate HMIS entries or exits are not being made in a timely manner or they may indicate a unique project circumstance that should be provided with explanation in any reports. Target bed/unit utilization rates for established homeless residential facilities are as follows:
- Emergency Shelters: 75% - 105%
- Transitional Housing: 80% - 105%
- Permanent Supportive Housing Facilities: 85% - 105%

The CoC recognizes that new projects may require time to reach the projected occupancy numbers and will not expect them to meet the utilization rate requirement during the first operating year.

COMPONENT 4 - ACCURACY:

Benchmark: The purpose of accuracy is to ensure that the data in the Continuums HMIS is the best possible representation of reality as it relates to homeless people and the agencies that serve them. To that end:
All data entered into the CoC's HMIS shall be a reflection of information provided BY THE CLIENT or updated BY THE CLIENT and documented within a casefile or equivalent record for reference.

- All data in HMIS shall be collected and entered in a common and consistent manner across all projects, following the Timeliness and Completeness requirements noted in Section 1 & Section 2 above.
- All HMIS users will complete initial training required by MCAH (Michigan Coalition Against Homelessness) before accessing the live HMIS system and complete annual recertification for privacy or other as required to maintain user status.
- All projects will utilize HMIS data collection forms that sufficiently collect all HUD required data elements relevant to the project type. HMIS Local System Administrator will provide guidance and instruction as to the use of data collection forms required to meet the minimal collection of HUD data elements required for the project type.
- New agencies that join the COC are required to review this document as part of the HMIS Agency Agreement execution process.

COMPONENT 5 - MONITORING:

Benchmark: The CoC recognizes that the data produced from HMIS is critical to meet the reporting and compliance requirements of individual agencies and the CoC as a whole. As such, all HMIS participating agencies are expected to meet the data quality benchmarks described in this document.
To achieve this, HMIS data will be monitored according to a schedule set forth in the Data Quality Monitoring Plan (a separate document) developed by the Grand Rapids Area Coalition to End Homelessness Data Quality Committee and approved by the Steering Council.

COMPONENT 6 - SUPPORT FOR REACHING EXPECTATIONS:

Benchmark: The purpose of monitoring is to ensure that the agreed-upon data quality benchmarks are met to the greatest possible extent and that data quality issues are quickly identified and resolved.
To ensure that service providers have continued access to the expectations set forth in the data quality plan, the following protocol will be used:

- The data quality plan will be posted to the CoC's public website and provided on an annual basis to all contributing project agencies.
- Provider agency HMIS administrators will monitor data quality and make corrections on a monthly basis.
- All Data corrections or resolution plans will be made only by those individuals with allowable HMIS permissions and only with accurate data/information made available BY THE CLIENT. CoC HMIS Local System Administrator will provide technical assistance to providers that promote both the collection and entry of accurate HMIS data.

- On a quarterly basis: the HMIS Local Administrator will provide to the HMIS Data Quality Committee an agency aggregate data Completeness Report for review. HMIS standard ART reports will be utilized for the completion of this report and are identified in the HMIS Data Monitoring Plan.
- On a quarterly basis: the HMIS Local Administrator will provide to the HMIS Data Quality Committee an agency aggregate Data Timeliness and Bed Utilization Rate (if applicable) report for review. HMIS standard ART reports will be utilized for the completion of this report and are identified in the HMIS Data Monitoring Plan.
- All provider agencies will be informed of the agency/provider information to be included in both the quarterly and semi-annual reports prior to submission to the Data Quality Committee.
- While the CoC is committed to meeting the standards that HUD has in place for the management and quality of HMIS data, we also understand that many of the participating agencies in our community are not funded through the CoC to do this data entry and are doing so with the agency's resources. The CoC recognizes their participation and is committed to supporting their efforts to make sure that their data gets entered into HMIS in a way that meets the standards described in this document.
- For those agencies not meeting Data Quality Plan benchmarks, the HMIS System Administrator will inform the agency of benchmarks that are not being met and provide technical assistance and support that enables the agency to improve its performance and meet the established targets.
- Agencies not meeting Data Quality Plan benchmarks on a repeated basis will be notified by the HMIS System Administrator and/or members of the Data Quality Subcommittee, identifying the benchmarks that are not being met. As noted in the accompanying Data Quality Monitoring Plan, the agency, with assistance from the HMIS System Administrator, will be asked to develop a written plan that identifies clear and measureable improvements to meet established benchmarks within a reasonable and specified timeframe.
- On a semi-annual basis: the HMIS Local System Administrator will present to the CoC Steering Committee, a Data Quality Committee approved Monitoring report, documenting the status of Data Quality Plan compliance by contributing providers.

PURPOSE

This document describes the Homeless Management Information System (HMIS) Data Quality Monitoring Plan for the Grand Rapids Area Coalition to End Homelessness – Kent/GR/Wyoming Continuum of Care. It is a supplement to the Data Quality Plan and was developed by the Grand Rapids Area Coalition to End Homelessness Data Quality Subcommittee and approved by the Steering Council.
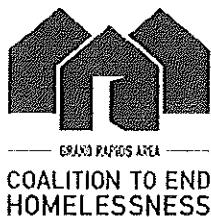
PREFACE

"In 2009, the McKinney-Vento Homeless Assistance Act was amended by the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act). A critical aspect of the amended Act is a focus on viewing the local homeless response as a coordinated system of homeless assistance options as opposed to homeless assistance programs and funding sources that operate independently in a community. To facilitate this perspective the Act now requires communities to measure their performance as a coordinated system, in addition to analyzing performance by specific projects or project types. Section 427 of the Act established selection criteria for HUD to use in awarding CoC funding that require CoCs to report to HUD their system-level performance. The intent of these selection criteria are to encourage CoCs, in coordination with ESG Program recipients and all other homeless assistance stakeholders in the community, to regularly measure their progress in meeting the needs of people experiencing homelessness in their community and to report this progress to HUD." (System Performance Measures – An introductory guide to understanding system-level performance measurement. U.S. Department of Housing and Urban Development, 2014)

In the guide referenced above, HUD describes specific impacts of the HEARTH ACT on the McKinney -Vento Homeless Assistance Act and the implications for system-wide outcome reporting by Continuum of Cares (CoC) across the country. The purpose of the guide is to help CoCs understand how HUD expects CoCs to calculate and use system-level performance measures as the established selection criteria for awarding CoC Program projects and to evaluate system performance. In HUDs explanation of their process they "sought to find a balance between developing meaningful, comprehensive performance measures and limiting additional burden for CoCs, continuum projects, and HMIS Lead agencies." "Accordingly, each performance indicator measure detailed in the introductory guide was crafted to maximize the information available through universal data elements established in HUD's HMIS Data Standards, which all continuum projects in HMIS should be collecting as HMIS participants."(System Performance Measures – see previous reference)

INTRODUCTION

This document describes the Homeless Management Information System (HMIS) Data Quality Monitoring Plan for the Grand Rapids Area Coalition to End Homelessness – Kent/GR/Wyoming Continuum of Care. The HMIS Data Quality Monitoring Plan should be reviewed and updated annually by the Data Quality Subcommittee, considering the latest HMIS Data Standards and performance indicators developed by the local CoC. The Data Quality Monitoring Plan sets procedures for analyzing and reporting on the reliability and validity of all data entered into HMIS. Recognizing the future impact that system performance measures and reporting will have on HUD's comparative evaluation of Continuum of Cares across the country and HUD's use of Universal Data Elements as

the source indicator for measuring performance, this Data Quality Monitoring Plan makes reference to and incorporates definitions included in the 2014 HUD System Performance Measures Guide.

DEFINITIONS

Continuum of Care (CoC): The group organized to carry out the responsibilities of the CoC established under 24 CFR part 578. It is composed of representatives of organizations including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons. *(System Performance Measures – An introductory guide to understanding system-level performance measurement. U.S. Department of Housing and Urban Development, 2014)*

Continuum Projects: Projects, which may or may not be funded by HUD, that provide services and/or lodging, and whose primary purpose is to meet the specific needs of people who are homeless or at risk of homelessness within the CoC's geography. All ESG and CoC Program-funded projects are continuum projects, but the system should also include all non-ESG Program and non-CoC Program funded projects dedicated to serving people who are homeless. *(System Performance Measures – An introductory guide to understanding system-level performance measurement. U.S. Department of Housing and Urban Development, 2014)*

ROLES AND RESPONSIBILITIES (for implementing this plan)

Agency Providers: Agency Providers are responsible for entering and correcting data in accordance with the Data Quality Plan.

HMIS Agency Administrator: The HMIS Agency Administrator is responsible for ensuring the accurate collection, recording and documentation of agency level HMIS client data.

HMIS Lead Agency: The HMIS Lead Agency is the entity designated by the Continuum of Care in accordance with HMIS Proposed Rule1 (24 CFR Part 580) to operate the Continuum's HMIS on the Continuum's behalf (HMIS Data Dictionary). The HMIS Lead Agency is responsible to employ and oversee the responsibilities of the HMIS System Administrator. The HMIS Lead Agency monitors data quality with the assistance of the CoC's Data Quality Subcommittee, or in its absence, the CoC Steering Council.

HMIS System Administrator: The HMIS System Administrator is responsible for three functions:
- Generating and distributing data quality reports according to the monitoring schedule outlined elsewhere in document;
- Providing technical assistance and guidance on data collection and reporting to HUD and other funding sources;
- Conducting training, including one-on-one training on how to enter and correct system data.

The HMIS System Administrator should not correct data but should provide assistance and training, on identifying and correcting problems, to users and Agency Administrators. The HMIS System Administrator performs these functions with oversight from the HMIS Lead Agency and guidance from the CoC Data Quality Subcommittee, or in its absence, the CoC Steering Council.

Data Quality Subcommittee: The Data Quality Subcommittee is responsible for ensuring CoC-wide adherence to HUD Data Standards, national reporting requirements, and Data Quality Monitoring activities.

CoC Steering Council: The Steering Council provides authorization for, oversight of, and support for the Data Quality Subcommittee. It helps guide the data quality work of the HMIS System Administrator in the absence of the Data Quality Subcommittee.

DATA QUALITY BENCHMARKS AND GOALS

Data quality benchmarks by project type are essential for the overall quality of and continuous improvement of data collection and reporting. The CoC has developed four data quality benchmark areas - timeliness, completeness, bed utilization rate and accuracy. The benchmarks can be found in the Data Quality Plan (a separate document).

INCENTIVES AND SUPPORT FOR REACHING EXPECTATIONS

It is intended that 100% of Grand Rapids Area Coalition Against Homelessness homeless service provider member agencies will contribute data to the HMIS on 100% of their homeless consumers served. The CoC recognizes the efforts of all Continuum Projects, funded and not funded by HUD, to contribute 100% of their data to the system-wide Continuum of Care. To support data collection and entry, and promote member agency efforts, technical assistance and guidance will be provided by the HMIS System Administrator to all HMIS participating agencies. Areas of technical assistance provided by the HMIS System Administrator may include:

- Assistance in generating data quality reports;
- Assistance in identifying potential changes to workflow to better accommodate data collection and data entry;
- In depth analysis of technical issues that may be causing reporting errors on data quality;
- Provision and/or recommendation of training on data entry;
- Assistance in identifying problems and teaching agency users or administrators how to correct them.

Semi-Annually, those Agency Providers who have consistently met data quality benchmarks or had improved rates of compliancy over at least two quarters will be identified and reported to the Steering Council as part of the Semi-Annual Data Quality Plan Monitoring Report. Those Agency Providers will also be recognized for their accomplishments during the Data Quality Subcommittee report to the quarterly CoC Provider Meeting.

Semi-Annually, Agency Providers who have not met or made improvements to their Data quality performance over the previous two quarters will be recognized in the Semi-Annual Data Quality Plan Monitoring Report submitted to the Steering Council by the Data Quality Subcommittee. The System Administrator will work with the agency and provide technical assistance that promotes their contribution of consumer Universal Data Elements to the HMIS.

Agency Providers that are not meeting or making progress in meeting data quality benchmarks for 3 consecutive quarters will be requested by the Data Quality Subcommittee to provide a written statement of acknowledgement and intent for improvement.

Agency Providers that are not meeting or making improvements to their data quality performance for 4 consecutive quarters will be requested to work with the System Administrator to develop a Written Plan of Improvement that identifies clear and measureable improvements.

The HMIS System Administrator will make agency aggregate HMIS data quality performance data available the CoC Funding Review Committee upon request and following notification of, and review and authorization by, the related Agency Provider(s).

DATA QUALITY REPORTS AND MONITORING SCHEDULE

The purpose of monitoring is to ensure that data quality benchmarks are met to the greatest possible extent and that data quality issues are quickly identified and resolved. 100% of data entered into HMIS must be CLIENT PROVIDED and only entered by those users authorized to do so.

Monthly: Agency Administrators will pull suggested HMIS monitoring reports for all agency Provider Projects and review data completeness rates. Agency administrators should work with agency users as well as the System Administrator as necessary, to correct any deficiencies by the end of the following month.

HMIS reports to be utilized by Agency Administrators to monitor data compliance within agency projects.

HMIS Report Name	Purpose of Report
HUD Data Quality Framework Report	HUD data element completeness rates by project
HUD Annual Progress Report (APR)	Outcome performance & data completeness by project
Entry/Exit Report	Compare HMIS current client list with alternative list

Quarterly: The HMIS System Administrator will pull CoC-wide reports that measure data quality and bed utilization rates. Agency aggregate data quality reports will be pulled by quarter according to the HUD-AHAR schedule. If an agency wide report indicates a deficiency in data accuracy and completeness rates, then individual provider (by project) reports will be pulled to determine which project within the agency is not meeting the benchmarks. The HMIS System Administrator will forward reports to the Agency Administrator or designated HMIS contact person and provide technical assistance if necessary. The report schedule is as follows:

Quarter	Pulled by Sys Admin	Corrections by Agency	Follow up Pulled
October 1 – December 31	January 15	During January	February 5
January 1 – March 31	April 15	During April	May 5
April 1 – June 30	July 15	During July	August 5
July 1 – September 30	October 15	During October	November 5

The HMIS System Administrator will compile, from the "follow up" reports, an agency aggregate data completeness report to submit to the Data Quality Subcommittee according to the following schedule:

Quarter	Submitted to Data Quality Subcommittee	Submitted to Steering Council
October 1 – December 31	February meeting	March meeting
January 1 – March 31	May meeting	
April 1 – June 30	August meeting	September meeting
July 1 – September 30	November meeting	

Semi-Annually: System Administrator will submit to the Steering Council a Data Quality Subcommittee approved **Semi-Annual Data Quality Plan Monitoring Report.** The report will include:
- Compilation of previous 2 quarters agency aggregate Data Completeness Reports
- Recognition of agency providers meeting and/or exceeding UDE Data Completeness targets
- Previous 4 quarters rate of improvement for those agencies not meeting program specific benchmark targets (UDE completion)
- Identified areas of need or request to initiate Written Plan for Improved Data Quality.

Annually: The HMIS System Administrator will conduct a site visit to review and complete a MSHMIS Site Review assessment (available on MCAH website). A site visit may be deferred for one year if there was a satisfactory review the previous year and a new written assessment is completed and submitted.

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

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 HCV program due to insufficient program funding.

A homeless preference is only assigned when the applicant is a Michigan resident.

| *Homeless* | *2 Points* |
| *Residency* | *1 Point* |

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. 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 <u>lives</u> 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 <u>works</u> 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.

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.

established waiting lists are done so in accordance with the date and time of their original application to the centralized public housing list. Any activities to contact applicants on the public housing waiting list must be conducted in accordance with the requirements for effective communication with persons with disabilities at 24CFR8.6 and the obligation to provide meaningful access for persons with limited English proficiency (LEP). To implement this provision, HUD is waiving 24CFR983.251(c)(2). However, after the initial waiting list has been established, the PHA shall administer its waiting list for the converted project in accordance with 24CFR983.251(c).

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.

3B. Project Description

This screen is currently read only and only includes data from the previous grant. To make changes to this information, navigate to the Submission without Changes screen, select "Make Changes" in response to Question 2, and then check the box next each screen that requires a change to match the current grant agreement, as amended, or to account for a reallocation of funds.

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 with FY 2016, Verne Barry Place will now take all project referrals from Coordinated Assessment. In addition, the project will also prioritize its non-dedicated beds for the chronically homeless.

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

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

Chronic Homeless	X	Domestic Violence	
Veterans		Substance Abuse	
Youth (under 25)		Mental Illness	X
Families with Children		HIV/AIDS	
		Other (Click 'Save' to update)	X

Other: Homeless individuals with disabilities

3. Housing First

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 2016. 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 2016. The period from April 1, 2016 through March 31, 2017.

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.

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

OWNER
Heartside Non-Profit Housing Corporation
_____
Print Name of Owner

By: _____
Signature

Dennis Sturtevant, President
_____
Print Name and Title of Signatory

_____
Date

CONTRACT INFORMATION

Contract Number: MI 073 MR0001 HAP 0004

Project Name: Verne Barry Place

Address: 60 South Division Avenue

City and State: Grand Rapids, MI 49503

Budget Authority Amount: $592,368

Commencement Date: April 1, 2016

Number of Units:	Number of Bedrooms:	Contract Rent (per month):
86	1-Bedroom	$574

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

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One year. 365 days.

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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.

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

OWNER

Heartside Non-Profit Housing Corporation
_____
Print Name of Owner

By: _____
Signature

Dennis Sturtevant, President
_____
Print Name and Title of Signatory

_____
Date

CONTRACT INFORMATION

Contract Number: MI 073 MR0001 HAP 0004

Project Name: Verne Barry Place

Address: 60 South Division Avenue

City and State: Grand Rapids, MI 49503

Budget Authority Amount: $602,438.00

Commencement Date: April 1, 2017

Number of Units:	Number of Bedrooms:	Contract Rent (per month):
86	1-Bedroom	$584.00

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 CRF 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

2017 HDX Competition Report
PIT Count Data for MI-506 - Grand Rapids/Wyoming/Kent County CoC

Total Population PIT Count Data

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count	800	912
Emergency Shelter Total	594	654
Safe Haven Total	0	0
Transitional Housing Total	165	197
Total Sheltered Count	759	851
Total Unsheltered Count	41	61

Chronically Homeless PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	63	108
Sheltered Count of Chronically Homeless Persons	59	92
Unsheltered Count of Chronically Homeless Persons	4	16

Homeless Households with Children PIT Counts

	2016 PIT	2017 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	83	81
Sheltered Count of Homeless Households with Children	83	79
Unsheltered Count of Homeless Households with Children	0	2

Homeless Veteran PIT Counts

	2011	2016	2017
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	36	76	92
Sheltered Count of Homeless Veterans	36	71	83
Unsheltered Count of Homeless Veterans	0	5	9

2017 HDX Competition Report
HIC Data for MI-506 - Grand Rapids/Wyoming/Kent County CoC

HMIS Bed Coverage Rate

Project Type	Total Beds in 2017 HIC	Total Beds in 2017 HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ES) Beds	588	53	535	100.00%
Safe Haven (SH) Beds	0	0	0	NA
Transitional Housing (TH) Beds	206	116	90	100.00%
Rapid Re-Housing (RRH) Beds	274	0	258	94.16%
Permanent Supportive Housing (PSH) Beds	890	0	890	100.00%
Other Permanent Housing (OPH) Beds	2426	0	142	5.85%
Total Beds	4,384	169	1915	45.43%

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2016 HIC	2017 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

Rapid Rehousing (RRH) Units Dedicated to Persons in Household with Children

Households with Children	2016 HIC	2017 HIC
RRH units available to serve families on the HIC	58	67

2017 HDX Competition Report

HIC Data for MI-506 - Grand Rapids/Wyoming/Kent County CoC

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2016 HIC	2017 HIC
RRH beds available to serve all populations on the HIC	236	274

2017 HDX Competition Report

FY2016 - Performance Measurement Module (Sys PM)

Summary Report for MI-506 - Grand Rapids/Wyoming/Kent County CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more "metrics" used to measure the system performance. Click through each tab above to enter FY2016 data for each measure and associated metrics.

RESUBMITTING FY2015 DATA: If you provided revised FY 2015 data, the original FY2015 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.
ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and "save" before closing.

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.

2017 HDX Competition Report
FY2016 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY2015	Revised FY2015	Current FY	Submitted FY2015	Revised FY2015	Current FY	Difference	Submitted FY2015	Revised FY2015	Current FY	Difference
1.1 Persons in ES and SH	2357	2355	3003	76	76	72	-4	45	45	36	-9
1.2 Persons in ES, SH, and TH	2762	2371	3239	98	97	77	-20	58	58	41	-17

b.

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer 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.

NOTE: Due to the data collection period for this year's submission, the calculations for this metric are based on the data element 3.17 that was active in HMIS from 10/1/2015 to 9/30/2016. This measure and the calculation in the SPM specifications will be updated to reflect data element 3.917 in time for next year's submission.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	2984	-	146		-	61	
1.2 Persons in ES, SH, and TH	-	3221	-	152		-	65	

2017 HDX Competition Report
FY2016 - 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.

	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	
	Revised FY2015	# of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	17	149	3	24	16%	3	4	3%	1	8	5%	36	24%
Exit was from ES	185	598	28	65	11%	16	40	7%	8	66	11%	171	29%
Exit was from TH	135	294	16	23	8%	14	5	2%	7	24	8%	52	18%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	366	523	20	37	7%	18	34	7%	23	37	7%	108	21%
TOTAL Returns to Homelessness	703	1564	67	149	10%	51	83	5%	39	135	9%	367	23%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2017 HDX Competition Report
FY2016 - 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).

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	912	800	-112
Emergency Shelter Total	408	594	186
Safe Haven Total	0	0	0
Transitional Housing Total	478	165	-313
Total Sheltered Count	886	759	-127
Unsheltered Count	26	41	15

Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	2814	2813	3290	477
Emergency Shelter Total	2376	2374	3041	667
Safe Haven Total	0	0	0	0
Transitional Housing Total	545	546	364	-182

2017 HDX Competition Report
FY2016 - 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 FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	355	381	402	21
Number of adults with increased earned income	26	27	24	-3
Percentage of adults who increased earned income	7%	7%	6%	-1%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	355	381	402	21
Number of adults with increased non-employment cash income	171	173	108	-65
Percentage of adults who increased non-employment cash income	48%	45%	27%	-18%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	355	381	402	21
Number of adults with increased total income	183	186	118	-68
Percentage of adults who increased total income	52%	49%	29%	-20%

2017 HDX Competition Report
FY2016 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	235	235	364	129
Number of adults who exited with increased earned income	43	43	83	40
Percentage of adults who increased earned income	18%	18%	23%	5%

Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	235	235	364	129
Number of adults who exited with increased non-employment cash income	84	85	75	-10
Percentage of adults who increased non-employment cash income	36%	36%	21%	-15%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	235	235	364	129
Number of adults who exited with increased total income	119	120	149	29
Percentage of adults who increased total income	51%	51%	41%	-10%

2017 HDX Competition Report
FY2016 - 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 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	2426	2426	2990	564
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.	670	639	720	81
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)	1756	1787	2270	483

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	3471	3495	4007	512
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.	967	920	1037	117
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.)	2504	2575	2970	395

2017 HDX Competition Report

FY2016 - 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 the FY2016 Resubmission 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 2015	Revised FY2015	Current FY	Difference
Universe: Persons who exit Street Outreach	325	309	237	-72
Of persons above, those who exited to temporary & some institutional destinations	30	22	34	12
Of the persons above, those who exited to permanent housing destinations	76	67	37	-30
% Successful exits	33%	29%	30%	1%

Metric 7b.1 – Change in exits to permanent housing destinations

2017 HDX Competition Report
FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	2445	2451	3317	866
Of the persons above, those who exited to permanent housing destinations	1185	1189	1595	406
% Successful exits	48%	49%	48%	-1%

Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	1567	1591	1635	44
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	1494	1523	1552	29
% Successful exits/retention	95%	96%	95%	-1%

2017 HDX Competition Report
FY2016 - 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.

2017 HDX Competition Report

FY2016 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016
1. Number of non-DV Beds on HIC	253	235	303	565	331	428	377	119	645	883	2190	2884		61	206	236				
2. Number of HMIS Beds	253	235	303	565	331	346	377	119	594	883	863	1186		26	206	236				
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	80.84	100.00	100.00	92.09	100.00	39.41	41.12		42.62	100.00	100.00				
4. Unduplicated Persons Served (HMIS)	663	2213	2381	3052	194	499	378	351	931	1379	1640	1668	140	352	1124	1253	1	64	246	117
5. Total Leavers (HMIS)	482	1909	1957	2582	130	347	319	280	291	421	649	606	139	279	588	944	0	4	161	48
6. Destination of Don't Know, Refused, or Missing (HMIS)	250	1060	1023	1424	2	40	62	73	2	9	5	4	0	2	1	4	0	1	60	38
7. Destination Error Rate (%)	51.87	55.53	52.27	55.15	1.54	11.53	19.44	26.07	0.69	2.14	0.77	0.66	0.00	0.72	0.17	0.42		25.00	37.27	79.17

2017 HDX Competition Report

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2017 PIT Count	1/25/2017	

Report Submission Date in HDX

	Submitted On	Met Deadline
2017 PIT Count Submittal Date	5/5/2017	Yes
2017 HIC Count Submittal Date	5/5/2017	Yes
2016 System PM Submittal Date	6/5/2017	Yes