

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:

- Reviewing the FY 2016 CoC Program Competition NOFA in its entirety for specific application and program requirements.

- Using the CoC Application Detailed Instructions while completing the application in e-snaps.

- Answering all questions in the CoC application. It is the responsibility of the Collaborative Applicant to ensure that all imported and new responses in all parts of the application are fully reviewed and completed. When doing this keep in mind:

- This year, CoCs will see that a few responses have been imported from the FY 2015 CoC Application.

- For some of the questions HUD has provided documents to assist Collaborative Applicants in completing responses.

- For other questions, the Collaborative Applicant must be aware of responses provided by project applications in their Project Applications.

- Some questions require the Collaborative Applicant to attach a document to receive credit. This will be identified in the question.

- 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 form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1A-1. CoC Name and Number: MN-505 - St. Cloud/Central Minnesota CoC

1A-2. Collaborative Applicant Name: Central MN Housing Partnership, Inc.

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Institute for Community Alliance

1B. Continuum of Care (CoC) Engagement

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1B-1. From the list below, select those organizations and persons that participate in CoC meetings. Then select "Yes" or "No" to indicate if CoC meeting participants are voting members or if they sit on the CoC Board. Only select "Not Applicable" if the organization or person does not exist in the CoC's geographic area.

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board	Sits on CoC Board
Local Government Staff/Officials	Yes	Yes	No
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	No
Law Enforcement	No	No	No
Local Jail(s)	No	No	No
Hospital(s)	No	No	No
EMT/Crisis Response Team(s)	No	No	No
Mental Health Service Organizations	Yes	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes	Yes
Public Housing Authorities	Yes	Yes	No
CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	Yes	Yes
School Administrators/Homeless Liaisons	Yes	No	No
CoC Funded Victim Service Providers	Not Applicable	No	Not Applicable
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Street Outreach Team(s)	Yes	Yes	Yes
Youth advocates	Yes	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes	Yes
Sexual Assault Center (just started)	Yes	No	No
Native American representatives (just started)	Yes	No	No
Veteran Advocates	Yes	Yes	Yes

1B-1a. Describe in detail how the CoC solicits and considers the full range of opinions from individuals or organizations with knowledge of homelessness or an interest in preventing and ending homelessness in the geographic area. Please provide two examples of organizations or individuals from the list in 1B-1 to answer this question.

Central CoC ensures that several subpopulations are represented in the CoC and committees as well as organizations from the different regions of the CoC as it encompasses a large, mostly rural area. This is accomplished by regularly reviewing membership & conducts outreach to those in under-represented groups. Input is requested from the following subpopulations: Domestic violence, vets, youth, mental health, seniors, Native Americans, homeless orgs: shelters, outreach, prevention, TH, RRH providers, PHAs, PSH, criminal background, etc. The CoC Coordinator is a formerly homeless person and has vast knowledge of the critical homeless needs. CoC's efforts resulted in getting representation & input from the Mille Lacs Band of Objibwe & Kids Fighting Hunger, both of which were on the performance, rating and ranking committee. Both provided valuable input regarding tribal & childrens' needs.

1B-1b. List Runaway and Homeless Youth (RHY)-funded and other youth homeless assistance providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Youth Service Provider (up to 10)	RHY Funded?	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 20, 2016.	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 20, 2016.
Lutheran Social Services	Yes	Yes	Yes
Catholic Charities SAIL/SHY	Yes	Yes	No
Lakes and Pines	Yes	Yes	Yes
Kids Fighting Hunger	No	Yes	No

1B-1c. List the victim service providers (CoC Program and non-CoC Program funded) who operate within the CoC's geographic area. Then select "Yes" or "No" to indicate if each provider is a voting member or sits on the CoC Board.

Victim Service Provider for Survivors of Domestic Violence (up to 10)	Participated as a Voting Member in at least two CoC Meetings between July 1, 2015 and June 30, 2016	Sat on CoC Board as active member or official at any point between July 1, 2015 and June 30, 2016.
Anna Marie's Alliance	Yes	Yes
Pearl Crisis Center	No	No
The Refuge (new)	No	No
Mid Mn Women's Center	Yes	No
DV Provider, Wright County (brand new as of August 2, 2016)	No	No

1B-2. Explain how the CoC is open to proposals from entities that have not previously received funds in prior CoC Program competitions, even if the CoC is not applying for new projects in 2016. (limit 1000 characters)

The CoC solicits proposals from new projects annually through advertising on several websites and listserves. All housing, social service, government and non-profit agencies receive this notice as soon as the HUD NOFA comes out, providing ample time for the interested agencies to notify the CoC of their intent to apply for funds. Special efforts are made to reach out to agencies serving Households disparately impacted by homelessness that have historically not applied for HUD funds. This has resulted in a Mental Health facility applying and receiving HUD funds the past two years and a CAP agency applying for funds in the 2016 NOFA. The Scoring Committee reviews and scores new applications for eligibility, meeting homeless unmet, priority needs in the area, Project design, HMIS and Coordinated entry capacity. All agencies that meet eligibility requirements are invited to submit a full application through esnaps.

1B-3. How often does the CoC invite new members to join the CoC through a publicly available invitation? Monthly

1C. Continuum of Care (CoC) Coordination

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1C-1. Does the CoC coordinate with Federal, State, Local, private and other entities serving homeless individuals and families and those at risk of homelessness in the planning, operation and funding of projects? Only select "Not Applicable" if the funding source does not exist within the CoC's geographic area.

Funding or Program Source	Coordinates with Planning, Operation and Funding of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Housing and service programs funded through Federal, State and local government resources.	Yes

1C-2. The McKinney-Vento Act, requires CoC's to participate in the Consolidated Plan(s) (Con Plan(s)) for the geographic area served by the CoC. The CoC Program Interim rule at 24 CFR 578.7 (c) (4) requires the CoC to provide information required to complete the Con Plan(s) within the CoC's geographic area, and 24 CFR 91.100(a)(2)(i) and 24 CFR 91.110 (b)(2) requires the State and local Con Plan jurisdiction(s) consult with the CoC. The following chart asks for the information about CoC and Con Plan jurisdiction coordination, as well as CoC and ESG recipient coordination.

CoCs can use the CoCs and Consolidated Plan Jurisdiction Crosswalk to assist in answering this question.

	Number
Number of Con Plan jurisdictions with whom the CoC geography overlaps	2
How many Con Plan jurisdictions did the CoC participate with in their Con Plan development process?	2
How many Con Plan jurisdictions did the CoC provide with Con Plan jurisdiction level PIT data?	2
How many of the Con Plan jurisdictions are also ESG recipients?	1
How many ESG recipients did the CoC participate with to make ESG funding decisions?	1
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	1

1C-2a. Based on the responses provided in 1C-2, describe in greater detail how the CoC participates with the Consolidated Plan jurisdiction(s) located in the CoC's geographic area and include the frequency and type of interactions between the CoC and the Consolidated Plan jurisdiction(s). (limit 1000 characters)

The COC is covered by a state Con Plan & St Cloud. For the state Con Plan, COC agencies were contacted through email, phone interviews, & hosted four local housing dialogues with the COC to discuss housing & community dev. needs & barriers, including the ranking of needs & activities for the state. The state convenes monthly 2 hour meetings with COC coordinators to cover strategies to address homelessness including ending veterans, chronic homelessness, eliminating transitions to homelessness in youth & adult systems of care, connecting homeless families to resources. The state coordinates with COCs to determine allocation of state & federal resources, develop coordinated entry, PIT counts, performance measurement & HMIS improvements. Representatives from the Minnesota Interagency Council on Homelessness attend all COC meetings to coordinate planning & strategies. The CoC worked with the City of St Cloud to develop their Con Plan by attending three 2 hour meetings in person.

1C-2b. Based on the response in 1C-2, describe how the CoC is working with ESG recipients to determine local ESG funding decisions and how the CoC assists in the development of performance standards and evaluation of outcomes for ESG-funded activities. (limit 1000 characters)

Minnesota's DHS OEO is the state ESG recipient. In the ESG RFP process, DHS OEO & Central CoC review, score & rank proposals & make funding recommendations. Central CoC had a committee that included a range of providers from all 13 counties within the CoC so geographic concerns were addressed using PIT count & HMIS data. DHS-OEO takes into consideration the CoC recommended funding levels, specific CoC feedback about ESG applicant performance, level of collaboration & local factors in funding decisions and has influenced OEO's overall plans for prevention/RRH distribution due to the lack of shelters in the outstate areas . State ESG & the CoC worked together to define and implement performance standards. The State ESG recipient has implemented a plan to forward the required semi-annual and annual ESG Performance Report to the CoC Coordinator for review. When relevant to ESG performance issues, monitoring letters issued by the State ESG recipient will be sent to the CoC Coordinator.

1C-3. Describe how the CoC coordinates with victim service providers and non-victim service providers (CoC Program funded and non-CoC funded) to ensure that survivors of domestic violence are provided housing and services that provide and maintain safety and security. Responses must address how the service providers ensure and maintain the safety and security of participants and how client choice is upheld. (limit 1000 characters)

The CoC has active involvement from victim service provider and the sexual assault center (both funded by the DOJ) and non-victim service providers to ensure survivors are provided with safe housing and services. Specifically, victim service providers were closely involved in developing the coordinated entry system and procedures to ensure that Coordinated Entry steps were trauma informed and that victims would be served safely and quickly by not using personal identifying information. The centralized housing crisis phone line includes a specific option to choose for victims to be directly connected to victim service providers 24 hours a day. The CoC also worked closely with State leaders developing the Olmstead Plan to identify questions and language that could ensure client choice is identified and upheld in our Coordinated Entry process. All programs are designed to ensure survivors have a choice as to which services they want and the location of the services.

1C-4. List each of the Public Housing Agencies (PHAs) within the CoC's geographic area. If there are more than 5 PHAs within the CoC's geographic area, list the 5 largest PHAs. For each PHA, provide the percentage of new admissions that were homeless at the time of admission between July 1, 2015 and June 30, 2016 and indicate whether the PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program from 7/1/15 to 6/30/16 who were homeless at entry	PHA has General or Limited Homeless Preference
St Cloud HRA	8.00%	No
Stearns County HRA		No
Brainerd HRA	29.00%	No
Todd County HRA	56.00%	No
Delano HRA		No

1C-5. Other than CoC, ESG, Housing Choice Voucher Programs and Public Housing, describe other subsidized or low-income housing opportunities that exist within the CoC that target persons experiencing homelessness. (limit 1000 characters)

Housing developments financed by Minnesota Housing with at least 4 Long-term Housing (LTH) units are prioritized for funding. Central CoC has over 40 units of LTH housing for families and over 80 units for singles. A 20 unit complex for individuals with Severe and Persistent Mental Illness is in the development stage and will have 4 units set aside for homeless with the remaining units having homeless as a priority. MN's Group Residential Housing (GRH) has provided hundreds of housing units available for homeless with a disability. In 2016 MN's LTH Supportive Services Fund provided Central CoC with funds for 45+ units of housing for homeless individuals and families. The CoC also has state funded Family Homeless Prevention and Assistance (FHPAP) funds used to prevent homelessness and rehouse homeless

households quickly. State funds also provide transitional housing to singles, families and youth in the CoC.

1C-6. Select the specific strategies implemented by the CoC to ensure that homelessness is not criminalized in the CoC's geographic area. Select all that apply.

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input checked="" type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 1000 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1D-1. Select the system(s) of care within the CoC's geographic area for which there is a discharge policy in place that is mandated by the State, the CoC, or another entity for the following institutions? Check all that apply.

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

1D-2. Select the system(s) of care within the CoC's geographic area with which the CoC actively coordinates with to ensure institutionalized persons that have resided in each system of care for longer than 90 days are not discharged into homelessness. Check all that apply.

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

1D-2a. If the applicant did not check all boxes in 1D-2, explain why there is no coordination with the institution(s) that were not selected and explain how the CoC plans to coordinate with the institution(s) to ensure persons

**discharged are not discharged into homelessness.
(limit 1000 characters)**

not applicable

1E. Centralized or Coordinated Assessment (Coordinated Entry)

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The CoC Program Interim Rule requires CoCs to establish a Centralized or Coordinated Assessment System which HUD refers to as the Coordinated Entry Process. Based on the recent Coordinated Entry Policy Brief, HUD's primary goals for the coordinated entry process are that assistance be allocated as effectively as possible and that it be easily accessible no matter where or how people present for assistance.

**1E-1. Explain how the CoC's coordinated entry process is designed to identify, engage, and assist homeless individuals and families that will ensure those who request or need assistance are connected to proper housing and services.
(limit 1000 characters)**

Central CoC developed a multiple door Coordinated Entry (CE) system. The CoC encompasses 13 counties, both urban & rural. Counties are divided into 3 hubs to accommodate our large region & ensures easy access. The CE system is advertised on websites, through outreach staff, drop-in centers, shelters, food shelves, Police, libraries, etc. People access CE in person or phone. The VI-SPDAT tool is used to determine vulnerability & appropriate housing. People are prioritized on the wait list by highest need/score/date using a google.doc spreadsheet. HHs are anonymous to avoid any bias. An agency matrix includes: Prevention, ES, PH, TH & lists agency services for: food, employment, youth, mental health, DV, addiction/recovery, veterans, legal aid, etc. Providers use the matrix to match homeless & near homeless to agencies. Those with the highest score are given first priority when an opening occurs. Agencies initiate contact HH with the highest score within 24 hours of an opening.

1E-2. CoC Program and ESG Program funded projects are required to participate in the coordinated entry process, but there are many other organizations and individuals who may participate but are not required to do so. From the following list, for each type of organization or individual, select all of the applicable checkboxes that indicate how that organization or individual participates in the CoC's coordinated entry process. If there are other organizations or persons who participate but are not on this list, enter the information in the blank text box, click "Save" at the bottom of

the screen, and then select the applicable checkboxes.

Organization/Person Categories	Participate s in Ongoing Planning and Evaluation	Makes Referrals to the Coordinate d Entry Process	Receives Referrals from the Coordinate d Entry Process	Operates Access Point for Coordinate d Entry Process	Participate s in Case Conferenci ng	Does not Participate	Does not Exist
Local Government Staff/Officials	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law Enforcement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local Jail(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EMT/Crisis Response Team(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable Housing Developer(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Housing Authorities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Youth Homeless Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Administrators/Homeless Liaisons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-CoC Funded Victim Service Organizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street Outreach Team(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeless or Formerly Homeless Persons	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Assault Center - trafficking	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kids Fighting Hunger	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
non coc funded providers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1F-1. For all renewal project applications submitted in the FY 2016 CoC Program Competition complete the chart below regarding the CoC's review of the Annual Performance Report(s).

How many renewal project applications were submitted in the FY 2016 CoC Program Competition?	15
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	1
How many renewal project application APRs were reviewed by the CoC as part of the local CoC competition project review, ranking, and selection process for the FY 2016 CoC Program Competition?	14
Percentage of APRs submitted by renewing projects within the CoC that were reviewed by the CoC in the 2016 CoC Competition?	100.00%

1F-2 - In the sections below, check the appropriate box(es) for each selection to indicate how project applications were reviewed and ranked for the FY 2016 CoC Program Competition. Written documentation of the CoC's publicly announced Rating and Review procedure must be attached.

Performance outcomes from APR reports/HMIS:	
% permanent housing exit destinations	<input checked="" type="checkbox"/>
% increases in income	<input checked="" type="checkbox"/>

Monitoring criteria:	
Utilization rates	<input checked="" type="checkbox"/>
Drawdown rates	<input checked="" type="checkbox"/>
Frequency or Amount of Funds Recaptured by HUD	<input checked="" type="checkbox"/>

Need for specialized population services:

Youth	<input checked="" type="checkbox"/>
Victims of Domestic Violence	<input type="checkbox"/>
Families with Children	<input type="checkbox"/>
Persons Experiencing Chronic Homelessness	<input checked="" type="checkbox"/>
Veterans	<input checked="" type="checkbox"/>
None:	<input type="checkbox"/>

1F-2a. Describe how the CoC considered the severity of needs and vulnerabilities of participants that are, or will be, served by the project applications when determining project application priority. (limit 1000 characters)

The CoC approved a scoring and ranking process that adopts the priorities in Notice CDP-14-012. We prioritized veterans, chronic homeless, local gaps in service, vulnerability of clients, use of the Coordinated Entry to serve those most vulnerable, active participation in the Coc, use of mainstreet services, low barriers to entry, increase in income; all are used to ensure those with the most severe and vulnerable are served first and served best.

1F-3. Describe how the CoC made the local competition review, ranking, and selection criteria publicly available, and identify the public medium(s) used and the date(s) of posting. Evidence of the public posting must be attached. (limit 750 characters)

On 7/11/16 the CoC emailed the HUD NOFA solicitation for new proposals to all agencies with instructions on submitting an intent to apply by 7/18 for renewals & 7/22 for new apps. & was posted on the CoC website & Facebook on 7/12 & distributed at public meetings. On 8/3 the scoring sheet was approved & sent out to all agencies. The Scoring sheet, rating & ranking procedures & date of scoring was posted on the CoC website & emailed out to all agencies. The Scoring Committee met on 8/25 & made scoring & ranking recommendations to the CoC Advisory Committee and was approved by the CoC advisory Committee on 8/29 & approved by the Board on 9/1. The Coordinated Application, approved scoring & ranking sheet & priority listing was posted on 9/9

1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts 09/09/2016

of the FY 2016 CoC Consolidated Application that included the final project application ranking? (Written documentation of the public posting, with the date of the posting clearly visible, must be attached. In addition, evidence of communicating decisions to the CoC's full membership must be attached).

1F-5. Did the CoC use the reallocation process in the FY 2016 CoC Program Competition to reduce or reject projects for the creation of new projects? (If the CoC utilized the reallocation process, evidence of the public posting of the reallocation process must be attached.) Yes

1F-5a. If the CoC rejected project application(s), on what date did the CoC and Collaborative Applicant notify those project applicants that their project application was rejected? (If project applications were rejected, a copy of the written notification to each project applicant must be attached.) 07/18/2016

1F-6. In the Annual Renewal Demand (ARD) is the CoC's FY 2016 CoC's FY 2016 Priority Listing equal to or less than the ARD on the final HUD-approved FY2016 GIW? Yes

1G. Continuum of Care (CoC) Addressing Project Capacity

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

1G-1. Describe how the CoC monitors the performance of CoC Program recipients. (limit 1000 characters)

Project APR's are evaluated by the CoC based on HUD's goals using a monitoring tool which includes: utilization rates, housing stability, length of time homeless, connecting HH to mainstream benefits, increasing income, exit to permanent housing, participation in CE process, etc. Keeping track of APR's in this manner, the CoC is able to notice where there may be performance issues & therefore can act on them. The HUD field office provides information to the COC on monitoring findings, cash draws or any issues with grantees. Technical assistance is provided to housing agencies that are struggling with performance as well as any grant administration issues. Funded programs provide a report on their program at the monthly COC meetings, where COC members can ask questions and provide feedback on the overall program design, performance and outcomes. MN Housing also works with housing providers to include tenant retention & lease mitigation practices to help residents maintain their housing

1G-2. Did the Collaborative Applicant include accurately completed and appropriately signed form HUD-2991(s) for all project applications submitted on the CoC Priority Listing? Yes

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2A-1. Does the CoC have a Governance Charter that outlines the roles and responsibilities of the CoC and the HMIS Lead, either within the Charter itself or by reference to a separate document like an MOU/MOA? In all cases, the CoC's Governance Charter must be attached to receive credit, In addition, if applicable, any separate document, like an MOU/MOA, must also be attached to receive credit. Yes

2A-1a. Include the page number where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document referenced in 2A-1. In addition, in the textbox indicate if the page number applies to the CoC's attached governance charter or attached MOU/MOA. pages 1-3 of the MOU

2A-2. Does the CoC have a HMIS Policies and Procedures Manual? If yes, in order to receive credit the HMIS Policies and Procedures Manual must be attached to the CoC Application. Yes

2A-3. Are there agreements in place that outline roles and responsibilities between the HMIS Lead and the Contributing HMIS Organization (CHOs)? Yes

2A-4. What is the name of the HMIS software Service Point

used by the CoC (e.g., ABC Software)?

2A-5. What is the name of the HMIS software vendor (e.g., ABC Systems)? Bowman

2B. Homeless Management Information System (HMIS) Funding Sources

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2B-1. Select the HMIS implementation coverage area: Statewide

*** 2B-2. In the charts below, enter the amount of funding from each funding source that contributes to the total HMIS budget for the CoC.**

2B-2.1 Funding Type: Federal - HUD

Funding Source	Funding
CoC	\$61,099
ESG	\$122
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$61,221

2B-2.2 Funding Type: Other Federal

Funding Source	Funding
Department of Education	\$0
Department of Health and Human Services	\$1,065
Department of Labor	\$0
Department of Agriculture	\$0
Department of Veterans Affairs	\$277
Other Federal	\$0
Other Federal - Total Amount	\$1,342

2B-2.3 Funding Type: State and Local

Funding Source	Funding
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City	\$0
County	\$0
State	\$25,647
State and Local - Total Amount	\$25,647

2B-2.4 Funding Type: Private

Funding Source	Funding
Individual	\$0
Organization	\$9,364
Private - Total Amount	\$9,364

2B-2.5 Funding Type: Other

Funding Source	Funding
Participation Fees	\$22,003
Other - Total Amount	\$22,003

2B-2.6 Total Budget for Operating Year	\$119,577
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2C. Homeless Management Information System (HMIS) Bed Coverage

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2C-1. Enter the date the CoC submitted the 2016 HIC data in HDX, (mm/dd/yyyy): 04/28/2016

2C-2. Per the 2016 Housing Inventory Count (HIC) Indicate the number of beds in the 2016 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 2016 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	214	53	146	90.68%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	237	8	166	72.49%
Rapid Re-Housing (RRH) beds	53	0	53	100.00%
Permanent Supportive Housing (PSH) beds	174	0	148	85.06%
Other Permanent Housing (OPH) beds	294	0	219	74.49%

2C-2a. If the bed coverage rate for any project type is below 85 percent, describe how the CoC plans to increase the bed coverage rate for each of these project types in the next 12 months. (limit 1000 characters)

The transitional beds not in HMIS are faith based or veteran specific programs. Plans include discussion with the Veterans Administration and entering their programs in HMIS in 2016 which will increase the HMIS percentage under transitional housing in the 2017 HIC count. The PSH and OPH housing units not in HMIS are veteran VASH units and housing in the tribal areas. Plans include that The tribal nations and VASH providers start entering into HMIS in 2016 as well. We anticipate that the HMIS bed coverage will increase dramatically in the 2017 HIC count due to these planned changes. However, the CoC continues to work with faith based shelter and transitional housing programs not utilizing HMIS to address difficulties associated with entry into HMIS including reducing end user fees, minimizing data entry requirements and exploration of funding resources to assist with the additional staffing needed to complete data entry into HMIS.

2C-3. If any of the project types listed in question 2C-2 above have a coverage rate below 85 percent, and some or all of these rates can be attributed to beds covered by one of the following program types, please indicate that here by selecting all that apply from the list below.

VA Grant per diem (VA GPD):	<input checked="" type="checkbox"/>
VASH:	<input checked="" type="checkbox"/>
Faith-Based projects/Rescue mission:	<input checked="" type="checkbox"/>
Youth focused projects:	<input checked="" type="checkbox"/>
Voucher beds (non-permanent housing):	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input type="checkbox"/>

2C-4. How often does the CoC review or assess its HMIS bed coverage? Quarterly

2D. Homeless Management Information System (HMIS) Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2D-1. Indicate the percentage of unduplicated client records with null or missing values and the percentage of "Client Doesn't Know" or "Client Refused" within the last 10 days of January 2016.

Universal Data Element	Percentage Null or Missing	Percentage Client Doesn't Know or Refused
3.1 Name	3%	3%
3.2 Social Security Number	3%	17%
3.3 Date of birth	0%	0%
3.4 Race	1%	0%
3.5 Ethnicity	1%	0%
3.6 Gender	0%	0%
3.7 Veteran status	1%	0%
3.8 Disabling condition	1%	1%
3.9 Residence prior to project entry	1%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	50%	0%
3.15 Relationship to Head of Household	3%	0%
3.16 Client Location	1%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	2%	0%

2D-2. Identify which of the following reports your HMIS generates. Select all that apply:

CoC Annual Performance Report (APR):	<input checked="" type="checkbox"/>
ESG Consolidated Annual Performance and Evaluation Report (CAPER):	<input checked="" type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

None	<input type="checkbox"/>
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2D-3. If you submitted the 2016 AHAR, how many AHAR tables (i.e., ES-ind, ES-family, etc) were accepted and used in the last AHAR?

12

2D-4. How frequently does the CoC review data quality in the HMIS?

Monthly

2D-5. Select from the dropdown to indicate if standardized HMIS data quality reports are generated to review data quality at the CoC level, project level, or both.

Both Project and CoC

2D-6. From the following list of federal partner programs, select the ones that are currently using the CoC's HMIS.

VA Supportive Services for Veteran Families (SSVF):	<input checked="" type="checkbox"/>
VA Grant and Per Diem (GPD):	<input checked="" type="checkbox"/>
Runaway and Homeless Youth (RHY):	<input checked="" type="checkbox"/>
Projects for Assistance in Transition from Homelessness (PATH):	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

2D-6a. If any of the Federal partner programs listed in 2D-6 are not currently entering data in the CoC's HMIS and intend to begin entering data in the next 12 months, indicate the Federal partner program and the anticipated start date. (limit 750 characters)

All HHS, HHS RHY, VA SSVF, GPD, and PATH programs currently enter data into HMIS including State funded programs: MN-DHS Healthy Transitions Homeless Prevention, MN-DHS Long Term Homeless Supportive Services

Fund, MN-DHS/OEO Emergency Services Program, MN-DHS/OEO Homeless Youth Act, MN-DHS/OEO Transitional Housing Program, MN Housing Family Homeless Prevention and Assistance Program, MN Ending Long Term Homelessness

2E. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

The data collected during the PIT count is vital for both CoC's and HUD. HUD needs accurate data to understand the context and nature of homelessness throughout the country, and to provide Congress and the Office of Management and Budget (OMB) with information regarding services provided, gaps in service, and performance. Accurate, high quality data is vital to inform Congress' funding decisions.

- 2E-1. Did the CoC approve the final sheltered PIT count methodology for the 2016 sheltered PIT count?** Yes
- 2E-2. Indicate the date of the most recent sheltered PIT count: (mm/dd/yyyy)** 01/28/2016
- 2E-2a. If the CoC conducted the sheltered PIT count outside of the last 10 days of January 2016, was an exception granted by HUD?** Not Applicable
- 2E-3. Enter the date the CoC submitted the sheltered PIT count data in HDX: (mm/dd/yyyy)** 04/28/2016

2F. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2F-1. Indicate the method(s) used to count sheltered homeless persons during the 2016 PIT count:

Complete Census Count:	<input checked="" type="checkbox"/>
Random sample and extrapolation:	<input type="checkbox"/>
Non-random sample and extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-2. Indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons:

HMIS:	<input checked="" type="checkbox"/>
HMIS plus extrapolation:	<input checked="" type="checkbox"/>
Interview of sheltered persons:	<input checked="" type="checkbox"/>
Sample of PIT interviews plus extrapolation:	<input type="checkbox"/>
	<input type="checkbox"/>

2F-3. Provide a brief description of your CoC's sheltered PIT count methodology and describe why your CoC selected its sheltered PIT count methodology. (limit 1000 characters)

A complete census count was planned and conducted incorporating the 14 HUD standards utilizing HMIS as the primary source. It was organized and completed in collaboration with a statewide count. Sites were identified,

reviewed, verified, and provided with written instructions and training to assure data was accurate. HMIS users were instructed to have data current and clean. Non-HMIS users were instructed on who to count, as well as how to collect and report non-duplicate data. Uniform data was collected from both HMIS and non-HMIS sites and was collected only on the night of January 22nd. The state HMIS system administrator, state PIT lead (MN ICH office), and CoC Coordinator reviewed data for quality and accuracy (de-duplication, compared to past counts, follow-up with sites) and presented count reports to CoC for review and approval prior to publishing. The CoC elected this methodology to assure count was as accurate as possible and coordinated with statewide efforts and goals.

2F-4. Describe any change in methodology from your sheltered PIT count in 2015 to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to the implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the PIT count). (limit 1000 characters)

not applicable

2F-5. Did your CoC change its provider coverage in the 2016 sheltered count? Yes

2F-5a. If "Yes" in 2F-5, then describe the change in provider coverage in the 2016 sheltered count. (limit 750 characters)

There were several changes in provider coverage in 2016 including the addition of a new DV ES provider, Mid MN Womens Center and a tribal ES, Mille Lacs Band Emergency shelter, which started operations in Central CoC. Also in the 2016 count, Bi-CAP TH changed to RRH, Mille Lacs Band started operating TH housing, and MACV (for Vets) started TH housing. There were several new RRH and OPH programs that began and were counted in the 2016 sheltered PIT count. Lastly, Mahube-Ottwa ES and TH moved into another CoC region.

2G. Continuum of Care (CoC) Sheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2G-1. Indicate the methods used to ensure the quality of the data collected during the sheltered PIT count:

Training:	<input checked="" type="checkbox"/>
Follow-up:	<input checked="" type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>
Non-HMIS de-duplication techniques:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>

2G-2. Describe any change to the way your CoC implemented its sheltered PIT count from 2015 to 2016 that would change data quality, including changes to training volunteers and inclusion of any partner agencies in the sheltered PIT count planning and implementation, if applicable. Do not include information on changes to actual sheltered PIT count methodology (e.g. change in sampling or extrapolation methods). (limit 1000 characters)

The Central CoC is consistently working to improve our PIT count planning and implementation related to data quality. In 2016, Central CoC continued to align with all MN CoC's in a coordinated effort with the State Office to Prevent and End Homelessness of Minnesota in order to work collectively as a state to plan the PIT count. Central CoC organized our training efforts to include the creation of training videos for our volunteers, as well as a uniform survey tool. Local CoC's reviewed the electronic survey data for accuracy and followed up with additional questions. Because of the TA, a state-wide timeline was established much earlier than in past years, which increased our volunteer education and recruitment efforts.

2H. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD requires CoCs to conduct an unsheltered PIT count every 2 years (biennially) during the last 10 days in January; however, HUD also strongly encourages CoCs to conduct the unsheltered PIT count annually at the same time that they conduct annual sheltered PIT counts. HUD required CoCs to conduct the last biennial PIT count during the last 10 days in January 2015.

2H-1. Did the CoC approve the final unsheltered PIT count methodology for the most recent unsheltered PIT count? Yes

2H-2. Indicate the date of the most recent unsheltered PIT count (mm/dd/yyyy): 01/28/2016

2H-2a. If the CoC conducted the unsheltered PIT count outside of the last 10 days of January 2016, or most recent count, was an exception granted by HUD? Not Applicable

2H-3. Enter the date the CoC submitted the unsheltered PIT count data in HDX (mm/dd/yyyy): 04/28/2016

2I. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Methods

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2I-1. Indicate the methods used to count unsheltered homeless persons during the 2016 or most recent PIT count:

Night of the count - complete census:	<input checked="" type="checkbox"/>
Night of the count - known locations:	<input type="checkbox"/>
Night of the count - random sample:	<input type="checkbox"/>
Service-based count:	<input type="checkbox"/>
HMIS:	<input type="checkbox"/>
	<input type="checkbox"/>

2I-2. Provide a brief description of your CoC's unsheltered PIT count methodology and describe why your CoC selected this unsheltered PIT count methodology. (limit 1000 characters)

Central MN CoC serves 13 counties which is both rural and urban. 13 PIT coordinators across the CoC contacted all service providers, police, county departments, schools, hospitals, churches, food shelves etc. to participate in the annual count using a statewide survey tool. Outreach efforts to find those living outside, in garages, ice houses, etc are conducted to get the most accurate information. PIT Coordinators were provided written instructions and training to assure for accuracy. Surveys used identifying information to help with de-duplication. Uniform data was collected only on the night of January 28. The state PIT lead, CoC Coordinator & County Coordinators reviewed data for quality and accuracy (de-duplication, compared to past counts, follow-up with sites) and presented count reports to CoC for review/approval prior to publishing. The CoC elected this methodology to assure the count was as accurate as possible and coordinated with statewide efforts and goals.

2I-3. Describe any change in methodology from your unsheltered PIT count in 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016, including any change in sampling or extrapolation method, if applicable. Do not include information on changes to implementation of your sheltered PIT count methodology (e.g., enhanced training or change in partners participating in the count). (limit 1000 characters)

A statewide Veterans registry was used to gather additional information regarding Veterans and connect them to resources as quickly as possible

2I-4. Has the CoC taken extra measures to identify unaccompanied homeless youth in the PIT count? Yes

2I-4a. If the response in 2I-4 was "no" describe any extra measures that are being taken to identify youth and what the CoC is doing for homeless youth. (limit 1000 characters)

NA

2J. Continuum of Care (CoC) Unsheltered Point-in-Time (PIT) Count: Data Quality

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

2J-1. Indicate the steps taken by the CoC to ensure the quality of the data collected for the 2016 unsheltered PIT count:

Training:	<input checked="" type="checkbox"/>
"Blitz" count:	<input type="checkbox"/>
Unique identifier:	<input checked="" type="checkbox"/>
Survey questions:	<input checked="" type="checkbox"/>
Enumerator observation:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

2J-2. Describe any change to the way the CoC implemented the unsheltered PIT count from 2015 (or 2014 if an unsheltered count was not conducted in 2015) to 2016 that would affect data quality. This includes changes to training volunteers and inclusion of any partner agencies in the unsheltered PIT count planning and implementation, if applicable. Do not include information on changes in actual methodology (e.g. change in sampling or extrapolation method). (limit 1000 characters)

A statewide Veterans registry was added to gather additional information regarding Veterans and connect them to resources as quickly as possible

3A. Continuum of Care (CoC) System Performance

Instructions

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

3A-1. Performance Measure: Number of Persons Homeless - Point-in-Time Count.

* 3A-1a. Change in PIT Counts of Sheltered and Unsheltered Homeless Persons

Using the table below, indicate the number of persons who were homeless at a Point-in-Time (PIT) based on the 2015 and 2016 PIT counts as recorded in the Homelessness Data Exchange (HDX).

	2015 PIT (for unsheltered count, most recent year conducted)	2016 PIT	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	696	669	-27
Emergency Shelter Total	297	276	-21
Safe Haven Total	0	0	0
Transitional Housing Total	194	226	32
Total Sheltered Count	491	502	11
Total Unsheltered Count	205	167	-38

3A-1b. Number of Sheltered Persons Homeless - HMIS.

Using HMIS data, enter the number of homeless persons who were served in a sheltered environment between October 1, 2014 and September 30, 2015 for each category provided.

	Between October 1, 2014 and September 30, 2015
Universe: Unduplicated Total sheltered homeless persons	1,564
Emergency Shelter Total	1,090
Safe Haven Total	0
Transitional Housing Total	535

3A-2. Performance Measure: First Time Homeless.

Describe the CoC's efforts to reduce the number of individuals and families who become homeless for the first time. Specifically, describe what the CoC is doing to identify risk factors of becoming homeless.

(limit 1000 characters)

The CoC takes the following steps to identify and reduce 1st time homelessness: 1)Discussions with food shelves, emergency services, homeless school liaisons, shelters, etc to determine risk factors of becoming homeless. 2) Use those risk factors and CE assessment tools to determine who would most likely become homeless. 3) Use a universal screening tool to ensure homeless prevention/diversion resources are provided to households most likely to access shelter. 4) Use State, county and private funded homeless prevention funding to assist those determined to become homeless without assistance. 4) Increase landlord education and engagement to prevent homelessness. 5) Family Homeless Prevention programs were required to establish target strategies to address the needs of households most likely to become homeless

3A-3. Performance Measure: Length of Time Homeless.

Describe the CoC’s efforts to reduce the length of time individuals and families remain homeless. Specifically, describe how your CoC has reduced the average length of time homeless, including how the CoC identifies and houses individuals and families with the longest lengths of time homeless.

(limit 1000 characters)

Central CoC reduces the length of time individuals and families remain homeless primarily through the Coordinated Entry (CE) process. All CoC & non CoC funded, ESG & Long Term Homeless agencies use this system to fill openings. Date of assessment to the date housing is secured is tracked through this process. Central CoC is able to match the most appropriate people to the proper program based on need & date of assessment. Households are matched with program requirements and eligibility criteria to ensure those with the deepest barriers & longest time homeless have first priority for housing. In addition, Central CoC has established performance measures for CE implementation including: length of time from identification to assessment, length of time from referral to contact, length of time from referral to housing. The CoC will continue to reduce the length of time homeless by increasing the number of Rapid Rehousing units & housing chronic homeless first in all PSH units.

*** 3A-4. Performance Measure: Successful Permanent Housing Placement or Retention.**

In the next two questions, CoCs must indicate the success of its projects in placing persons from its projects into permanent housing.

3A-4a. Exits to Permanent Housing Destinations:

Fill in the chart to indicate the extent to which projects exit program participants into permanent housing (subsidized or non-subsidized) or the retention of program participants in CoC Program-funded permanent

supportive housing.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in SSO, TH and PH-RRH who exited	257
Of the persons in the Universe above, how many of those exited to permanent destinations?	184
% Successful Exits	71.60%

3A-4b. Exit To or Retention Of Permanent Housing:
 In the chart below, CoCs must indicate the number of persons who exited from any CoC funded permanent housing project, except rapid re-housing projects, to permanent housing destinations or retained their permanent housing between October 1, 2014 and September 31, 2015.

	Between October 1, 2014 and September 30, 2015
Universe: Persons in all PH projects except PH-RRH	236
Of the persons in the Universe above, indicate how many of those remained in applicable PH projects and how many of those exited to permanent destinations?	209
% Successful Retentions/Exits	88.56%

3A-5. Performance Measure: Returns to Homelessness: Describe the CoCs efforts to reduce the rate of individuals and families who return to homelessness. Specifically, describe strategies your CoC has implemented to identify and minimize returns to homelessness, and demonstrate the use of HMIS or a comparable database to monitor and record returns to homelessness. (limit 1000 characters)

1) All providers are encouraged to attend training sessions on best practices for helping households maintain housing. Two training sessions were offered this year to all COC agencies. 2) The COC looks at the exit destinations for all programs to determine exits to homelessness. We work with programs that have unusual rates of people exiting to homelessness to improve housing retention. 3) The coordinated entry system is used to identify and quickly rehouse people returning to homelessness. 4) The Family Homelessness Prevention program provides an annual report of returns to homelessness using HMIS data. This HMIS report has recently been expanded for all homelessness assistance programs. The review of this data has helped to inform prevention targeting and RRH strategies. 5) Regular review of project performance has helped create improvements to service models including connection to income & mainstream resources, community supports, life skills, etc.

3A-6. Performance Measure: Job and Income Growth. Performance Measure: Job and Income Growth. Describe the CoC's specific strategies to assist CoC Program-funded projects to increase program participants' cash income from employment and non-employment non-cash sources.

(limit 1000 characters)

CoC funded projects implement service models that assist participants in obtaining unearned income benefits: unemployment, SSI, SSDI, TANF, WIC, SNAP, low income tax credit & VA benefits by connecting directly with employees in those programs to quickly obtain those benefits. Case managers will help clients fill out the applications and follow up to confirm benefits are received. Case Managers work closely with local workforce centers, veterans service providers, educational organizations, jobs & training programs, local employers & supported employment programs for people with disabilities to connect to job opportunities. DHS as the lead agency for SOAR & SSI provides training to SOAR advocates within CoC organizations. The Disability Linkage Line is used to help with SSI applications & access to other mainstream benefits. As a result 31% of clients were receiving employment income at exit & 81% received unearned income at exit according to the combined APR's for last year

3A-6a. Describe how the CoC is working with mainstream employment organizations to aid homeless individuals and families in increasing their income.

(limit 1000 characters)

The CoC projects connect clients to area workforce centers, Tri-CAP, MACV, Community Education, Independent Lifestyles, Wacosa, Catholic Charities, Express Employment, Doerty Employment to obtain and/or grow employment income. They provide job readiness programs such as: employment coaching, resume creation, interview practice, and training for specific careers. Two employment agencies work specifically with CoC funded agencies to provide employment options. Some CoC projects support clients by providing limited transportation and childcare assistance. The CoC Program funds 2 SSO projects (with Housing), 10 PSH and 3 RRH programs. Of these 15 projects 100% have a relationship with mainstream employment organizations and regularly connect clients with employment services

3A-7. What was the the criteria and decision-making process the CoC used to identify and exclude specific geographic areas from the CoC's unsheltered PIT count?

(limit 1000 characters)

not applicable

3A-7a. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. disasters)? No

**3A-7b. Did the CoC completely exclude geographic areas from the the most recent PIT count (i.e., no one counted there and, for communities using samples the area was excluded from both the sample and extrapolation) where the CoC determined that there were no unsheltered homeless people, including areas that are uninhabitable (e.g. deserts, wilderness, etc.)?
(limit 1000 characters)**

not applicable

**3A-8. Enter the date the CoC submitted the system performance measure data into HDX. The System Performance Report generated by HDX must be attached.
(mm/dd/yyyy)** 08/09/2016

**3A-8a. If the CoC was unable to submit their System Performance Measures data to HUD via the HDX by the deadline, explain why and describe what specific steps they are taking to ensure they meet the next HDX submission deadline for System Performance Measures data.
(limit 1500 characters)**

not applicable

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

Objective 1: Ending Chronic Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

To end chronic homelessness by 2017, HUD encourages three areas of focus through the implementation of Notice CPD 14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status.

1. Targeting persons with the highest needs and longest histories of homelessness for existing and new permanent supportive housing;
2. Prioritizing chronically homeless individuals, youth and families who have the longest histories of homelessness; and
3. The highest needs for new and turnover units.

3B-1.1. Compare the total number of chronically homeless persons, which includes persons in families, in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered chronically homeless persons	12	18	6
Sheltered Count of chronically homeless persons	9	12	3
Unsheltered Count of chronically homeless persons	3	6	3

3B-1.1a. Using the "Differences" calculated in question 3B-1.1 above, explain the reason(s) for any increase, or no change in the overall TOTAL number of chronically homeless persons in the CoC, as well as the change in the unsheltered count, as reported in the PIT count in 2016 compared to 2015. (limit 1000 characters)

3 large CH families totaling 8 people in shelters on the night of the pit count increased the total number of chronic homeless.

3B-1.2. Compare the total number of PSH beds (CoC Program and non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count, as compared to those identified on the 2015 Housing Inventory Count.

	2015	2016	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC.	33	22	-11

3B-1.2a. Explain the reason(s) for any increase, or no change in the total number of PSH beds (CoC program funded or non-CoC Program funded) that were identified as dedicated for use by chronically homeless persons on the 2016 Housing Inventory Count compared to those identified on the 2015 Housing Inventory Count. (limit 1000 characters)

Unfortunately not all the CH beds were listed in the 2016 HIC. There should be an additional 16 CH beds from the St Cloud HRA that were listed in 2015 but not in 2016. The beds were noted in their HUD application as dedicated CH units and actually served 31 CH last year. HRA S+C 5 was not listed in the 2016 HIC but does have 13 CH dedicated units and were listed in their HUD application and APR. HRA S+C 7 has an additional 4 CH beds that were not listed on the 2016 HIC but were listed in their HUD application. There should be a total of 55 dedicated CH Beds for the 2016 HIC compared to the XX that was reported. According to the CoC APR's a total of 72 CH resided in CoC funded units.

3B-1.3. Did the CoC adopt the Orders of Priority into their standards for all CoC Program funded PSH as described in Notice CPD-14-012: Prioritizing Persons Experiencing Chronic Homelessness in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status? Yes

3B-1.3a. If "Yes" was selected for question 3B-1.3, attach a copy of the CoC's written standards or other evidence that clearly shows the incorporation of the Orders of Priority in Notice CPD 14-012 and indicate the page(s) for all documents where the Orders of Priority are found. pg 13

3B-1.4. Is the CoC on track to meet the goal of ending chronic homelessness by 2017? Yes

This question will not be scored.

3B-1.4a. If the response to question 3B-1.4 was “Yes” what are the strategies that have been implemented by the CoC to maximize current resources to meet this goal? If “No” was selected, what resources or technical assistance will be implemented by the CoC to reach to goal of ending chronically homelessness by 2017? (limit 1000 characters)

Central CoC encompasses 13 counties, both urban and rural spread out over several hundred miles. The CoC has reduced the number of unsheltered CH from a high of 51 in 2013 to 6 in 2016 and have reduced sheltered CH from a high of 63 in 2013 to 12 in 2016. Our strategies of dedicating and prioritizing CH in ALL our housing developments have practically reduced our CH numbers to functional zero for the entire CoC region. This was accomplished by using the Coordinated entry and VI-SPDAT and adopting APD-14- 12 ensuring those with the highest barriers and longer duration of homelessness were quickly connected to housing and services

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

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

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

HUD will evaluate CoC's based on the extent to which they are making progress to achieve the goal of ending homelessness among households with children by 2020.

3B-2.1. What factors will the CoC use to prioritize households with children during the FY2016 Operating year? (Check all that apply).

Vulnerability to victimization:	<input type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder):	<input type="checkbox"/>
Head of household has mental/physical disabilities:	<input type="checkbox"/>
assessment tool VI-SPDAT	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.2. Describe the CoC's strategies including concrete steps to rapidly rehouse every household with children within 30 days of those families becoming homeless. (limit 1000 characters)

We are tracking assessment dates in coordinated entry, and can closely monitor the time from homeless to housing. We work with the coordinated entry referring providers and program providers to track and address issues that may delay housing access. This might include helping participants secure necessary documents for housing applications, locating housing, negotiating with owners to accept applicants with housing barriers, processing program eligibility documentation, etc. We are requesting a new rapid rehousing bonus project to increase the number of available slots for families. In addition to the COC and ESG programs, we also have state funded programs for prevention, diversion, rapid rehousing and permanent supportive housing including the Family Homelessness Prevention and Assistance Program which is a nimble program that can be adapted to meet changing needs for homelessness assistance in our region. Providers utilize Housing First to assure swift entry into their programs

3B-2.3. Compare the number of RRH units available to serve families from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve families in the HIC:	11	13	2

3B-2.4. How does the CoC ensure that emergency shelters, transitional housing, and permanent housing (PSH and RRH) providers within the CoC do not deny admission to or separate any family members from other members of their family based on age, sex, gender or disability when entering shelter or housing? (check all strategies that apply)

CoC policies and procedures prohibit involuntary family separation:	<input checked="" type="checkbox"/>
There is a method for clients to alert CoC when involuntarily separated:	<input type="checkbox"/>
CoC holds trainings on preventing involuntary family separation, at least once a year:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
None:	<input type="checkbox"/>

3B-2.5. Compare the total number of homeless households with children in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

PIT Count of Homelessness Among Households With Children

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	105	113	8
Sheltered Count of homeless households with children:	81	100	19
Unsheltered Count of homeless households with children:	24	13	-11

3B-2.5a. Explain the reason(s) for any increase, or no change in the total number of homeless households with children in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

The number of sheltered homeless households increased from 81 to 100 due to the opening of a homeless shelter on a Native American reservation that was not open in the 2015 PIT count. At the same time the number of unsheltered homeless households was reduced from 24 to 13 because the shelter on the Native American reservation was able to house those who would have been unsheltered if the shelter hadn't opened. Also agencies were able to house unsheltered in RRH and additional Long Term Homeless units that opened up in late 2015

3B-2.6. From the list below select the strategies to the CoC uses to address the unique needs of unaccompanied homeless youth including youth under age 18, and youth ages 18-24, including the following.

Human trafficking and other forms of exploitation?	Yes
LGBTQ 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
Unaccompanied minors/youth below the age of 18?	Yes

3B-2.6a. Select all strategies that the CoC uses to address homeless youth trafficking and other forms of exploitation.

Diversion from institutions and decriminalization of youth actions that stem from being trafficked:	<input checked="" type="checkbox"/>
Increase housing and service options for youth fleeing or attempting to flee trafficking:	<input checked="" type="checkbox"/>
Specific sampling methodology for enumerating and characterizing local youth trafficking:	<input checked="" type="checkbox"/>

Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input checked="" type="checkbox"/>
Community awareness training concerning youth trafficking:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.7. What factors will the CoC use to prioritize unaccompanied youth including youth under age 18, and youth ages 18-24 for housing and services during the FY 2016 operating year? (Check all that apply)

Vulnerability to victimization:	<input checked="" type="checkbox"/>
Length of time homeless:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Lack of access to family and community support networks:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
N/A:	<input type="checkbox"/>

3B-2.8. Using HMIS, compare all unaccompanied youth including youth under age 18, and youth ages 18-24 served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2014 (October 1, 2013-September 30, 2014) and FY 2015 (October 1, 2014 - September 30, 2015).

	FY 2014 (October 1, 2013 - September 30, 2014)	FY 2015 (October 1, 2014 - September 30, 2105)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	21	54	33

3B-2.8a. If the number of unaccompanied youth and children, and youth-headed households with children served in any HMIS contributing program who were in an unsheltered situation prior to entry in FY 2015 is lower than FY 2014 explain why.

(limit 1000 characters)
 not applicable

3B-2.9. Compare funding for youth homelessness in the CoC's geographic area in CY 2016 and CY 2017.

	Calendar Year 2016	Calendar Year 2017	Difference
Overall funding for youth homelessness dedicated projects (CoC Program and non-CoC Program funded):	\$882,544.00	\$925,000.00	\$42,456.00
CoC Program funding for youth homelessness dedicated projects:	\$15,000.00	\$25,000.00	\$10,000.00
Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$867,544.00	\$900,000.00	\$32,456.00

3B-2.10. To what extent have youth services and educational representatives, and CoC representatives participated in each other's meetings between July 1, 2015 and June 30, 2016?

Cross-Participation in Meetings	# Times
CoC meetings or planning events attended by LEA or SEA representatives:	36
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	70
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	100

**3B-2.10a. Based on the responses in 3B-2.10, describe in detail how the CoC collaborates with the McKinney-Vento local educational authorities and school districts.
 (limit 1000 characters)**

Central CoC is broken down into 3 regions; Northern, Eastern, St Cloud Central. Youth service workers work closely with all Homeless School Liaisons in their area to ensure they are informed of available resources & are aware of referral process. Youth workers have provided written guidelines to homeless liaisons, Connections are made with Family services collaborative staff. Homeless liaisons attend & participate in several community homeless meetings with CoC members & Youth Outreach workers, including: FHPAP, United Way Youth Council, Central MN Human Trafficking Committee, SELF Advisory Committee, Student's IN common Committee, Youth Services Advisory Board. Mn Department of Education educates liaisons & connects them to CoC's. Youth Service providers, area school Liaisons, social service agencies, law enforcement are very involved in working together to ensure youth are attending some form of educational facility and attend regularly.

3B-2.11. How does the CoC make sure that homeless individuals and families who become homeless are informed of their eligibility for and receive access to educational services? Include the policies and procedures that homeless service providers (CoC and ESG Programs) are required to follow. (limit 2000 characters)

All CoC & ESG Youth service providers (YSPs) collaborate with Homeless Liaison staff at various schools when they come in contact with homeless youth to ensure they are enrolled in school. YSPs have a list of Liaisons & make contact to ensure they are aware of available services for homeless youth/families. YSPs participate in committees that have educational staff present. Family Services Collaborative Teams have first contact with families in schools with home issues. Students In Common group at a High School identifies high risk students & provide services to the youth/family. Educational staff, juvenile justice & child welfare agencies attend the Area Youth Services Advisory Committee. High risk youth attend The SHOP youth center daily. All programs incorporate an education plan to determine needs & enroll youth in school. Family households' case plans include ensuring children are enrolled & attending school & reviewed frequently. ROI's are completed to ensure there is communication between the school or head start & program staff. The Red Path program is for youth aging out of care & provides Independent Living Skills classes for youth referred by county social workers, group homes, or schools. All homeless assistance projects that serve households with children are expected to comply with the following policies: Identify staff who have primary responsibility for school attendance. 2. Ensure all homeless families are informed of the McKinney Vento Act to ensure that their children are able to maintain enrollment in school. Advocate for families with their school district to ensure transportation is arranged. Track school attendance for all children served within programs & help families to resolve any barriers that contribute to absences. Assist families in developing education goals. Ensure all family members are connected to relevant educational resources in the community. Assist families with children ages 3-5 to apply for the Head Start.

3B-2.12. Does the CoC or any HUD-funded projects within the CoC have any written agreements with a program that services infants, toddlers, and youth children, such as Head Start; Child Care and Development Fund; Healthy Start; Maternal, Infant, Early Childhood Home Visiting programs; Public Pre-K; and others? (limit 1000 characters)

New Pathways has a written agreement with Lakes & Pines Head Start to provide on-site Head Start programming to children zero to school age. Transportation is provided to families to a local socialization group hosted by Head Start to help develop the social skills of the children. Bi-CAP and Lakes & Pines (both programs funded by Central CoC) have an in-house Head Start Program. Both work internally to make sure eligible children/families obtain Head Start services. VOA does not have a written agreement but Head Start visitors provide in-home services for preschool children. Lutheran Social Services doesn't have written agreements but refers to TCC for early Head Start for all households. They also work with counties for family preservation & parenting classes & refer to LAPS, (pregnancy center) for households that are expecting to ensure they get proper prenatal care and support. Pre-K children & families are connected to Collaborative Works Program and homeless

liaisons

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

Objective 3: Ending Veterans Homelessness

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

Opening Doors outlines the goal of ending Veteran homelessness by the end of 2016. The following questions focus on the various strategies that will aid communities in meeting this goal.

3B-3.1. Compare the total number of homeless Veterans in the CoC as reported by the CoC for the 2016 PIT count compared to 2015 (or 2014 if an unsheltered count was not conducted in 2015).

	2015 (for unsheltered count, most recent year conducted)	2016	Difference
Universe: Total PIT count of sheltered and unsheltered homeless veterans:	29	25	-4
Sheltered count of homeless veterans:	19	24	5
Unsheltered count of homeless veterans:	10	1	-9

3B-3.1a. Explain the reason(s) for any increase, or no change in the total number of homeless veterans in the CoC as reported in the 2016 PIT count compared to the 2015 PIT count. (limit 1000 characters)

There was a decrease in unsheltered Vet homeless from 10 in 2015 to 1 in 2016. There was an increase in the sheltered Veteran homeless from 19 to 24 due to 5 more units of transitional housing becoming available.

3B-3.2. Describe how the CoC identifies, assesses, and refers homeless veterans who are eligible for Veterean's Affairs services and housing to appropriate reources such as HUD-VASH and SSVF. (limit 1000 characters)

CoC partners participate in the Homeless Veteran Registry, a state-operated

by-name list of Veterans experiencing homelessness. Veterans join the Registry through a homeless service provider or by calling a toll-free hotline (888-LinkVet). Registry case review meetings occur every other week to create housing plans for every Veteran on the Registry. Involved partners include CoC-funded programs, VA (representing HUD-VASH, GPD, CRRC, and other resources), county and local government staff, the Minnesota Department of Veterans Affairs, and others. As part of the case review process, Veterans not connected with resources they may be eligible to receive -- e.g., HUD-VASH, various state and federal Veteran benefits, or homeless-specific programs or services including accessing CoC-funded vacancies through coordinated entry - are connected with those programs and services. Several partners, including SSVF grantees, VA, and MDVA, also operate dedicated Veteran outreach programs.

3B-3.3. Compare the total number of homeless Veterans in the CoC and the total number of unsheltered homeless Veterans in the CoC, as reported by the CoC for the 2016 PIT Count compared to the 2010 PIT Count (or 2009 if an unsheltered count was not conducted in 2010).

	2010 (or 2009 if an unsheltered count was not conducted in 2010)	2016	% Difference
Total PIT Count of sheltered and unsheltered homeless veterans:	36	25	-30.56%
Unsheltered Count of homeless veterans:	15	1	-93.33%

3B-3.4. Indicate from the dropdown whether you are on target to end Veteran homelessness by the end of 2016. Yes

This question will not be scored.

3B-3.4a. If "Yes", what are the strategies being used to maximize your current resources to meet this goal? If "No" what resources or technical assistance would help you reach the goal of ending Veteran homelessness by the end of 2016? (limit 1000 characters)

Strong coordination across community resources, led by the Saint Cloud VA Health System and its HUD-VASH program operated in partnership with the St. Cloud HRA, has been most helpful to the dramatic reductions in the number of Veterans experiencing homelessness in our region. In addition, a new dedicated development focused on housing Veterans at risk of or experiencing homelessness will help ensure that once the goal is reached, this program is sustained.

4A. Accessing Mainstream Benefits

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4A-1. Does the CoC systematically provide information to provider staff about mainstream benefits, including up-to-date resources on eligibility and program changes that can affect homeless clients? Yes

4A-2. Based on the CoC's FY 2016 new and renewal project applications, what percentage of projects have demonstrated they are assisting project participants to obtain mainstream benefits? This includes all of the following within each project: transportation assistance, use of a single application, annual follow-ups with participants, and SOAR-trained staff technical assistance to obtain SSI/SSDI?

FY 2016 Assistance with Mainstream Benefits

Total number of project applications in the FY 2016 competition (new and renewal):	15
Total number of renewal and new project applications that demonstrate assistance to project participants to obtain mainstream benefits (i.e. In a Renewal Project Application, "Yes" is selected for Questions 2a, 2b and 2c on Screen 4A. In a New Project Application, "Yes" is selected for Questions 5a, 5b, 5c, 6, and 6a on Screen 4A).	15
Percentage of renewal and new project applications in the FY 2016 competition that have demonstrated assistance to project participants to obtain mainstream benefits:	100%

4A-3. List the organizations (public, private, non-profit and other) that you collaborate with to facilitate health insurance enrollment, (e.g., Medicaid, Medicare, Affordable Care Act options) for program participants. For each organization you partner with, detail the specific outcomes resulting from the partnership in the establishment of benefits. (limit 1000 characters)

Results for 12 months: TCC a CoC member has a MNsure Navigator program with these results. Clients Visited Uninsured 443; People Provided MNsure Outreach 599: Individuals Successfully Enrolled 449: Individuals Assisted with Enrollment 552

Tri-CAP a CoC agency has a formal partnership with Legal Aid, TCC, African Women's Alliance, Catholic Charities and St Cloud State University to provide affordable Care Act outreach, referral and navigator services. Tri-CAP screens all participants for health enrollment and refers to a navigator for health care

services. This resulted in over 100 families enrolled
 Central MN Council on Ageing has Insurance Counselors to assist in obtaining
 health insurance from the VA, Medicare, Medicare Part D, MNSure, Medicaid
 with the following results:
 Lakes & Pines/Central CoC Navigators assisted with health care enrollment
 with 75% enrolled in Medicaid and 25% were enrolled in other health plans.
 Over 500 children were served

4A-4. What are the primary ways the CoC ensures that program participants with health insurance are able to effectively utilize the healthcare benefits available to them?

Educational materials:	<input checked="" type="checkbox"/>
In-Person Trainings:	<input checked="" type="checkbox"/>
Transportation to medical appointments:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not Applicable or None:	<input type="checkbox"/>

4B. Additional Policies

Instructions:

For guidance on completing this form, please reference the FY 2016 CoC Application Detailed Instructions and the FY 2016 CoC Program Competition NOFA. Please submit technical questions to the HUD Exchange Ask A Question.

4B-1. Based on the CoCs FY 2016 new and renewal project applications, what percentage of Permanent Housing (PSH and RRH), Transitional Housing (TH), and SSO (non-Coordinated Entry) projects in the CoC are low barrier?

FY 2016 Low Barrier Designation

Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO project applications in the FY 2016 competition (new and renewal):	15
Total number of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2016 competition:	13
Percentage of PH (PSH and RRH), TH and non-Coordinated Entry SSO renewal and new project applications in the FY 2016 competition that will be designated as "low barrier":	87%

4B-2. What percentage of CoC Program-funded Permanent Supportive Housing (PSH), Rapid Re-Housing (RRH), SSO (non-Coordinated Entry) and Transitional Housing (TH) FY 2016 Projects have adopted a Housing First approach, meaning that the project quickly houses clients without preconditions or service participation requirements?

FY 2016 Projects Housing First Designation

Total number of PSH, RRH, non-Coordinated Entry SSO, and TH project applications in the FY 2016 competition (new and renewal):	15
Total number of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications that selected Housing First in the FY 2016 competition:	13
Percentage of PSH, RRH, non-Coordinated Entry SSO, and TH renewal and new project applications in the FY 2016 competition that will be designated as Housing First:	87%

4B-3. What has the CoC done to ensure awareness of and access to housing and supportive services within the CoC's geographic area to persons that could benefit from CoC-funded programs but are not currently participating in a CoC funded program? In particular, how does the CoC reach out to for persons that are least likely to request housing or services in the absence of special outreach?

Direct outreach and marketing:	<input checked="" type="checkbox"/>
--------------------------------	-------------------------------------

Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input checked="" type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input checked="" type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-4. Compare the number of RRH units available to serve populations from the 2015 and 2016 HIC.

	2015	2016	Difference
RRH units available to serve all populations in the HIC:	15	19	4

4B-5. Are any new proposed project applications requesting \$200,000 or more in funding for housing rehabilitation or new construction? No

4B-6. If "Yes" in Questions 4B-5, then describe the activities that the project(s) will undertake to ensure that employment, training and other economic opportunities are directed to low or very low income persons to comply with section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) and HUD's implementing rules at 24 CFR part 135?

(limit 1000 characters)

Not applicable

4B-7. Is the CoC requesting to designate one or more of its SSO or TH projects to serve families with children and youth defined as homeless under other Federal statutes? No

4B-7a. If "Yes", to question 4B-7, describe how the use of grant funds to serve such persons is of equal or greater priority than serving persons

defined as homeless in accordance with 24 CFR 578.89. Description must include whether or not this is listed as a priority in the Consolidated Plan(s) and its CoC strategic plan goals. CoCs must attach the list of projects that would be serving this population (up to 10 percent of CoC total award) and the applicable portions of the Consolidated Plan. (limit 2500 characters)

Not applicable

4B-8. Has the project been affected by a major disaster, as declared by the President Obama under Title IV of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (Public Law 93-288) in the 12 months prior to the opening of the FY 2016 CoC Program Competition? No

4B-8a. If "Yes" in Question 4B-8, describe the impact of the natural disaster on specific projects in the CoC and how this affected the CoC's ability to address homelessness and provide the necessary reporting to HUD. (limit 1500 characters)

not applicable

4B-9. Did the CoC or any of its CoC program recipients/subrecipients request technical assistance from HUD since the submission of the FY 2015 application? This response does not affect the scoring of this application. Yes

4B-9a. If "Yes" to Question 4B-9, check the box(es) for which technical assistance was requested.

This response does not affect the scoring of this application.

CoC Governance:	<input checked="" type="checkbox"/>
CoC Systems Performance Measurement:	<input type="checkbox"/>
Coordinated Entry:	<input type="checkbox"/>
Data reporting and data analysis:	<input type="checkbox"/>
HMIS:	<input checked="" type="checkbox"/>

Homeless subpopulations targeted by Opening Doors: veterans, chronic, children and families, and unaccompanied youth:	<input type="checkbox"/>
Maximizing the use of mainstream resources:	<input type="checkbox"/>
Retooling transitional housing:	<input type="checkbox"/>
Rapid re-housing:	<input type="checkbox"/>
Under-performing program recipient, subrecipient or project:	<input type="checkbox"/>
	<input type="checkbox"/>
Not applicable:	<input type="checkbox"/>

4B-9b. Indicate the type(s) of Technical Assistance that was provided, using the categories listed in 4B-9a, provide the month and year the CoC Program recipient or sub-recipient received the assistance and the value of the Technical Assistance to the CoC/recipient/sub recipient involved given the local conditions at the time, with 5 being the highest value and a 1 indicating no value.

Type of Technical Assistance Received	Date Received	Rate the Value of the Technical Assistance
HMIS Governance	03/01/2016	5

4C. 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	Northern Pines in...	09/02/2016
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	public posting ev...	09/02/2016
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	rating and ranking	09/12/2016
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	public posting ra...	09/02/2016
05. CoCs Process for Reallocating	Yes	reallocation proc...	09/06/2016
06. CoC's Governance Charter	Yes	gov charter with ...	09/09/2016
07. HMIS Policy and Procedures Manual	Yes	HMIS policies and...	09/02/2016
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 documentation	09/07/2016
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	CoC HMIS MOU	09/06/2016
11. CoC Written Standards for Order of Priority	No	written standards...	09/06/2016
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	System performanc...	08/19/2016
14. Other	No		
15. Other	No	hud proof of post...	09/09/2016

Attachment Details

Document Description: Northern Pines intent not to apply

Attachment Details

Document Description: public posting evidence

Attachment Details

Document Description: rating and ranking

Attachment Details

Document Description: public posting rating ranking process

Attachment Details

Document Description: reallocation process in governance charter pg 17

Attachment Details

Document Description: gov charter with board approval

Attachment Details

Document Description: HMIS policies and procedures

Attachment Details

Document Description:

Attachment Details

Document Description: PHA documentation

Attachment Details

Document Description: CoC HMIS MOU

Attachment Details

Document Description: written standards pg13,14 governance charter

Attachment Details

Document Description:

Attachment Details

Document Description: System performance measures

Attachment Details

Document Description: percentage reallocated

Attachment Details

Document Description: hud proof of posting application

Submission Summary

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

Page	Last Updated
1A. Identification	08/18/2016
1B. CoC Engagement	09/06/2016
1C. Coordination	09/08/2016
FY2016 CoC Application	Page 62
	09/13/2016

1D. CoC Discharge Planning	08/18/2016
1E. Coordinated Assessment	09/07/2016
1F. Project Review	09/12/2016
1G. Addressing Project Capacity	09/07/2016
2A. HMIS Implementation	08/18/2016
2B. HMIS Funding Sources	09/12/2016
2C. HMIS Beds	09/12/2016
2D. HMIS Data Quality	08/30/2016
2E. Sheltered PIT	09/12/2016
2F. Sheltered Data - Methods	09/07/2016
2G. Sheltered Data - Quality	09/07/2016
2H. Unsheltered PIT	09/12/2016
2I. Unsheltered Data - Methods	09/07/2016
2J. Unsheltered Data - Quality	08/19/2016
3A. System Performance	09/07/2016
3B. Objective 1	09/07/2016
3B. Objective 2	09/09/2016
3B. Objective 3	09/08/2016
4A. Benefits	09/08/2016
4B. Additional Policies	09/07/2016
4C. Attachments	09/12/2016
Submission Summary	No Input Required

This intent to apply form was received from Northern Pines stating they would not be reapplying for HUD 2016 NOFA funds so no rejection letter was needed

**2016 Continuum of Care
Intent to Apply & Threshold Assessment**

Any new or renewal project wishing to apply for the Continuum of Care funding in the 2015 FY HUD CoC competition must completed the following information and submit to the CoC by the deadline. Your project will not be eligible to apply in the FY15 competition if you do not submit this form by the deadline. Please complete the proposed project overview and review each of the following ranking categories, marking those questions that apply to your project. **Deadline to submit this Intent for current applicants is July 18, 2016. Intent to apply for new applicants is July 22, 2016**

Northern Pines Mental Health Center
Name of Agency

Scattered Sites & Shelter Plus Care
Name of Project

Mary Hansen
Primary Contact

mhanzen@npmh.org
Contact Email

082515198
DUNS #

658Z9
SAM #

Agency is applying for 2016 NOFA funds is not applying for 2016 NOFA funds

Project Description:

1. Type of funding requested:

New:

What type of new project? BONUS Reallocation

Renewal

Are you interested in reducing your renewal grant for reallocation? Yes No

If yes, by what amount? _____

Please describe how participants will not become homeless as a result:

2. The project component is:

The project component is:

Permanent Housing

Supportive Services Only

Transitional Housing

HMIS

Rapid Rehousing

Support Services Only – Coordinated Entry

3. Target Population: Singles # _____ Families # _____ Youth # _____

4. Proposed Start Date: _____, 2017 Proposed End Date: _____, 2018

5. Amount of funding requested: \$ _____

Brief Project Description (**NEW projects ONLY**):

Coordinated Assessment & Referral

- The applicant does NOT agree to participate in the CoC.
- The applicant agrees to participant in Coordinated Assessment & Referral.

CoC Participation

- The applicant agrees to regularly attend CoC meetings and participate on a committee.
- The applicant agency agrees to provide project level data to the CoC by:
 - a) Participating in the annual point-in-time sheltered and unsheltered count;
 - b) Submitting program reports to the CoC in a timely manner;
 - c) Participating in an annual CoC Planning, Gaps Analysis and Needs Assessment;
 - d) Submitting required AHAR, HIC, Pulse, and GIW reports in a timely manner; and
 - e) Giving the Local System Administrator administrative access to your all programs reported in the HIC or providing necessary waiver request to CoC and submitting required data in a timely manner.

HMIS

- Applicant does NOT currently utilize HMIS and does not intend to if funded.
- Applicant does NOT currently utilize HMIS, but agrees to utilize if funded.
- Applicant does currently utilize HMIS and assures compliance with:
 - Unique user name and password
 - Secure location for equipment
 - Locking Screen Savers
 - Virus protection with auto update
 - Individual or network firewalls
 - Restrictions on access to HMIS via public forums
 - Compliance with HMIS policy and procedures manual
 - Validation of off-site storage of HMIS data

Services:

Please check ALL that apply to your program:

- Applicant assures that program will have policies that ensure all children are enrolled in school and connected to appropriate services within the community
- Applicant assures that case managers will systematically assist clients in completing applications for mainstream benefits.
- Applicants assure that staff will systematically follow-up to ensure mainstream benefits are received.
- Applicant assures that transportation assistance is provided to clients to attend mainstream benefit appointments, employment training, or job.
- Homeless assistance providers use a single application form for four or more mainstream programs.

- Applicant agrees that all participants will come from the streets, emergency shelter, transitional housing (entering as homeless), institution, or place not meant for human habitation.

Chronic Homeless Preference (New and Renewal PSH Projects ONLY!)

- Applicant agrees to give preference to Chronic Homeless when filling vacant units.
- Applicant does NOT agree to give preference to Chronic Homeless when filling vacant units.

Homeless Preference (New and Renewal PSH and RRH Projects ONLY!)

- Applicant agrees to give preference to Chronic Homeless when filling vacant units.
- Applicant does NOT agree to give preference to Chronic Homeless when filling vacant units.
- Applicant has low barriers to program entry.
- Applicant has several barriers to program entry; e.x. sobriety, criminal background, etc.
- Applicant uses a housing first model.
- Applicant does not use a housing first model.

Annual Progress Report: (RENEWAL Projects ONLY!)

HUD requires that applicants submit an Annual Progress Report (APR)

- Applicant did NOT submit an APR for the most recent grant year.
- Applicant submitted an APR for the most recent grant year.

Date of APR: _____

Are there any outstanding findings still unresolved? Yes No If yes, explain:

Project Quality Threshold: (RENEWAL applicants ONLY!)

Please check ALL of the following thresholds that apply to your program/agency:

- Draws down from LOCCS at least quarterly
- Submitted annual APR to CoC and HUD by deadline
- Assists participants achieve and maintain independent living (Does not apply to HMIS)
- NO: Audit findings, history of financial mismanagement, untimely expenditures, major capacity issues affecting program outcomes, history of ineligible persons, or spending.
- Compliant with Fair Housing and Equal Opportunity
- NO: HUD resolutions of outstanding suspension
- NO: Delinquent federal debts or outstanding arrears to HUD.
- Applicant demonstrates all timeliness standards for grants being renewed, including that standards for the expenditure of grant funds have been met;

Project Quality Threshold: (NEW HMIS applicants ONLY!)

Please check ALL of the following thresholds that apply to your program/agency:

- Evidence the HMIS will effectively be integrated into current CoC HMIS (1 point)
- HMIS project implementation is described in application (1 point)
- At least 50% of beds in HIC are included in CoC HMIS (1 point)
- HMIS applicant collects all Universal Data Elements (1 point)
- HMIS applicant unduplicates client records (1 point)

- HMIS applicant produced all HUD-required reports (1 point)

Project Quality Thresholds: (NEW PH Applicants ONLY!)

Please check ALL of the following thresholds that apply to your program/agency:

- Type, scale and location fit needs of participants (1 point)
- Type, scale and location of supportive services fits needs and transportation for participants (1 point)
- Participants are given individual and specific assistance to obtain mainstream benefits (1point)
- Participants helped to obtain and remain in PH (1 point)
- Participants are assisted to both increase income and live independently using mainstream housing and services (1 point)
- At least 75% of proposed participants will come from street or other locations not meant for human habitation, emergency shelters, safe havens, or transitional housing (if originally from the streets or emergency shelters). (1 point)
- Services and housing is accessible to amenities (grocery, pharmacies, etc.) (1 point)
- Program/activities will be administered in most integrated setting appropriate for persons with disabilities. Persons with disabilities interact with person w/out disabilities. (1 point);
- Applicant has the history/capacity to complete timely and accurate drawdowns, performance reports. (1 point)

Collaborative Applicant Quality Threshold: (NEW Collaborative Applicant ONLY!)

Please check ALL of the following thresholds that apply to your program/agency:

- Proposed planning activities are compliant with 24 CFR 578.2 (2 points)
- Proposed budget will improve the CoC's ability to evaluate the outcomes of both CoC funded and ESG funded projects (2 points)
-

Other HUD Requirements:

- Applicant meets ALL other HUD Requirements listed on pages 23-24 of the HUD CoC NOFA
- Applicant does NOT meet ALL other HUD Requirements listed on pages 23-24 of the HUD CoC NOFA

Leveraging Requirements

% of Leverage _____ Total Leverage amount \$ _____

During the 2016 HUD Continuum of Care process, scoring for leveraging will be awarded on how closely you leverage dollars to the requested funding amount. 200% leverage is recommended. For example, if your funding request is \$100,000 for the full leveraging points during scoring your leveraging should be \$200,000 or more. If you have no leveraging, you will receive no points for leveraging.

Eligible Leverage Contributions:

- Cash
- Buildings (the value of commitments of land, buildings and equipment are one-time only and cannot be claimed by more than one project (e.g., the value of donated land, buildings or equipment claimed in

2005 or prior years for a project cannot be claimed as leveraging by that project or any other project in subsequent competitions.)

- Equipment
- Materials
- Services such as transportation, health care and mental health counseling
- General volunteer time (at \$10 per hour)
- Specific volunteer time at market rate (for example, an attorney who is volunteering legal services to clients in the program for their legal issues. If the attorney's normal fee is \$100 per hour then you can record the volunteer time at \$100 per hour.)

Sources of Contributions:

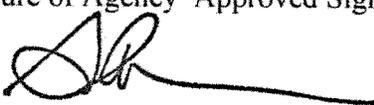
- CDBG
- HOME
- United Way
- Fannie Mae
- Federal Home Loan Bank
- Local or State general revenue funds
- Mainstream housing programs
- Social service programs

Written Commitments:

- Must be documented on letterhead stationary
- Signed by an authorized representative
- Dated
- In your possession at the time of application submission
- Must contain the following:
 - Name of the organization providing the contribution
 - Type of contribution
 - Value of the contribution
 - Name of the project and its sponsor organization to which the contribution will be given
 - Date the contribution will be available

Written commitments are required for all project applicants. Commitment letters must be dated within 60 days of the CoC application deadline of September 14, 2016. Commitment letters must be submitted with each project application.

WARNING: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802).

Print Name of Agency Approved Signatory: Glenn Anderson	Signature of Agency Approved Signatory 
Title Executive Director	Date 7/18/16



AG Huot <ag@cmhp.net>

NOFA timeline

1 message

AG Huot <ag@cmhp.net>

Mon, Jul 11, 2016 at 3:06 PM

To: Allison Uthke-Scaletta <Allison_Uthke-Scaletta@usc.salvationarmy.org>, "Amanda A. Berg" <amandab@annamaries.org>, Amy Carter <ACarter@rise.org>, Barb Schmidt <bschmidt@voamn.org>, Barb Wagner <barbara.wagner@isd742.org>, "Bershok, Lisa" <Lisa.Bershok@va.gov>, Brandon P <BrandonP@dwjonesmanagement.com>, Bryan Newman <bnewman@centercityhousing.org>, Carla Johnson <ed@newpathwaysmn.com>, Carol Hernandez <carol.hernandez@hhs.millelacsband-nsn.gov>, Carole Pachelke <Carol_Paschelke@usc.salvationarmy.org>, Carrie Burrell <cburrell@brainerdhra.org>, Carrie Lindquist <clindquist@2harvest.org>, Cathy Wogen <Cathy.wogen@gmail.com>, Chassidy Lobdell <chassidyl@lakesandpines.org>, Cheryl Wold <cherylw.opendoors@gmail.com>, Christine Midthun <cmidthun@unitedwayhelps.org>, Cindi Nybeck <cnybeck@apfy.org>, Danette Ringwelski <danette.ringwelski@tccaction.com>, Daryl Moon <dmoon@npmh.org>, Diana Kliber <Diana@brainerdhra.org>, Doug Jacobson <Doug.jacobson@tccaction.com>, Ellen Dinsmore <ellen.dinsmore@va.gov>, Erin Wittwer <ewittwer@voamn.org>, Holly Biggins <HBiggins@npmh.org>, Hyacinth Stiffler <hyacinth.stiffler@bicap.org>, Jennifer Krebs <Jennifer_Krebs@usc.salvationarmy.org>, Jennifer Walker <jwalker@ccstcloud.org>, Jess Hartfiel <execdir@greatriverfamilypromise.org>, Jill Marzean <Jill.marzean@co.wright.mn.us>, Jill Wehling <jill.wehling@co.sherburne.mn.us>, Jodi Vannett <jvannett@riversofhope.org>, "Johanna E. Klinkner" <JohannaK@annamaries.org>, John Smith <promiseneighborhoodofcentralmn@gmail.com>, Julie Kurschner-Pineda <jkurschner@midconetwork.com>, Kara Spofford <cm@greatriverfamilypromise.org>, "Karla.Rolfzen" <Karla.Rolfzen@usc.salvationarmy.org>, karyn Hansen <karyn.hansen@co.isanti.mn.us>, Kate Erickson <kate.a.erickson@state.mn.us>, Katherine Wagoner <katherine@mnhomelesscoalition.org>, Kathleen Vitalis <kvitalis@mac-v.org>, Kathy Kraft <kkraft@mac-v.org>, Kathy Sauve <ksauve@lssmn.org>, Kim Bailey <kim.bailey@state.mn.us>, Kim Wallace <toddhra@rea-alp.com>, "Knoll, Greg" <Greg.Knoll@co.stearns.mn.us>, Krystle Englund <Krystle_Englund@usc.salvationarmy.org>, Kynda Stull <kstull@rseden.org>, Leah Lindstrom <leah.lindstrom@csh.org>, Leigh Lessard <leigh.lessard@co.stearns.mn.us>, Lezlie Sauter <LezlieS@lakesandpines.org>, Linda Cassman <lcassman@apfy.org>, Lindsey Glasser <lindsey_glasser@usc.salvationarmy.org>, Lisa Bredeson <Lisa.Bredeson@co.wright.mn.us>, Lois Mueller <lmueller@rseden.org>, Lori Reilly <lreilly@centercityhousing.org>, Louise Reis <lreis@stcloudhra.com>, Mallory_Birch <Mallory_Birch@usc.salvationarmy.org>, Marcia Otte <motte@mahube.org>, Maria Essman <Maria.Essman@lssmn.org>, Mary Hansen <mhansen@npmh.org>, Mary Westlund <cs.pmfe@newpathwaysmn.com>, Meg Sheehan <msheehan@ccstcloud.org>, Mishon Bulson <mbulson@ccstcloud.org>, "Molly E. Hayen" <Molly.Hayen@co.wright.mn.us>, Nancy Cashman <ncashman@centercityhousing.org>, Nathan Saltz <nsaltz@mac-v.org>, Pastor Carol Smith <pastorcj@placeofhopeministries.org>, Pastor Michael Laidlaw <michaellaidlaw@aol.com>, Pat Bednarz <pat@cmnrp.org>, Pat Leary <Pat.Leary@state.mn.us>, Patrice OLeary <poleary@lssmn.org>, patrick Shepard <Patrick.shepard@tricap.org>, Paul Pedersen <ppedersen@mac-v.org>, Rachel Zetah <rachel.zetah@lssmn.org>, Rhonda Otteson <rhonda@mnhomelesscoalition.org>, Richelle Kramer <Richelle.kramer@co.wright.mn.us>, Roseann Wiltsey <roseann.wiltsey@co.mille-lacs.mn.us>, Samantha Smart Merritt <samantha.merritt@voamn.org>, Sandra Barclay <sandra.barclay@hhs.millelacsband-nsn.gov>, Sandy Nadeau <SandyN@annamaries.org>, Scott Grother <scott.grother@usc.salvationarmy.org>, Shane Ganley <shanaganley@yahoo.com>, Shannon Fortune <ShannonF@dwjonesmanagement.com>, Shayla Pikula <spikula@npmh.org>, Shirley Legatt <slegatt@wccaweb.com>, Stacy Kriese <Skriese@rseden.org>, Stacy Pederson <spederso@gw.studio.org>, Stephanie Och <steph.handsofhope@co.todd.mn.us>, Sue Hanks <SHanks@ccstcloud.org>, "Sue M. Vanek" <SVanek@nystromcounseling.com>, Tammy Moreland <Tammy.Moreland@hhs.millelacsband-nsn.gov>, Tracy Hinz <thinz@cmmhc.com>, Tracy Howg <tracey.howg@llojibwe.org>, Verna Toenyan <verna.toenyan@co.todd.mn.us>, Warren Duncan <warren@hearthconnection.org>

Hello everyone, Well it is NOFA time again. Attached is the Overview of the CoC NOFA and timeline along with the intent to apply forms. Please follow the timeline for submittal of the intent and submittal of your project applications.

There will be approximately \$69,000 in reallocated funds that would be available for New RRH for singles, families and/or youth

there are also bonus funds available for \$67,866 for RRH for youth. If you are interested in applying for any of these funds feel free to call me if you have any questions. You do not need to be currently receiving CoC funds in order to apply. You do have to fit the HUD eligibility thresholds tho in order to apply

We will need to meet before August 30th to approve the scoring and ranking of applications to comply with the HUD timeline.



AG Huot <ag@cmhp.net>

2016 COC HUD NOFA

1 message

AG Huot <ag@cmhp.net>

Tue, Jul 12, 2016 at 8:23 AM

To: Jason Neuerburg <jneuerburg@cmhp.net>

Jason,
Please post the notice of HUD NOFA on our website as well as the intent to apply and 2016 NOFA overview
thanks
AG

AG Huot

Program Manager/COC Coordinator

Heading Home Central Coordinator

Central MN Housing Partnership

37 28th Avenue North, STE. 102

St. Cloud, MN 56303

Email: ag@cmhp.net

P: (320) 258-0674

Fax(320) 259-9590



3 attachments

 **2016 HUD Continuum of Care notice for website.docx**
14K

 **NOFA Timeline Overview 2016 corrected 7.7.16.docx**
25K

 **Intent to Apply and Threshold Assessment - 2016 final7.7.16.doc**
95K

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Sprucewood Solar

Sprucewood Townhomes solar panels have been very active in the month of April. The three buildings totaled a carbon offset of 6,550 pounds or 3.275 tons which is equivalent to 81 trees. What a great way to help save our environment.



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Primary goal of alleviating homelessness.



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View our locations & properties and apply today!



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[READ MORE](#)

Jul 12 2016

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Please read the intent to apply and FY2016 NOFA Overview.

[2016 HUD Continuum of Care Notice](#)

[NOFA Timeline 2016 Overview](#)

[NOFA Intent to apply and Threshold Assessment](#)

If you have any questions or comments about the application, or are interested in applying, please contact AG Huot Central MN CoC Coordinator at 320-258-0674 or ag@cmhp.net

Written by CMHP

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Central Minnesota ...

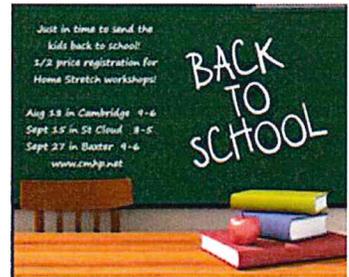
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Central Minnesota Housing Partnership

updated their cover photo.

9 August at 08:36



Commercial Window Tinting Houston By: Skylight



AG Huot <ag@cmhp.net>

NOFA information

1 message

AG Huot <ag@cmhp.net>

Thu, Aug 18, 2016 at 10:16 AM

To: Barbara Schmidt <bschmidt@voamn.org>, oasiscmdirector@outlook.com, Allison Uthke-Scaletta <Allison_Uthke-Scaletta@usc.salvationarmy.org>, "Amanda A. Berg" <amandab@annamaries.org>, Amy Carter <ACarter@rise.org>, Barb Wagner <barbara.wagner@isd742.org>, "Bershok, Lisa" <Lisa.Bershok@va.gov>, Brandon P <BrandonP@dwjonesmanagement.com>, Bryan Newman <bnewman@centercityhousing.org>, Carla Johnson <ed@newpathwaysmn.com>, Carol Hernandez <carol.hernandez@hhs.millelacsband-nsn.gov>, Carole Pachelke <Carol_Paschelke@usc.salvationarmy.org>, Carrie Burrell <cburrell@brainerdhra.org>, Carrie Lindquist <clindquist@2harvest.org>, Cathy Wogen <Cathy.wogen@gmail.com>, Chassidy Lobdell <chassidyl@lakesandpines.org>, Cheryl Wold <cherylw.opendoors@gmail.com>, Christine Midthun <cmidthun@unitedwayhelps.org>, Cindi Nybeck <cnybeck@apfy.org>, Danette Ringwelski <danette.ringwelski@tccaction.com>, Daryl Moon <dmoon@npmh.org>, Dean Loidolt <dean@cmcoa.org>, Diana Kliber <Diana@brainerdhra.org>, Doug Jacobson <Doug.jacobson@tccaction.com>, Ellen Dinsmore <ellen.dinsmore@va.gov>, Erin Wittwer <ewittwer@voamn.org>, Greg Spofford <greg.spofford@gmail.com>, Holly Biggins <HBiggins@npmh.org>, Hyacinth Stiffler <hyacinth.stiffler@bicap.org>, Jennifer Krebs <Jennifer_Krebs@usc.salvationarmy.org>, Jennifer Walker <jwalker@ccstcloud.org>, Jess Hartfiel <execdir@greatriverfamilypromise.org>, Jill Marzean <Jill.marzean@co.wright.mn.us>, Jill Wehling <jill.wehling@co.sherburne.mn.us>, Jodi Vannett <jvannett@riversofhope.org>, "Johanna E. Klinkner" <JohannaK@annamaries.org>, John Smith <promiseneighborhoodofcentralmn@gmail.com>, Julie Kurschner-Pineda <jkurschner@midconetwork.com>, Kara Spofford <cm@greatriverfamilypromise.org>, "Karla.Rolfzen" <Karla.Rolfzen@usc.salvationarmy.org>, karyn Hansen <karyn.hansen@co.isanti.mn.us>, Kate Erickson <kate.a.erickson@state.mn.us>, Katherine Wagoner <katherine@mnhomelesscoalition.org>, Kathleen Vitalis <kvitalis@mac-v.org>, Kathy Kraft <kkraft@mac-v.org>, Kathy Sauve <ksauve@lssmn.org>, Kim Bailey <kim.bailey@state.mn.us>, Kim Wallace <toddhra@rea-alp.com>, "Knoll, Greg" <Greg.Knoll@co.stearns.mn.us>, Krystle Englund <Krystle_Englund@usc.salvationarmy.org>, Kynda Stull <kstull@rseden.org>, Leah Lindstrom <leah.lindstrom@csh.org>, Leigh Lessard <leigh.lessard@co.stearns.mn.us>, Lezlie Sauter <LezlieS@lakesandpines.org>, Linda Cassman <lcassman@apfy.org>, Lindsey Glasser <lindsey_glasser@usc.salvationarmy.org>, Lisa Bredeson <Lisa.Bredeson@co.wright.mn.us>, Lois Mueller <lmueller@rseden.org>, Lori Reilly <lreilly@centercityhousing.org>, Louise Reis <lreis@stcloudhra.com>, Mallory_Birch <Mallory_Birch@usc.salvationarmy.org>, Marcia Otte <motte@mahube.org>, Maria Essman <Maria.Essman@lssmn.org>, Mary Hansen <mhansen@npmh.org>, Mary Westlund <cs.pmfe@newpathwaysmn.com>, Meg Sheehan <msheehan@ccstcloud.org>, Merissa Glem <merissa.glem@voamn.org>, Mishon Bulson <mbulson@ccstcloud.org>, "Molly E. Hayen" <Molly.Hayen@co.wright.mn.us>, Nancy Cashman <ncashman@centercityhousing.org>, Nathan Saltz <nsaltz@mac-v.org>, Pastor Carol Smith <pastorcj@placeofhopeministries.org>, Pastor Michael Laidlaw <michaellaidlaw@aol.com>, Pat Bednarz <pat@cmnrp.org>, Pat Leary <Pat.Leary@state.mn.us>, Patrice OLeary <poleary@lssmn.org>, patrick Shepard <Patrick.shepard@tricap.org>, Paul Pedersen <ppedersen@mac-v.org>, Rachel Zetah <rachel.zetah@lssmn.org>, Rhonda Otteson <rhonda@mnhomelesscoalition.org>, Richelle Kramer <Richelle.kramer@co.wright.mn.us>, Roseann Wiltsey <roseann.wiltsey@co.mille-lacs.mn.us>, Samantha Smart Merritt <samantha.merritt@voamn.org>, Sandra Barclay <sandra.barclay@hhs.millelacsband-nsn.gov>, Sandy Nadeau <SandyN@annamaries.org>, Scott Grother <scott.grother@usc.salvationarmy.org>, Sexual Assault Center <cmsac@cmsac.org>, Shane Ganley <shanaganley@yahoo.com>, Shannon Fortune <ShannonF@dwjonesmanagement.com>, Shayla Pikula <spikula@npmh.org>, Shirley Legatt <slegatt@wccaweb.com>, Stacy Kriese <Skriese@rseden.org>, Stacy Pederson <spederso@gw.studio.org>, Stephanie Och <steph.handsofhope@co.todd.mn.us>, Sue Hanks <SHanks@ccstcloud.org>, "Sue M. Vanek" <SVanek@nystromcounseling.com>, Tammy Moreland <Tammy.Moreland@hhs.millelacsband-nsn.gov>, Tracy Hinz <thinz@cmmhc.com>, Tracy Howg <tracey.howg@llojibwe.org>, Verna Toenyan <verna.toenyan@co.todd.mn.us>, Warren Duncan <warren@hearthconnection.org>

Attached, please find the approved 2016 HUD CoC Scoring criteria and rating and ranking process. the Scoring, rating and ranking committee meet on August 25th and will be approved at the CoC meeting on August 29th.

AG

[W scoring sheet 2016.docx](#)

[W Central MN CoC Rating and Ranking Process2016.docx](#)

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Sprucewood Townhomes solar panels have been very active in the month of April. The three buildings totaled a carbon offset of 6,550 pounds or 3.275 tons which is equivalent to 81 trees. What a great way to help save our environment.



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Jul 12 2016

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Please read the intent to apply and FY2016 NOFA Overview.

[2016 HUD Continuum of Care Notice](#)

[NOFA Timeline 2016 Overview](#)

[NOFA Intent to apply and Threshold Assessment](#)

[Central Minnesota CoC Rating and Ranking Process 2016](#)

[Scoring Sheet 2016](#)

The Scoring, Rating and Ranking Committee meets on August 25, 2016.

CMHP of Facebook!



Central Minnesota ...

Liked 209 likes



Central Minnesota Housing Partnership

updated their cover photo. 9 August at 08:36



Commercial Window Tinting Houston By: Skylight

Minnesota's HMIS Policies and Procedures

Minnesota's Homeless Management Information System will provide standardized and timely information to improve access to housing and services and strengthen our efforts to end homelessness

NOTE: The Institute for Community Alliances (ICA) assumed the role of HMIS Lead Agency and State System Administrator on June 1, 2016. To facilitate this transition, ICA has agreed to use this document until a detailed review can be conducted, at which time this document may be updated or replaced. This review will take place no later than June 1, 2017.

N O V E M B E R 2 0 1 4

Contents

- Acknowledgments 3
- Background 4
 - Introduction 4
 - History..... 4
 - Eligible programs 5
 - Why is this important? 7
- Expectations for HMIS Partner Agencies 8
 - Implementing HMIS..... 8
 - General on-going commitments..... 10
 - Information entry standards..... 11
 - No conditioning of services..... 11
 - Accountability for noncompliance 12
- Privacy Plan 12
- Security Plan 14
- Data Quality Plan 16
- Oversight of Minnesota’s HMIS 19
 - Composition of HMIS Governing Group 19
 - Additional provisions 19
 - Governing Group roles and responsibilities 20
- Expectations for HMIS System Administrator 21
- HMIS Policy Considerations 22
- Appendix 25
 - Glossary..... 26
 - Goals of HMIS in Minnesota..... 27
 - Minnesota’s HMIS: grievance procedure form 29
 - User Policy, responsibility statement, & code of ethics 30
 - Client Data Privacy Notice and Consent Form, and Release of Information Form (with instructions to agency) 32
 - Minnesota’s HMIS: Data Privacy Notice & Consent Form..... 34
 - Minnesota’s HMIS: Release of Information..... 35
 - Minnesota’s HMIS: Posted Data Privacy Notice 36

Acknowledgments

The original version of this document was produced by Minnesota's HMIS Governing Group, led in this effort by Richard Wayman. This document was approved by the Governing Group on January 31, 2005.

The first major revision took place on December 2012, following recommendations discussed in a meeting of the HMIS Governing Group on December 6, 2012. Another major revision occurred in January 2014, following recommendations discussed in a meeting of the HMIS Governing Group on December 10th, 2013. The Data Quality Plan was revised and amended here November 19, 2014.

Contact Information

Web site information on Minnesota's HMIS:

<http://www.hmismn.org>

HMIS help desk:

HMIS@wilder.org

651-280-2780, or 1-855-280-2780

Wilder Research
451 Lexington Parkway North
St. Paul, MN 55104

HMIS Grievances (reported to HMIS Governing Group):

Minnesota Coalition for the Homeless
Attention: HMIS Grievance
2233 University Avenue West, Suite 434
St. Paul, MN 55114
651-645-7332

Background

Introduction

Homeless Management Information Systems (HMIS) enable data from a variety of service providers to be combined to reveal a more comprehensive picture of client needs. In Minnesota and elsewhere this is accomplished via the internet, using software that can enable inter-agency case management within a context of strict data privacy protections.

History

The decision to implement an HMIS in Minnesota grew out of a desire to obtain standardized, regularly updated information about homelessness for advocates, planners, and policymakers – all of whom were interested in doing something about the consistently growing and stubbornly persistent problem of homelessness. The idea was to broaden a data tracking initiative started among Ramsey County shelters and transitional housing providers in the early 1990s.

Coinciding with this local activity was a Congressional mandate to implement HMIS. In 2000 Congress instructed the U.S. Department of Housing and Urban Development to take measures to improve available data concerning homelessness in the United States. In response, HUD obligated all Continuum of Care regions to implement region-wide databases that would allow an unduplicated count of service users.

Specifically, Congress mandated to HUD to collect information on the number of persons assisted through the McKinney-Vento Act. The Omnibus Appropriations Act of 2003 (Pub. L. 108-7) in its conference committee report noted:

HUD is directed to begin collecting data on the percentage and number of beds and supportive services programs that are serving people who are chronically disabled and/or chronically homeless. . . HUD should continue its collaborative efforts with local jurisdictions to collect an array of data on homelessness in order to analyze patterns of use of assistance, including how people enter and exit the homeless assistance system, and to assess the effectiveness of the homeless assistance system.

Previously in FY 1999 HUD Appropriations Act, Congress directed HUD to collect data from representative samples of existing HMIS systems,

collect, at a minimum, the following data: The unduplicated count of clients served; client characteristics such as age, race, disability status, units (days) and type of housing received (shelter, transitional, permanent); and services rendered. Outcome information such as housing stability, income, and health status should be collected.¹

The state Inter-Agency Task Force on Homelessness, the Corporation for Supportive Housing, the Metro-wide Engagement on Shelter, and others responded to this mandate by convening a series of open meetings in spring 2002. By general consensus a statewide, rather than region-by-region, approach was adopted and an “Implementation Group” was convened to oversee the project. The Implementation Group consisted of representatives from all of Minnesota’s Continuum of Care regions, at-large members who represent various populations and provider groups (e.g., agencies for homeless youth, veterans, domestic violence victims, those with HIV/AIDS, and consumers of homeless services), and representatives of state government.

The Implementation Group guided development and implementation of Minnesota’s HMIS. Early on the group adopted a vision for Minnesota’s HMIS (see next section), selected a system administrator (Wilder Research), trainer (Minnesota Housing Partnership), and software for the system (Bowman System’s ServicePoint). The group also developed various system policies and worked on system funding. The group continues to meet regularly to advise Wilder Research on nearly every aspect of the HMIS project, including budgetary matters and annual fees, system policies, and training procedures.

Eligible programs

Programs which may use HMIS include, but are not limited to:

- Emergency shelters serving homeless adults, families, and youth²
- Transitional housing programs
- Supportive Housing Programs (whether scattered site or on-site)
- Street and Community outreach programs to persons who are homeless

¹ See Fed. Register, Vol. 68, No. 140 (July 22, 2003) for further overview of federal mandates for HMIS.

² In general, domestic violence shelters are prohibited from participation in HMIS by federal legislation, under the Violence Against Women Act (VAWA). Please see hmismn.org, or contact Wilder Research for additional information.

- Supportive Service programs serving persons who are homeless

In addition, HMIS participation is a requirement of various funders. On the Federal level, HMIS participation is mandated for all service and housing providers that receive HUD funding under the McKinney-Vento Act, which includes:

- Supportive Housing Program (SHP)
- Shelter plus Care
- Section 8 Moderate Rehab for Single Room Occupancy
- Emergency Solutions Grant
- Housing for Persons with AIDS (HOPWA)

Satisfying the HMIS requirement is also factored into the Department of Housing and Urban Development's (HUD) scoring of annual Continuum of Care applications – the more programs that participate in HMIS, the higher the Continuum is scored on that aspect of their application. In Minnesota this means that implementing and maintaining a widely-used HMIS improves the state's chances of continuing to receive the over \$20 million annually in federal funding that we now receive under the McKinney-Vento program.

On the state level, the Minnesota Department of Human Services and the Minnesota Housing Finance Agency require HMIS participation for their grantees under the following programs:

Minnesota Department of Human Services/Office of Economic Opportunity

- Transitional Housing Program (THP)
- Emergency Services Program (ESP)
- Emergency Solutions Grant Program (ESGP)
- Runaway and Homeless Youth Act
- Healthy Transitions for Youth
- Ending Long-Term Homelessness Supportive Services

Minnesota Housing Finance Agency

- Family Homeless Prevention and Assistance Program (FHPAP)
- Projects funded under the Plan to End Long-Term Homelessness

Agencies that receive funding from these state programs use HMIS to satisfy their reporting requirements.

Ideally all emergency shelters, transitional and supportive housing program, and homeless outreach programs in the state will participate in HMIS. The more agencies, and the more users within agencies, that participate in the system the better. More agencies equal more comprehensive data, and therefore improved information for planning and policymaking. More users within agencies means that clients will more likely receive appropriate services, since their caseworks may have an opportunity to see relevant case history from prior service episodes, and will have an opportunity to rely upon the systems case planning, referral, and data protection capacities.

Why is this important?

Because agencies that serve people experiencing homelessness work for the public welfare of our communities, they must remain accountable to their program participants, funders, and community partners. One way to remain accountable is to be driven and focused on a mission and to report progress on accomplishing that mission. Programs should be transparent about what outcomes and goals they have achieved. HMIS allows programs to manage data in a secure and standardized environment that also offers an aggregate view of our state-wide efforts to end homelessness. We hope that with better information we will be able to plan, work, and achieve greater success in serving participants with meaningful services and housing options and end a social problem that can be fixed.

Expectations for HMIS Partner Agencies

Social service agencies that participate in Minnesota's HMIS are referred to as "partner agencies." Each partner agency needs to follow certain guidelines to help keep the project on track and to maintain data privacy and accuracy. The guidelines below do not replace the more formal and legally-binding agency agreement that each agency signs when joining the project.

Implementing HMIS

To prepare for participating in Minnesota's HMIS, agency administration should:

- Familiarize themselves with HMIS (see www.hmismn.org).
- Decide how many system end-users they will need. "End users" are the people who will actually enter data into the HMIS and use the system to run reports that the agency may need for funding purposes, or find useful for internal management. Typical end users include intake workers and case managers. Typically, the more end-users in an agency, the more useful the system becomes. There are, however, additional costs for each end-user in an agency. Volunteers should only be designated as end-users as a last resort, and will be subject to the same training and legal requirements as all other end-users.
- Familiarize prospective end-users with basic computer skills if necessary (e.g., windows, using a mouse, navigating the internet).
- Designate a primary HMIS contact within the agency.
- Develop a clear understanding of current reporting needs and funding streams. For example, does the agency receive SHP funds? THP? FHPAP?
- Understand the agency's data privacy requirements. For example, is the agency covered by HIPAA?
- Have access to a computer. Nearly any computer purchased within the past 5 years will be adequate. (See hmismn.org for current technical requirements and recommendations.)
- The computer must have access to the internet and an up-to-date a web browser. (See hmismn.org for current technical requirements and recommendations.)

The steps for implementation include the following:

1. **Initial contact.** Agency is contacted by Wilder Research (or contacts Wilder Research) and agrees to send its end-users to a day-long introductory group training on HMIS and using

ServicePoint. Agency administrators, IT staff, or others may also attend the training for a fee if there is space available. Agencies should not sign up for training unless they are willing and able to complete the following steps and begin entering actual client data within one month of attending training.

2. **Paperwork and payment.** Before attending training: (a) Agency must review and sign an agency agreement before the training. (b) If the agency is covered by HIPAA, the agency should send Wilder Research a Business Associates Agreement. (c) The agency must pay any training and end-user fees.
3. **Training.** All end-users within must complete initial training with Wilder Research.
4. **Work flow.** Agency program administrators and system end-users should designate a process for integrating the HMIS into its regular flow of work. Ideally information in ServicePoint will be updated in real time, whenever clients are entering or leaving programs, but this is not always possible. Planning how to incorporate ServicePoint in the agency's workflow should be done before the walk through so that the agency is ready to use ServicePoint immediately after the walk-through. Necessary decisions include:
 - a. Will the data be directly entered into ServicePoint during intake or case management sessions? (If so, what is our back-up plan if the power is out or the internet connection goes down?)
 - b. Will the information be recorded by paper forms and entered later? If so, can we adapt our existing forms so that there is no confusion when entering data into ServicePoint? Note that electronic versions (MS Word format) of data entry forms that mirror screens in ServicePoint are available at www.hmismn.org
 - c. Who will run reports? Which ones? How often? Note that we strongly recommend running reports on a monthly or weekly basis to help check for data entry errors. The agency is responsible for maintaining accurate data, and regularly running reports is a good way to double check that information has been properly recorded in the system. Regular reporting may also provide the agency with important information about its clients and programmatic goals.
5. **Data privacy practices and client informed consent.** Before entering data into Minnesota's HMIS, agencies must implement any necessary client notice, consent, and release of information forms associated with Minnesota's HMIS (see appendix for current examples), as well as their own written data privacy policy. This can be done prior to training, and should be ready to implement by the time of the walk through or even shortly before, so that the agency can begin entering actual data as soon as possible. Note that agency should be able to explain to clients the data privacy practices associated with Minnesota's HMIS.

6. **Set-up.** After training the agency's designated HMIS contact will be called by Wilder Research, to gather information necessary to configure ServicePoint to meet the agency's reporting and data privacy needs. The Agency's end-users cannot be given access to the system until the system set-up is complete, so it is important that the agency respond to Wilder's requests for information as soon as possible. Agencies that do not follow through with set-up after attending training may be required to attend an additional training session, at added cost.
7. **Walk through.** After set-up is completed (and confirmed with the agency's HMIS contact person), Wilder Research will contact the agency for a "walk through" session that serves as a sort of refresher on how to use the HMIS and demonstrates the way that the system has been configured for the agency. Usernames and passwords are issued at this point.
8. **Using the system.** Agencies should record in the HMIS at least three actual client entries into their programs within 2 weeks of completing set up with Wilder Research. On an on-going basis agencies must enter and update information on all current clients in their HMIS-relevant programs (homeless prevention, outreach, shelter, and housing programs) on at least a quarterly basis. Information must be updated by the end of the second week after each quarter's end (by April 15 for Q1; by July 15 for Q2; by October 15 for Q3; and by January 15 for Q3).
 - a. **Reporting:** Agencies are required to run reports in the system as directed by their funding sources, and should run these reports prior to actual report due dates to check for data entry errors. Agencies are strongly encouraged to use the systems reporting features on a more frequent weekly or monthly basis to check for data entry errors. Agencies are responsible for the quality of the data that they report.

General on-going commitments

Participating agencies should be prepared to commit to the following:

- Collecting and updating minimum data elements on all clients, and updating on a quarterly basis as necessary. Information must be updated by the end of the second week after each quarter's end (by April 15 for Q1; by July 15 for Q2; by October 15 for Q3; and by January 15 for Q3). This is necessary for Wilder Research to be able to issue accurate quarterly reports.
- Maintaining accurate data. The agency should run system reports on a regular weekly or monthly basis to check for errors. The agency should contact Wilder Research (HMIS@wilder.org, 651-280-2780, or 1-855-280-2780) if needing assistance with data correction, including deleting any client records that were entered by mistake.
- Obtaining necessary client consent and releases of information for data sharing.

- Agencies covered by HIPAA, domestic violence agencies, youth providers, and HIV/AIDS providers must develop joint legal agreements with other partner agencies if they will be sharing client records via the HMIS. Such agencies must work with Wilder Research to enable restricted data sharing.
- Posting a Notice of Uses and Disclosures for Minnesota's HMIS (see exhibits at end of this manual). Agency staff should be able to provide a basic explanation of the notice and the agency should be able to provide a copy to each of its clients.
- Cancel HMIS access of any end-user who is terminated from employment, leaves the agency, or needs to be restricted from the system for any other reason. The agency should contact Wilder Research as soon as possible and no more than 24 hours after the end-user is terminated.

Information entry standards

- Information entered into Minnesota's HMIS will be truthful, accurate and complete.
- Agency staff will not enter information about clients into Minnesota's HMIS database unless the information is required for a legitimate business purpose such as to provide services to the Client, to conduct evaluation or research, to administer the program, or to comply with regulatory requirements.
- When adding to- or modifying data in- an existing client's HMIS record, end users should check to see if that client is currently receiving services from a different HMIS partner agency (e.g., entered into, but not yet exited from another program). If the client is active elsewhere, end-users should not alter or over-ride information possibly used by staff of that agency without first verifying the change with staff of the other agency.

No conditioning of services

Agencies shall not decline to provide any services to a client based upon a client's refusal to sign a Release of Information form or refusing to allow entry of information into Minnesota's HMIS. (Note: This does not over-ride agency policies or funding restrictions that may require certain data from a client before an agency is able to serve the client. However, if this is the case and HMIS is the only data base, then the client may be offered the opportunity to be entered as anonymous client – e.g., entered with a system generated code and no social security number or other identifying information.)

Accountability for noncompliance

The HMIS Governing Group will receive updates from Wilder Research on progress made by participating programs with HMIS. The Governing Group will provide notice to agencies and funders (the state of Minnesota, HUD, or local Continuum of Care Committees) when agencies are found not to be in compliance with data entry or have violated the code of ethics or privacy concerns.

The HMIS Governing Group and Wilder Research would like to make compliance with system policies and expectations as easy as possible, and welcomes agency requests for assistance. Agencies that fail to comply, however, should be aware of the potential for penalties under data privacy laws (e.g., HIPAA, the Minnesota Government Data Practices Act); potential impacts on funding from state and federal sources; and the possibility of additional charges from Wilder Research to cover costs associated with rectifying substantial problems.

Privacy Plan

According to standards put forward by the U.S. Department of Housing and Urban Development, Homeless Management Information Systems are encouraged to have privacy plans that at the minimum include: data collection limitations; purpose and use limitations; allowable uses and disclosures; access and correction standards; and protections for victims of domestic violence, dating violence, sexual assault, and stalking.

The Privacy Plan for Minnesota's HMIS consists of the following documents:

- **Agency Agreement**
This form obligates organizations that participate in Minnesota's HMIS to abide by all applicable rules and regulations, and to oversee proper use of the HMIS by their staff.
- **User policy, responsibility statement & code of ethics**
This form, signed by all system end-users, specifies responsibilities of individuals who access Minnesota's HMIS, and includes limitations on collecting data and accessing data. End users must agree to honor the wishes of the persons whose information is interested into the HMIS; access only information for which they have a clear business purpose; and keep their username and passwords private.
- **Client data privacy notice and consent form**
This form, given to all persons (or their parents or guardians) whose information is entered into the HMIS, outlines allowable uses and disclosures of individually-identifiable data maintained in HMIS. It also informs clients of their rights to view and correct data held in Minnesota's HMIS, including a method for filing grievances.

- Client release of information form
This form, while not currently in wide use, specifies organizations that an organization may share data with via Minnesota's HMIS. Clients may elect to share data or to limit data sharing.
- HMIS grievance procedure form
This form provides a grievance process for those who feel that they have been somehow wronged by Minnesota's HMIS.

Finally, all end-users are trained to protect the privacy of individually-identifiable data entered into Minnesota's HMIS

Program Participant Rights

Program participants have a clear right to:

- Keep their personal information held private. All clients have the right to choose to have their data entered in the system anonymously and refuse to have certain information recorded about them in the system. This can provide protections for clients who have experienced domestic violence, dating violence, sexual assault, or stalking at some point in their lives or who are uncomfortable having information entered about them for any other reason.
- Have their preferences with regard to the entry and sharing of client information within Minnesota's HMIS respected, whether they prefer their data to be shared with other partner agencies or not.
- Request a change in their information sharing preferences.
- Refuse to allow entry of identifiable information into Minnesota's HMIS without being denied services (except if entry of identifiable information is necessary for program operation).
- Have only truthful and accurate information about them entered into the system.
- Not be asked for information unless the information is required for a legitimate business purpose such as to provide services to the client.
- Inspect and obtain a copy of their own information maintained within Minnesota's HMIS (except for information that is used in preparation for a criminal or civil court case under release by subpoena).
- File grievances related to the HMIS without retaliation.

Data sharing

One of the potential benefits – and potential risks – of Minnesota’s HMIS is the ability to easily share data between agencies in a standardized format. Certain agencies, like youth providers, HIV/AIDS providers, and HIPAA-covered agencies, will only share data with other service providers if they have developed specific agreements allowing them to do so. Others will choose to share data routinely with other HMIS partner agencies. In either case, clients have the right to control access to their data and must sign a Client Release of Information form before an agency can share information about the client with other agencies via Minnesota’s HMIS (see appendix or electronic forms at www.hmismn.org). Note that agency staff must be prepared to explain the HMIS system and agency privacy policies upon request.

Additionally, please note that:

- Agency staff have the ability to designate information entered into the HMIS as “open” – meaning shared with other partner agencies, or “closed” – meaning hidden from other partner agencies. While Wilder will set defaults for data sharing in consultation with the agency, it is the responsibility of the agency staff to make sure that the data they are entering is secure consistent with agency practices and client preferences.
- HMIS project staff at Wilder Research and Bowman Systems, LLC. will have access to all information entered into the system. Wilder and Bowman routinely deal with sensitive data and abide by strict data privacy practices. Wilder and Bowman will only access identifying information for business-related reasons, including administering the database, conducting research, and preparing reports (only aggregate information will be included in reports).
- Minnesota’s HMIS is not a government database. Federal agencies, including HUD, do NOT have direct or routine access to the HMIS. State government employees do not have direct access to the system, but in some cases do see client-level information about persons served under the grant programs that they monitor.

Security Plan

According to standards put forward by the U.S. Department of Housing and Urban Development, Homeless Management Information Systems are encouraged to have security plans that: ensure the confidentiality, integrity, and availability of all HMIS information; protect against any reasonably anticipated threats or hazards to security, and; ensure compliance by end users.

The security plan for Minnesota’s HMIS includes the documents and protections outlined in the privacy plan. In addition, the security plan includes security and backup technology provided by the system’s vendor, currently including:

- End-user authentication via username and complex password, including temporarily inactivating licenses with more than 3 consecutive failed logins.
- Automatic logout after a specified period of inactivity on the system (currently 15 minutes).
- Secured Socket-Layer certification of data sent over the internet.
- Database-level encryption.
- Firewall protection against attempted system hacks.

In addition the availability of the system and data contained therein is provided the system vendor via redundant servers and nightly off-site system back up, as specified in the Disaster Recovery Plan.

Finally, administrative staff for Minnesota's HMIS run security reports on an at least monthly basis, to help ensure that end-users are properly following data privacy and sharing procedures. Failure to comply with procedures may result in denial of access to Minnesota's HMIS, as outlined in the Policies and Procedures manual.

Agency Responsibilities

Agencies are responsible for the actions of their users. Among the steps Agency will take to maintain data privacy and security are:

- **Access.** Agencies will permit access to Minnesota's HMIS or client-level information obtained from it only to paid employees or supervised volunteers who need access to Minnesota's HMIS for legitimate business purposes (such as to provide services to the Client, to conduct evaluation or research, to administer the program, or to comply with regulatory requirements). Volunteers should only be designated as system users as a last resort, and are subject to the same training and legal requirements as all other system users.
- **Computers.** Agencies will allow access to Minnesota's HMIS only from computers which are (a) physically present on Agency's premises; (b) owned by the Agency; or (c) approved by Agency for the purpose of accessing and working with Minnesota's HMIS. The latter (c) shall apply only in extra-ordinary circumstances, when it is not feasible to meet conditions (a) or (b). Agency shall maintain written statements of any approvals of computers not owned by or located in the agency. Additionally, agencies should protect computers used to access Minnesota's HMIS with commercially available virus protection software.
- **Username and passwords.** Usernames and passwords shall not be stored or displayed in any publicly accessible location. Usernames and passwords may only be used by the person to whom they are assigned; licenses may not be shared under any circumstance.

- **Change in Employee status.** Any employee that is terminated or quits should have their user name and password immediately removed by contacting Wilder Research (651-280-2780; HMIS@wilder.org).
- **Training.** Agency will only allow their staff to access Minnesota's HMIS only after the authorized user receives appropriate confidentiality training including that provided by Wilder Research. Licenses granted to approved staff must not be shared; each staff who accesses HMIS must have a unique username and password.

Data Quality Plan

Wilder Research, in preparing to develop a data quality and monitoring plan, reviewed HUD guidelines as well as existing data quality plans from other HMIS implementations around the country. All these include at least the following 5 elements; Timeliness, Completeness, Accuracy, Monitoring, and Incentives/Enforcement. The data quality plan has also been reviewed and approved by the HMIS Governing Group.

Timeliness

- Purpose: is to ensure data is accessible for agency, community level, and federal reporting and to improve data accuracy. Reducing the time period between data collection and data entry will increase the accuracy and completeness of client data.
- Current Standard (may vary by program type):
 - Emergency Shelter (ES): within 10 days of service start date
 - Transitional Housing (TH): within 2 weeks of program entry
 - Permanent Supportive Housing (PSH): within 2 weeks of program entry
 - Services Only: within 10 days of program entry
 - FHPAP/Prevention/Rapid Rehousing only: within 10 days of program entry
 - ALL PROGRAMS: All data must be entered and updated as required by funders. Data for each quarter must be entered, complete, and current by the 15th of the month following each quarter. (*April 15 for Q1; July 15 for Q2; October 15 for Q3; and January 15 for Q4*).
 - Included data elements that will be monitored are:
 - Universal data elements (HUD and MN required)
 - Entry/Exits
 - Services
 - Funder-required updates to assessment information (disabilities, income, non-cash benefits, residence, etc.) will continue to be required on the already established funder-required schedule.

Completeness

- Purpose is to ensure that MN and each CoC can accurately describe the clients and services provided to clients who are accessing services. A complete record also is important for reporting for the use of data in any community level reporting as well as for HUD required processes such as NOFA and AHAR which can affect funding for the CoC and its providers.
- Current Standard:
 - All clients receiving homeless, prevention, and outreach services have a record in HMIS
 - Goal of less than 5% of clients are anonymous
 - Exception for providers who must enter all clients anonymous such as domestic violence and legal services providers
 - Exception for outreach clients. Up to 10% of outreach clients may be entered anonymously.
 - Client choice in signing the consent form takes precedent and staff should not pressure clients into agreeing to have their information identifiable if the client does not wish to do so. However, high percentages of anonymous clients may indicate staff or agency understanding of the consent form process may need review and/or clarification.
 - All data entered into HMIS is complete (based on funder requirements)
 - Universal Data Elements: "Missing", is less than 2% and "don't know or refused" is less than 3% in any one field.
 - Exception for SS#. This may have up to 2% missing, and 8% don't know, or refused.
 - Exception for providers who must enter all clients anonymously. All SS# will be listed as Refused. All other elements will be completed with up to 5% "don't know or refused".
 - Exception for Date of birth. Less than 1% of client records shall be missing date of birth. If client declines to give his/her DOB, an approximate DOB will be entered.
 - Program Specific Data Elements: "Missing", is less than 2% and "don't know or refused" is less than 3% in any one field
 - Bed Utilization rates: Emergency Shelters, Transitional Housing, and Permanent Supportive Housing programs and CoC Coordinators will review utilization rates quarterly using data in HMIS.
 - Wilder HMIS staff will send quarterly utilization reports to CoC Coordinators to review and pass on to programs. This process can help determine whether or not data is being completely entered. Low utilization or utilization over 100% can be a sign that data is not being entered or exited correctly. It can also indicate changes in programs, such as bed counts, that must be accurately counted.

Accuracy/Consistency

- Purpose: To ensure that data in HMIS is collected and entered in a common and consistent manner. To ensure that client information is truthful and accurate.

- *This section will likely roll out at a later time than the Timeliness and Completeness standards as we take additional time to plan and design the elements with a variety of groups including HMIS staff, funders, CoC Coordinators, agencies, and users.*

Data Quality Process/Monitoring

- Purpose: To ensure that the standards for timeliness, completeness, and accuracy are met and that data quality issues are identified and resolved.
- Current Standard:
 - Agencies and CoC Coordinators provide timely updates to CoC HMIS staff regarding any changes to programs.
 - Notify Wilder HMIS staff of program changes within 30 days of changes (new beds, closed program, etc.) by email hmis@wilder.org.
 - At the start of each quarter, HMIS will send a reminder email to CoC Coordinators about upcoming DQ report deadline.
 - CoC Coordinators will forward reminder email to their program providers/agencies.
 - HMIS will run quarterly data quality reports and bed utilization rate reports and will provide these reports to the CoC Coordinator/Funder/Grantee to review.
 - HMIS will send reports to the above parties on the 22nd of the month, or next business day thereafter, following the end of each quarter. (January, April, July, October)
 - CoC Coordinators/Funders/Grantees will review the reports and request that program providers make any necessary changes to their data.
 - Program providers will review their data and make necessary corrections to meet the above data standards within two weeks.
 - Program providers/agencies can run program specific or agency wide reports to review their data and make corrections (See Data Quality Monitoring Plan Report Instructions for more details on running data quality reports.)
 - HMIS staff will assist providers in correcting data and updating program information as needed.

Incentives/Enforcement

- After the two week data correction deadline for the quarter, HMIS staff will run another set of data quality reports and submit them to the CoC Coordinators/Funders/Grantees. Wilder HMIS staff will provide a list of agencies that have not improved their data and/or still exceed the data quality error goals.
- HMIS staff will also provide a list of agencies that have not improved their data since the previous quarter, or who have had multiple quarters with insufficient progress.
- Wilder staff will supply twice a year progress charts (See Progress Chart below).
- Programs which are identified as having continued data quality issues will undergo the following process: (process still under review and subject to change)

- Program does not improve data quality over two consecutive quarters
 - CoC /funder/grantee contact agency
 - Wilder HMIS staff offers walkthrough support
- Program does not improve data quality over three consecutive quarters
 - CoC/Funder/Grantee contacts agency
 - Wilder HMIS staff identifies which users require additional training
 - License suspension until follow-up is possible
- Program does not improve data quality five quarters out of eight
 - CoC Coordinator/Funder/Grantee determine appropriate action
 - Lost points on CoC competition or similar consequence
 - Increased monitoring
 - Additional interventions as determined by CoC Coordinator/Funder/Grantee, Wilder Staff, and Agency Staff.
- Incentives to be determined

Progress Charts

- These charts will be provided semi-annually and may include the following information:

Name of Project and SPID	Project has no errors	Improved data during correction period	Missing data exceeds goal – including # of anonymous clients	Missing data but does not exceed goal	Number of quarters in the past two years without improvement
Sample project 1 (2479)		Yes	No	Yes	1
Sample project 2 (3549)		No	Yes	Yes	3
Sample project 3 (1157)	✓	N/A	No	No	0
Sample project 4 (621)		No	No	Yes	2

Oversight of Minnesota’s HMIS

Composition of HMIS Governing Group

The Governing Group currently is a 26 member body, made up of the following:

- 13 representatives appointed by Continuum of Care regions in Minnesota.
- 1 representative of the Minnesota Coalition for the Homeless
- 1 representative of the Metro-wide Engagement on Shelter and Housing (MESH)
- 2 representatives from the state’s Inter-Agency Task Force on Homelessness

- 1 representative from each of the following groups: youth, veterans, domestic violence, AIDS/HIV, homeless or formerly homeless (5 members total) Representative from first four groups (youth, veterans, domestic violence, and AIDS/HIV) may be a service-provider with expertise on the population, or a client member of the population. These members are nominated and elected by current members.
- 2 additional at large representatives, nominated and elected by current members.
- 2 representatives with expertise in the field of technology.³

Representatives shall be appointed for two year cycles.

Additional provisions

- A chairperson (or co-chairs or “officers”) will be elected from the membership serve as the main point of contact between the oversight body and project staff, and to set meeting agendas.
- Decisions will be made by consensus when possible, by majority vote when necessary. Proxy voting is allowed and encouraged if members are unable to attend meetings, but a quorum is not required for group meetings or decisions.
- Project staff will staff meetings and will not serve as voting members.
- Subcommittees shall be appointed as needed.

Governing Group roles and responsibilities

Budget and Financing

- Periodically reviews HMIS system budget
- Sets goals for user-based fees
- Assists with fundraising

System Policies

- Data element oversight (resolving the manner in which specific elements are collected when there is disagreement among users; approval of any questionable or controversial data elements)

³ Originally the Governing Group was a 25-member body. On August 28, 2006 the Governing Group passed a motion to include an additional technology representative.

- Development of standardized reports (resolving disagreements between regions, providers, etc. concerning standardized reporting)
- Approval of necessary forms
- Approval of agency participation
- Deciding on the appropriate system rights for participating agencies and staff
- Penalizing agencies that do not comply with system policies
- Hearing client grievances, and recommending appropriate remedy
- Approval of data requested by non-participants (e.g., academic researchers)
- Approval of requested narrative reports (special or first-time requests)

Current membership, including contact information, is available at www.hmismn.org.

Expectations for HMIS System Administrator

Providing an HMIS

As system administrator for Minnesota's HMIS, Wilder Research provides all of the necessary equipment, staff, and technology to operate and maintain the central site. This may be done directly or through contracts with outside vendors. Bowman Systems currently provides software (ServicePoint) and application service provider (ASP) services, including hosting and maintaining central servers, for Minnesota's HMIS.

In addition, system administrator will work with Continuum of Care Coordinators, participating agencies, end-users, vendors, and other HMIS stakeholders to ensure compliance with HMIS-related rules and standards enacted by the U.S. Department of Housing and Urban Development.⁴

⁴ HUD periodically updates data standards for HMIS, these standards currently include "Homeless Management Information System (HMIS) Data Standards: Revised Standards" Published in March 2010.

HMIS Governing Group

Wilder Research utilizes the HMIS Governing Group to provide general oversight and guidance to the project.

Training

Wilder Research provides ongoing training on the system, either directly or through agreements with others. Each user of the system is required to complete basic user training in order to begin using the system. Wilder Research may deliver on-site training in the event that an agency has a large number of staff to train, but generally will not deliver one to one training on-site without an additional contract for this service.

Right to Deny Access

Wilder Research retains the right, subject to the HMIS Governing Group's review, to suspend or revoke the access of any agency or individual to the system for consistent or egregious violation of Minnesota HMIS policies.

Availability of Project Staff

Wilder Research staff are available during normal business hours to respond to service requests from either the Agency Director or identified site contact person.

Notice of Planned Interruption in Service

Whenever possible, Wilder Research will notify participating agencies of planned interruptions to service at least 3 business days prior to the interruption.

HMIS Policy Considerations

Individual access and corrections to personal information maintained in HMIS

Agencies will respond to all data requests submitted by individual program participants served by that particular agency. Any requests received by an agency that the agency is unable to fulfill will be forwarded to Wilder Research.

Requests for inspection or copies of personal data or private information or by individual program participants shall be accommodated with no service charges or fees. Agency or Wilder may deny access to information that is legally protected due to current or pending legal activity. An agency or

program may deny inspection or copies of personal information if the individual program participant has requested the same data or information more than two times in a calendar year (unless substantive change have been made to the record – program participants may request another copy upon substantive change to their records).

Program participants may request amendments or corrections to their record. Any such requests shall be honored unless program staff have a justifiable reason for not making the change, including that the requested change would misrepresent client characteristics, service dates, or the like. Requests for changes that are not honored may be recorded under client case notes in the HMIS. Requests for multiple alterations in any calendar year may be denied due to administrative burden or harassment by the individual program participant (unless substantive change have been made to the record – program participants may request additional alterations following substantive changes to their records).

Any denial of a request for inspection or alterations by programs/agencies may be taken by the individual program participant to the Minnesota Coalition for the Homeless who shall bring the matter (in a confidential manner) before the HMIS Governing Group.

Grievance procedures for individual program participants

Users must permit clients to file a written complaint regarding the use or treatment of their information within Minnesota HMIS (an example grievance form is provided in the appendix). Clients may file a written complaint with either the Agency/program or with the Wilder Research. Clients may not be retaliated against for filing a complaint. Clients unsatisfied with agency- or administrator-level grievances are free to file a grievance to the HMIS Governing Group (mail to: Minnesota Coalition for the Homeless, in care of "HMIS Grievance," 122 West Franklin Avenue, Suite 306, Minneapolis, MN 55404).

A written response must be prepared by either the party receiving the grievance (Agency/program, Wilder Research), or the Governing Group.

Clients also may choose to pursue complaints through the legal system.

All agencies are encouraged to complete Data Privacy and Protection training

The HMIS Governing Group encourages all participating agencies or programs to routinely train their personnel on best practices in data privacy and protection. Data privacy is emphasized in HMIS training sessions, but more general training on this topic is encouraged.

Ensuring Data Accuracy

Agencies are responsible for the accuracy of the data they enter into the HMIS. Agencies are strongly encouraged to run reports on a monthly or weekly basis to check data and consult with Wilder Research to correct any problems.

Wilder Research shall regularly check data quality in Minnesota's HMIS. Agencies, or particular end-users, that make repeated errors may be required to attend more training, or may be barred from using HMIS if they are unwilling to improve data entry practices.

If Wilder Research or a funding entity that requires HMIS participation determines that an agency has committed fraudulent activity in the submission or alteration of data, the violation shall be brought before the HMIS Governing Group who shall determine a response after the agency or program has had an opportunity to respond to the allegation or information. The HMIS Governing Group has the authority to take ameliorating action or expel an offending agency from Minnesota's HMIS.

Third party access to data

No request for private, personal information about an individual program participant from a third party or entity shall be honored unless the request is legally binding and complies with the policy for research uses of HMIS data (see appendix).

All requests for system-wide aggregate data or information shall be forwarded to Wilder Research. Wilder Research may charge a reasonable recovery fee.

Appendix

Glossary

Goals of HMIS In Minnesota

*Sample HMIS grievance procedure form **

*User policy, responsibility statement & code of ethics **

*Client data privacy notice and consent form **

*Client release of information form **

*Policy for Research uses of HMIS data**

** For the most recent version of forms, see: <http://www.hmismn.org/>*

Glossary

AHAR – Annual Homeless Assessment Report. A national report produced by HUD that uses HMIS data.

CoC – Continuum of Care. Geographically designated groups that annually file a joint application to HUD for homeless funding. CoCs also work together to develop plans, policies, and initiatives related to homelessness.

DHS – Minnesota Department of Human Services.

End User – Any person in an agency in possession of a valid user license who directly accesses the HMIS.

HIPAA – Health Insurance Portability and Accountability Act. A federal law that applies to the data practices of agencies that provide medical and medically-related services.

HMIS – Homeless Management Information System

HUD – United States Department of Housing and Urban Development

MHFA – Minnesota Housing Finance Agency, also referred to as Minnesota Housing.

McKinney-Vento Act – Federal law that allows for funding for HMIS and Housing and Supportive Service programs which serve individuals who are homeless

ServicePoint – The software behind Minnesota's HMIS. An internet-based client information management system developed by Bowman Systems, LLC.

Goals of HMIS in Minnesota

In the Spring of 2002 Minnesota Housing Finance Agency convened an open meeting on HMIS that included an in-depth brainstorming session on what the state wants out of our HMIS. The following summary was later adopted by the HMIS Implementation Group as the vision for Minnesota's HMIS.

Overall vision and goal

Minnesota's Homeless Management Information System will provide standardized and timely information to improve access to housing and services and strengthen our efforts to end homelessness.

Goals from the perspective of those experiencing homelessness:

Minnesota's Homeless Management Information System will:

- Help us find and access shelter and housing—quickly and accurately
- Help us identify other services for which we are eligible
- Protect the privacy of our personal data, and strip away personally-identifying information as soon as possible
- Improve the accessibility to housing and services for those who do not speak English and those who have disabilities
- Get the job done with the minimum number of questions
- Eliminate the need for us to repeatedly give the same information to service providers
- Enhance the effectiveness of our working relationships with case workers and others who may be accessing the system
- Include protections against using the system's data to deny service, or to abuse civil rights
- Provide us with a printout of our personal data upon request
- Gather data that demonstrates our needs to others—hopefully resulting in improved housing and services
- **In sum, improve access to shelter, housing, and services**

Goals from the service provider perspective:

Minnesota's Homeless Management Information System will:

- Be user friendly, and include adequate training and available help for users
- Easily provide accurate agency-level data, including client demographics, needs, and trends over time
- Cost little
- Be useful for us even if we do not have computers or much technical capacity
- Cover our reporting requirements
- Protect our clients' confidentiality—and us from liability
- **In sum, provide an affordable, user-friendly tool to accurately track client service usage.**

Goals from the continuum of care perspective:

Minnesota's Homeless Management Information System will:

- Provide accurate regional data on demands, migration, capacity, and gaps
- Easily summarize data for the continuum of care
- Include as many providers as possible
- Be affordable and adequately staffed
- **In sum, strengthen continuum of care planning by providing improved data on demands, migration, capacity, and gaps.**

Goals from the state agency perspective:

Minnesota's Homeless Management Information System will

- Interface with (or replace) state data systems
- Produce state and federal reports
- Improve service delivery to clients
- Provide improved, standardized, and timely statewide data for planning
- Provide a good return on the investment
- Help identify gaps in mainstream resources and the barriers that those experiencing homelessness face when trying to access these goals
- **In sum, help coordinate statewide data collection to improve public policy.**

Minnesota's HMIS: grievance procedure form

If you believe that you have not received the assistance you desire concerning your personal or private data held in Minnesota's HMIS, please send a written complaint to:

1. Your Agency
2. Wilder Research
c/o HMIS Administrator , Attention: Grievance
451 Lexington Parkway North
St. Paul, MN 55104

This Agency and Wilder Research are prohibited from retaliating against you for filing a complaint. Your information and complaint will be kept confidential! This Agency and Wilder are required by law to maintain the privacy of your protected personal information and to provide you with a grievance procedure.

If you believe your grievance has not been sufficiently resolved by either your agency or the Wilder Research you may make a complaint to:

3. Minnesota Coalition for the Homeless 612-870-7073
Attention: HMIS Grievance
2233 University Avenue West, Suite 434 St. Paul, MN 55114.

The Coalition will bring your complaint to Minnesota's HMIS advisory group, which will attempt a voluntary resolution of the complaint.

Please note that the Minnesota Coalition for the Homeless is available to help if you would like assistance filling out this form. Also note that the Coalition does *not* directly provide legal services.

GRIEVANCE FORM

NAME: _____ DATE: _____

ADDRESS: _____ Phone Number: _____

Complaint:

User Policy, responsibility statement, & code of ethics

Minnesota's HMIS User Policy, Responsibility Statement & Code of Ethics

For: _____ from: _____
User (print name) (print Agency Name)

USER POLICY

Partner Agencies who use Minnesota's HMIS and each User within any Partner Agency is bound by various restrictions regarding the Client information.

It is a **Client's** decision about which information, if any, is entered into Minnesota's HMIS and whether that information is to be shared and with any Partner Agencies. If your agency is covered by HIPAA or 42 CFR Part 2 (federally-defined treatment facility), it is also Client's decision about whether Wilder may use information for research purposes. The appropriate **Minnesota's HMIS Client Informed Consent and Release of Information Authorization** shall be signed by Client before any Client information is designated for sharing with any Partner Agencies, or, in the case of HIPAA covered entities, authorized for research use. User shall insure that prior to obtaining Client's signature, the Agency's Notice of Uses and Disclosures was fully reviewed with Client in a manner to insure that Client fully understood the information (e.g. securing a translator if necessary).

USER RESPONSIBILITY

A User ID and Password give a user access to the Minnesota HMIS system. **User must initial each item below** to indicate User's understanding and acceptance of the proper use of User's ID and password. Failure to uphold the confidentiality standards set forth below is grounds for immediate termination from Minnesota's HMIS.

_____	My User ID and Password are for my use only and must not be shared with anyone (except the Minnesota's HMIS system administrator (Wilder) and Agency's HMIS administrator or executive director). I must take all reasonable means to keep my Password physically secure.
_____	I understand that the only individuals who can view information in Minnesota's HMIS are authorized users who need the information for legitimate business purposes of this Agency and the Clients to whom the information pertains.
_____	I may only view, obtain, disclose, or use the database information that is necessary to perform my job.
_____	If I am logged into Minnesota's HMIS and must leave the work area where the computer is located, I must log-off before leaving the work area.
_____	A computer that has Minnesota's HMIS open and running shall never be left unattended.
_____	Any hard copies of personally identifiable (client-level) information printed from Minnesota's HMIS must be kept in a secure file, and destroyed when no longer needed.
_____	If I notice or suspect a security breach, I must immediately notify the executive director of the Agency and the System Administrator for Minnesota's HMIS (Wilder Research at 651-647-4600).

USER CODE OF ETHICS

- A. Users must be prepared to answer client questions regarding Minnesota's HMIS.
- B. Users must faithfully respect client preferences with regard to the entry and sharing of client information within Minnesota's HMIS. Users must accurately record Client's preferences by making the proper designations as to sharing of Client information and/or any restrictions on the sharing of Client information.
- C. Users must allow client to change his or her information sharing preferences at the client's request.
- D. Users must not decline services to a client or potential client if that person (i) refuses to allow entry of information into Minnesota's HMIS (except if that policy is over-riden by agency policy); or (ii.) refuses to share his or her personal information with other service providers via Minnesota's HMIS.
- E. The User has primary responsibility for information entered by the User. Information Users enter must be truthful, accurate and complete to the best of User's knowledge.
- F. Users will not solicit from or enter information about clients into Minnesota's HMIS unless the information is required for a legitimate business purpose such as to provide services to the client.
- G. Users will not alter or override information entered by another Agency.
- H. Users will not include profanity or offensive language in Minnesota's HMIS; nor will Users use Minnesota's HMIS database for any violation of any law, to defraud any entity or conduct any illegal activity.
- I. Upon client request users must allow a client to inspect and obtain a copy of the client's own information maintained within Minnesota's HMIS. Information compiled in reasonable anticipation of or for use in a civil, criminal or administrative action or proceeding need not be provided to Client.
- J. Users must permit Clients to file a written complaint regarding the use or treatment of their information within Minnesota's HMIS. Client may file a written complaint with either the Agency or Wilder Research (c/o HMIS Admin, 1295 Bandana Blvd, No., Suite 210, St. Paul, MN 55108). If not satisfied, clients may file a complaint with the HMIS advisory body via the Minnesota Coalition for the Homeless. Clients may *not* be retaliated against for filing complaints.

I understand and agree to comply with all the statements listed above.

User signature _____ Date _____

Preferred ServicePoint Login (username): _____

Contact Information

Work phone: _____ e-mail address: _____

Witness signature (MHP or WRC) _____ Date _____

WRC/MHP

User's access level (circle): Case Worker Agency Admin Other: _____
(if multiple "providers" in agency)

User's home provider: _____

Other providers this user may enter data as: _____

Client Data Privacy Notice and Consent Form, and Release of Information Form (with instructions to agency)

Instructions

PLEASE READ BEFORE USING CONSENT FORMS

****THIS PAGE NOT MEANT FOR DISTRIBUTION TO CLIENTS****

These forms were developed based on federal rules governing Homeless Management Information Systems (Federal Register, Vol. 69, No. 146, July 30, 2004), and additional guidance from Minnesota's HMIS Governing Group.

How to use the HMIS consent forms and notices

1. **Minnesota's HMIS: Data Privacy Notice & Consent Form** should be given to all adult clients or single unaccompanied youth. Parents can give consent for their children. Clients who do not sign the form should be entered only using ServicePoint's "Enter as Anonymous" feature. Drop-in shelters, street outreach programs, and telephone-only services may substitute a brief verbal notice and consent for use of this form.
2. **Minnesota's HMIS: Release of Information** is *only* for agencies that would like to provide their clients with the option of sharing data with other service-providing agencies that use Minnesota's HMIS. **This page is not necessary for DV agencies, Youth agencies, HIV/AIDS agencies, HIPAA-covered agencies, and others that do not intend to share data.** If using the form, please be sure to include a list of up to ten agencies with whom you would like to share data in the space provided, and communicate these "closed exemption" agencies to Wilder Research (hmis@wilder.org). Note that we are not allowing a share with all ServicePoint agencies option.
3. **Minnesota's HMIS: Posted Data Privacy Notice** is not intended for distribution to clients. Please post this sign in an area viewable by clients.

Note that throughout the forms the phrase "this agency" can be replaced with the actual name of your agency. This document can be further modified and/or incorporated into an agency's existing data privacy forms and notices, but modifications should only be made in consultation with legal counsel.

Also note that **these forms apply only to data maintained in Minnesota's HMIS**. They are NOT meant to serve as an agency's complete privacy policy or sole consent forms. The following situations, for example, require some additional privacy-related provisions for your clients:

- **Agencies covered by Minnesota's Government Data Practices Act**, need to provide clients with a Tennessean warning that lists the specific governmental agencies that fund the programs and, therefore, may view client data (e.g., Minnesota Department of Human Services, Minnesota Housing Finance Agency, U.S. Department of Housing and Urban Development). Consult your funder and see the Minnesota Department of Administration's Information Policy Analysis Division (<http://www.ipad.state.mn.us/>) for further information.
- **HIPAA covered agencies**: The federal government's "Health Insurance Portability and Accountability Act" (for more info, see <http://www.hhs.gov/ocr/hipaa/>) supersedes federal HMIS regulations. By law, these agencies are not required to provide clients with "Minnesota's HMIS: Data Privacy Notice & Consent Form," but they are encouraged to do so, since the form provides information about the system. In addition, **HIPAA covered agencies need to provide clients with an opportunity to opt-out of including their data in research**. A check-box such as the following should be added somewhere to either the HMIS Notice & Consent forms, or the agency's forms:

Consent for research uses of information in Minnesota's HMIS. Please check (✓) one:

Yes, include in research. I understand that information about me that is in Minnesota's HMIS may be used by Wilder Research to conduct research related to homelessness and housing programs, service needs, income supports, education and employment, and program effectiveness. My name, social security number or other information that would identify me personally will never appear on a research report.

No, do not include in research. I do not want my information used for research purposes.

- **HUD-Funded agencies** need to explicitly list HUD as having rights to view client data entered into Minnesota's HMIS. Please replace the second bullet under "who can see information entered into HMIS?" (currently "Auditors or others who have legal rights

to review the work of this agency”) with, “Auditors or others who have legal rights to review the work of this agency, including the U.S. Department of Housing and Urban Development.”

Minnesota's HMIS: Data Privacy Notice & Consent Form

What is Minnesota's HMIS?

HMIS stands for Homeless Management Information System. It is a computer system used by this agency and other agencies that provide services.

Why is information collected in Minnesota's HMIS?

- To help us keep track of how many people we serve and the types of people we serve – both as an agency and as a network of service providers.
- To help us understand the types of services people need and plan for services to meet these needs.

Who can see information entered into Minnesota's HMIS?

- People who work in this agency who need to see your information to help provide services to you or your family, or for billing or funding purposes.
- Auditors or others who have legal rights to review the work of this agency.
- Some employees of Wilder Research (in St. Paul). Wilder maintains Minnesota's HMIS and may see your information as a part of managing the system.
- People using HMIS data to do research. This includes employees of Wilder Research and other people who sign agreements with Wilder or this agency. Your name, social security number, or other information that would identify you will **never** appear on research reports.
- If you or members of your family are in need of protective services because of abuse, neglect, or domestic violence, this agency may be required to file a report with a governmental agency.
- Others, as the law requires. That would include officials with a subpoena, warrant, or court order.
- Your information also may be released if needed to protect the health or safety of others or yourself.

We need your written permission to release your data for other uses.

Know Your Rights:

- **Tell the intake worker if you do not want your name, social security number, or exact date of birth entered in HMIS.** This agency will **not** refuse to help you because you tell us you do not want information that identifies you entered into HMIS.
- You have the right to a copy of the information about you that is kept in Minnesota's HMIS for as long as it is kept there (except for information that may be kept from you in certain legal proceedings).
- You have the right to correct mistakes if HMIS information is wrong or incomplete.
- You have the right to complain if you believe that this agency or Minnesota's HMIS violated your privacy rights. You can ask a staff person for a complaint and appeals form or write to Minnesota Coalition for the Homeless, HMIS Grievance, 122 West Franklin Avenue, Suite 306, Minneapolis, MN 55404.

Signed consent

For: _____
Print complete name (First, Middle, Last) Birth date

By signing this you are giving us your permission to enter your personal information into Minnesota's HMIS. You do not have to sign this form to receive services from this agency.

SIGNATURE OF CLIENT OR GUARDIAN DATE Signature of witness Date

Minnesota's HMIS: Release of Information

For: _____
 Print complete name (First, Middle, Last) _____ Birth date

With your permission this agency can share information that it enters into HMIS with other agencies. Sharing allows other service providers to look up information about you in Minnesota's HMIS if you go to them for help. Sharing this information may help the other agencies serve you better.

Please check (✓) a box:

- DO NOT SHARE:** I do **not** want **any** of the information about me in Minnesota's HMIS shared with any other service providers. *(Data security = Closed)*
- SHARE:** This agency may share my name, date of birth, race, ethnicity, Social Security Number, and the same information from any other members of my family who are being served with me at this time. *(Data security = Closed with exceptions)*

If you checked SHARE, please check (✓) the agencies that you would like to share with:

<input type="checkbox"/> Share with all agencies listed below	
<input type="checkbox"/> <Agencies should use this space to>	<input type="checkbox"/> [Please communicate this list to]
<input type="checkbox"/> <fill in names of up to 10 other programs>	<input type="checkbox"/> [Wilder: <u>hmis@wilder.org</u>]
<input type="checkbox"/> <that use ServicePoint, and are most>	<input type="checkbox"/> [subject line: potential exceptions list]
<input type="checkbox"/> <likely to have some of the same clients>	<input type="checkbox"/> [see <u>www.hmismn.org/agencies/</u>]
<input type="checkbox"/> <or receive referrals from this agency>	<input type="checkbox"/> [for a current list of HMIS agencies]

If you checked SHARE, please check (✓) if we should let these agencies see information about...

<input type="radio"/> Services you receive	<input type="radio"/> Educational background
<input type="radio"/> Your income and income sources	<input type="radio"/> Employment status
<input type="radio"/> If you are homeless or not	<input type="radio"/> Military history
<input type="radio"/> Reasons for seeking services	<input type="radio"/> Other: _____
<input type="radio"/> Living situation and housing history	<input type="radio"/> Other: _____

When you sign this form it shows that you understand:

- We will **not** deny you help if you do not want your personal information shared.
- If you want us to share your data, this consent will expire in 1 year.
- If you want us to share your data, you may change your mind and cancel this consent at any time.
- Even if you check "do not share" your information in HMIS may still be seen by the people listed on Minnesota's HMIS Data Privacy Notice, and any others listed on this agency's privacy statements.

 SIGNATURE OF CLIENT OR GUARDIAN DATE Signature of agency witness Date

Minnesota's HMIS: Posted Data Privacy Notice

We collect personal information about the people we serve in a computer system used by many social service agencies called Minnesota's HMIS (Homeless Management Information System).

Personal information that we collect is important to run our programs and to help us improve services. Also, we are required to collect some personal information by law or by organizations that give us money to operate this program. We only collect information that we consider to be appropriate.

You do not have to give us information. However, if you do not give us the information, we may not be able to determine whether we can help you, or get help for you from other agencies.

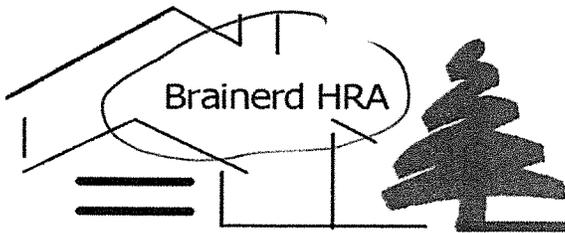
You have a right to review the personal information that we have about you and ask us to correct any mistakes you may find. You have a right to file a complaint with this agency or others if you feel that your data privacy rights have been violated.

Please ask our staff if you have any questions, or if you would like a grievance form or a complete copy of our privacy policy.

Minnesota's HMIS Policy for Research uses of HMIS data⁵

1. **Discuss project with HMIS staff**, including identifying the way that the least amount of identifiable data can change hands. If the requestor's research/evaluation questions can be answered without transferring identified data to the requestor, step 3 is not necessary.
2. **Work plan and budget agreed to.** Data and related reporting generally cannot be provided without proper compensation for staff time and other resources.
3. **Requestor provides a written request outlining uses of data, including research questions, and procedures for protecting data** (including assurances that data will be destroyed after use, and that the data will not be re-used for purposes beyond those outlined in the request).
 - a. Wilder notifies HMIS Governing Group that a request has been received.
 - b. Requestor or Wilder informs or obtains consent from HMIS participating agencies and/or individual clients as necessary/depending on nature of project.
 - c. Requestor clears the project with outside Institutional Review Boards (IRBs) as necessary/depending on nature of project.
 - d. Requestor clears the project with Wilder's Research Review committee for approval or denial. [Note: This committee meets quarterly, but sometimes is able to address requests via a virtual meeting between planned meetings.]
 - e. Wilder notifies Governing Group of whether the project is moving ahead.
 - f. At any time throughout the process Wilder reserves the right to consult with the Governing Group (including a subcommittee thereof) for purposes of providing advice to Wilder and the requestor on any issues that may arise from the project, and to more fully inform the group. The Governing Group may pass motions regarding the project, but those motions technically are not legally binding. Any members with a conflict of interest (e.g., those requesting data themselves or working directly with the requestor) should recuse themselves from votes taken on the project in question.
4. **After the analysis findings from the project are provided to Governing Group via Wilder Research.** The format of this report depends on the nature of the project.

⁵ Developed by Wilder Research in consultation with HMIS Governing Group and its ad-hoc Policy Subcommittee. Accepted by Governing Group on July 15, 2010.



324 East River Road
Brainerd, MN 56401

Phone: 218/828-3705
Fax: 218/828-8817

Dear AG,
Here is our PHA plan regarding our preferences:

4-III.C. SELECTION METHOD

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

Local Preferences [24 CFR 982.207]

PHAs are 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 the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

PHA Policy

Local Preference will be given to Section 8 Applicants who reside in Crow Wing County.

Local Preference for public housing families who no longer qualify under the HRA's occupancy guidelines: If no appropriate sized unit is available in the Public Housing inventory, residents of public housing whose family composition has changed to the

extent that they no longer qualify under the HRA's occupancy guidelines are given preference for the HRA's Section 8 Programs

Preference will be given to any family that has been terminated from HCV program due to insufficient funding.

The percentage of new admission that were homeless at time of admission into our Public Housing and/or our Housing Choice Voucher Program between July 1, 2015 –June 30, 2016 are:

Public Housing: 29%

Housing Choice Voucher: 3%

Thank you,

A handwritten signature in cursive script that reads "Carrie Burrell".

Carrie Burrell
Resident Program Coordinator



AG Huot <ag@cmhp.net>

RE: need information for the CoC 2016 NOFA - very important!

1 message

Kim Wallace <toddhra@rea-alp.com>

Thu, Aug 4, 2016 at 8:07 AM

To: AG Huot <ag@cmhp.net>

AG:

Public Housing was 56% of new admissions were homeless. Housing Choice Voucher was 9% of new admissions. Currently we do not have a homeless preference but that is in my plan to change beginning the 1st of the year for both programs. I am also looking into giving veterans a preference as well.

Kim Wallace

Todd County HRA

From: AG Huot [mailto:ag@cmhp.net]**Sent:** Wednesday, August 3, 2016 3:42 PM**To:** Louise Reis <lreis@stcloudhra.com>; Carrie Burrell <cburrell@brainerdhra.org>; Diana Kliber <Diana@brainerdhra.org>; Kim Wallace <toddhra@rea-alp.com>**Subject:** Re: need information for the CoC 2016 NOFA - very important!

Sorry, I also need one of the following (required by HUD):

If PHA has General or Limited Homeless Preference CoC must attach: a. an excerpt from the PHA(s) plan that clearly identifies the homeless preferences; or

b. a letter from the PHA(s) that addresses homeless preferences; or Example: An excerpt from the PHA's administrative planning document(s) such as the Administration Plan, Admissions and Continued Occupancy Policy (ACOP), Annual Plan, or 5-Year Plan, as appropriate.

4. If "No" was selected, you must attach a document that states "Not Applicable".

Please let me know if you have any questions. I need one of the above three a,b, or c for my grant.

thanks

AG

AG Huot

Program Manager/COC Coordinator

Heading Home Central Coordinator

Central MN Housing Partnership

37 28th Avenue North, STE. 102

St. Cloud, MN 56303

[Email: ag@cmhp.net](mailto:ag@cmhp.net)

P: (320) 258-0674

Fax(320) 259-9590

[Redacted]

[Redacted]

On Wed, Aug 3, 2016 at 3:25 PM, AG Huot <ag@cmhp.net> wrote:

Please provide the percentage of new admissions that were homeless at the time of admission into your public housing and/or housing choice voucher program between July 1, 2015 and June 30, 2016.

also indicate whether your PHA has a homeless admissions preference in its Public Housing and/or Housing Choice Voucher (HCV) program.

AG Huot

Program Manager/COC Coordinator

Heading Home Central Coordinator

Central MN Housing Partnership

37 28th Avenue North, STE. 102

St. Cloud, MN 56303

[Email: ag@cmhp.net](mailto:ag@cmhp.net)

P: (320) 258-0674

New Admissions Report
As of June 30, 2016

Program type : All Relevant Programs

Level of Information : HA within State MN

Effective Dates Included : July 01, 2015 through June 30, 2016



Download in Excel



Print Report



View Entire Report

Units	Income	Household	Race/Ethnicity	Member Age	Waiting
-------	--------	-----------	----------------	------------	---------

Admissions Income Family Type Family Status Unit Size Female Head of Household

Waiting Period for New Admissions

HA	Percent of Families Homeless at New Admissions (%)	Average Waiting Period in Months	Percent Waiting List Time Not Reported (%)
MN	8	21	0
MN038	3	45	0

St. Cloud NRA

1 - 1 of 1

ST Cloud HRA preferences:

- V. **VERIFYING DISPLACEMENT PREFERENCES:** Applicants must provide proof of any Preference they are claiming. This can be done through third-party or individual certifications. As applicants do not receive additional points for more than one Preference, the Public Housing Authority will only verify one of the following:

Involuntary displacement must be established by certifications from the following sources: (See Part 2., Section 10 for further definitions relating to involuntary displacement).

1. **Disaster, whether Natural or Manmade:** Certification from a unit or agency of government that an applicant has been or will be displaced.
2. **Government Action:** Certification from a unit or agency of government that an applicant has been or will be displaced.
3. **Owner Action:** Certification from an owner or owner's agency, that an applicant had to, or will have to, vacate a unit by a certain date through no fault of their own.
4. **Domestic Violence:** Certification from the local police department, social services agency, or court of competent jurisdiction, or a clergyman, physician or public or private facility that provides shelter or counseling to the victims of domestic violence.
5. **Reprisal:** Certification from a unit of local, state or federal law enforcement against family members as a reprisal for providing information on criminal activities to a law enforcement agency.
6. **"Hate Crimes":** Certification from a unit of law enforcement or court of competent jurisdiction, that an applicant has been, or will be, displaced as a result of threatened or actual physical violence or intimidation.
7. **Inaccessibility:** Certification from a social service agency or physician, that an applicant has been, or will be, displaced as result of the inaccessibility of their housing unit to accommodate a mobility or other impairment.
8. **HUD Disposition of Multifamily Project:** Certification from HUD that the building in which the applicant lives must be vacated before it can be sold or demolished.

VI. **DEFINITION OF INVOLUNTARY DISPLACEMENT:**

- A. An applicant qualifies for a preference on the basis of involuntary displacement if either of the following applies:
1. The applicant has been involuntarily displaced and is not living in standard, permanent replacement housing.
 2. The applicant will be involuntarily displaced within no more than six months from the date of preference status certification by the family or verification by the Public Housing Authority.
- B. "Standard, permanent replacement housing" is housing:
1. That is decent, safe, and sanitary;
 2. That is adequate for the family size; and
 3. That the family is occupying pursuant to a lease or occupancy agreement.
 4. "Standard, permanent replacement housing" does not include:
 - a. Transient facilities, such as motels, hotels or temporary shelters for victims of domestic violence, transitional housing; or homeless families; or
 - b. In the case of domestic violence, the housing unit in which the applicant and the applicant's spouse or other member of the household who engages in such violence live.
- C. An applicant is or will be involuntarily displaced if the applicant has vacated or will have to vacate the unit where the applicant lives because of one or more of the following:
1. **Displacement by disaster.** An applicant's unit is uninhabitable because of a disaster, such as a fire or flood.
 2. **Displacement by government action.** Activity carried on by an agency of the United States or by any State or local governmental body or agency in connection with code enforcement or a public improvement or development program.
 3. **Displacement by action of housing owner.** Action by a housing owner forces the applicant to vacate its unit. An applicant does not qualify as involuntarily displaced because action by a housing owner forces the applicant to vacate its unit unless:
 - a. The applicant cannot control or prevent the owner's action;

- b. The owner action occurs although the applicant met all previously imposed conditions of occupancy; and
- c. The action taken by the owner is other than a rent increase.

4. **To qualify as involuntarily displaced because** action by a housing owner forces the applicant to vacate its unit, reasons for an applicant's having to vacate a housing unit include, but are not limited to, conversion of an applicant's housing unit to non-rental or non-residential use; closing of an applicant's housing unit for rehabilitation or for any other reason; notice to an applicant that the applicant must vacate a unit because the owner wants the unit for the owner's personal or family use or occupancy; sale of a housing unit in which an applicant resides under an agreement that the unit must be vacant when possession is transferred; or any other legally authorized act that results or will result in the withdrawal by the owner of the unit or structure from the rental market.

Such reasons do not include the vacating of a unit by a resident as a result of actions taken by the owner because the resident refuses:

- a. To comply with HUD program policies and procedures for the occupancy of under-occupied or over-crowded units; or
- b. To accept a transfer to another housing unit in accordance with a court decree or in accordance with policies and procedures under a HUD-approved desegregation plan.

5. **Displacement by domestic violence.** An applicant is involuntarily displaced if the applicant has vacated a housing unit because of domestic violence or lives in a housing unit with a person who engages in domestic violence

"Domestic violence" means actual or threatened physical violence directed against one or more members of the applicant family by a spouse or other member of the applicant's household.

For an applicant to qualify as involuntarily displaced because of domestic violence:

- a. The Public Housing Authority must determine that the domestic violence occurred recently or is of a continuing nature; and
- b. The applicant must certify that the person who engaged in such violence will not reside with the applicant family unless the Public Housing Authority has given advance written approval. If the

family is admitted, the Public Housing Authority may deny or terminate assistance to the family for breach of this certification.

6. **Displacement to avoid reprisals.** An applicant family is involuntarily displaced if:
 - a. Family members provided information on criminal activities to a law enforcement agency, and
 - b. Based on a threat assessment, the law enforcement agency recommends rehousing the family to avoid or minimize a risk of violence against family members as a reprisal for providing such information.
 - c. The Public Housing Authority may establish appropriate safeguards to conceal the identity of families requiring protection against such reprisals.

7. **Displacement by hate crimes.** An applicant is involuntarily displaced if:
 - a. One or more members of the applicant's family have been the victim of one or more hate crimes; and
 - b. The applicant has vacated a housing unit because of such crime, or the fear associated with such crime has destroyed the applicant's peaceful enjoyment of the unit.

"Hate crime" means actual or threatened physical violence or intimidation that is directed against a person or his or her property and that is based on the person's race, color, religion, sex, national origin, handicap, or familial status.

The Public Housing Authority must determine that the hate crime involved occurred recently or is of a continuing nature.

8. **Displacement by inaccessibility of unit.** An applicant is involuntarily displaced if:
 - a. A member of the family has a mobility or other impairment that makes the person unable to use critical elements of the unit; and
 - b. The owner is not legally obligated to make changes to the unit that would make critical elements accessible to the disabled person as a reasonable accommodation.

9. **Displacement because** of HUD disposition of multifamily project. Involuntary displacement includes displacement because of disposition of a multifamily rental housing project by HLTD under Section 203 of the Housing and Community Development Amendments of 1978.

Minnesota Homeless Management Information System

Memorandum of Understanding for Lead Agency and System Administrator Duties

A. Goals and Objectives

This Memorandum of Understanding is intended to confirm agreements between the ten Continuums of Care (CoC) in Minnesota and the Institute for Community Alliances (ICA) for the operation of Minnesota's Homeless Management Information System (HMIS). As such, the Memorandum of Understanding sets forth the general understandings, terms, authority, services, and specific responsibilities of each party relating to key aspects of the governance and operation of the Minnesota (HMIS).

B. Background

By federal mandate, each CoC across the United States is responsible for selecting an HMIS software solution that complies with the U.S. Department of Housing and Urban Development (HUD) data collection, management, and reporting standards. In Minnesota ten regional Continuums of Care comprise the network, namely: Central, Hennepin County, Northeast, Northwest, Ramsey County, Suburban Metro Area Coc (SMAC), Southeast, Southwest, St. Louis County, and West Central. Minnesota's ten CoCs jointly agreed to operate a statewide HMIS and to provide HMIS oversight through a shared HMIS Governing Board. In addition, each CoC provides funding to support the statewide Minnesota HMIS.

C. Purpose of HMIS

HMIS is used to: aggregate data about the extent and nature of homelessness over time; produce an unduplicated count of homeless persons; understand patterns of service use; measure the effectiveness of homeless assistance projects and programs; and as a tool to prevent and end homelessness (Coordinated Entry, case management, homeless fund management, reducing duplication of data entry, data sharing, service collaboration, referrals, etc.). Data produced are used for planning, education and reporting to funders.

D. Duration

This MOU is effective June 1, 2016 to December 31, 2017.

E. Designations

HMIS Software - The CoC designates the Bowman Systems' ServicePoint (SP) as the primary technical solution for Minnesota's HMIS.

HMIS Lead and System Administrator - The Institute for Community Alliances (ICA), a non-profit organization based in Des Moines Iowa, is designated as the official statewide Minnesota HMIS lead agency (LA) and state system administrator (SSA) for all 10 CoC geographic areas.

F. Specific Responsibilities of the Parties

- a. Responsibilities of the ten Continuums of Care:
 - i. Designate a single information system as the official HMIS software for the geographic area;

- ii. Designate a HMIS Lead to operate the system;
 - iii. Provide for governance of the HMIS Lead, including;
 - 1. Participate in a shared HMIS Governance structure;
 - 2. Require that the HMIS Lead enter into written HMIS Participation Agreements with each Contributing HMIS Organization (hereinafter referred to as "CHO") requiring the CHO to comply with federal regulations regarding HMIS
 - 3. Hold CHOs responsible for failure to comply with regulations, including imposing sanctions; and
 - 4. Impose the participation fee, if any, charged by the HMIS;
 - iv. Maintain documentation in compliance with federal regulations and with the MOU;
 - v. Review, revise, and approve the HMIS policies, privacy and security plan, and data quality plan for the HMIS as required by federal regulation;
 - vi. Develop and implement a plan for monitoring the HMIS to ensure that:
 - 1. CHO consistently participate in HMIS;
 - 2. HMIS is satisfying the requirements of all regulations and notices issued by HUD;
 - 3. The HMIS Lead is fulfilling the obligations outlined in its HMIS Governance Charter and Agreement with the CoC, including the obligation to enter into written participation agreements with each contributing CHO
 - vii. Commit to utilize the statewide HMIS network and seeking HUD and other resources to help fund the collective system.
 - viii. Oversee and monitor HMIS data collection and production of the following reports:
 - 1. Sheltered point-in-time count;
 - 2. Housing Inventory Chart;
 - 3. Annual Homeless Assessment Report (AHAR); and
 - 4. Annual Performance Reports (APRs).
- b. Responsibilities of the designated Lead Agency, The Institute for Community Alliances:
- i. Conduct day-to-day operational requirements of the HMIS software and system;
 - ii. Generate, develop, refine, make available, and submit reports as required for HUD compliance, including HUD funding application reporting requirements, performance measures, sheltered point-in-time count, housing inventory chart, AHAR, APR's, and other reporting that becomes a requirement by HUD during the timeframe of this MOU;
 - iii. Assist the Continuums of Care with design and implementation of their Coordinated Entry System within HMIS;
 - iv. Assist the Continuums of Care with implementation of performance measures within HMIS;
 - v. Ensure compliance with data transfer requirements for the SSVF and RHY programs;
 - vi. Facilitate, monitor, and report to CoC the participation of all agencies submitting data to HMIS and ensuring compliance with federal HMIS requirements;

- vii. Implement and maintain compliance with written HMIS policies and procedures as approved by the statewide governance committee and in accordance with § 580.31 for all CHOs;
- viii. Execute a written HMIS Participation Agreement with each participating CHO as ensuring the agreement includes: the obligations and authority of the HMIS Lead and CHO, the requirements of the security plan and privacy policy with which the CHO must abide, sanctions for violating the HMIS Participation Agreement, and an agreement that the HMIS Lead and the CHO will process Protected Identifying Information consistent with the agreement;
- ix. Serve as the applicant to the US Department of Housing and Urban Development (HUD) for CoC grant funds to be used for HMIS activities for the CoC's geographic area, as directed by the CoC in consultation with the statewide Governance committee, and entering into grant agreements with HUD to carry out the HUD-approved HMIS activities;
- x. Monitor data quality and train end users, agencies and the CoC to obtain and retain a high level of data from all CHOs;
- xi. Implement and monitor a security plan, an updated data quality plan, and a privacy policy to the CoC on a timeline agreed on by the CoC, HMIS Governing Group and HMIS Lead and in accordance with all HUD rules, notices, and guidance establishing the requirements of these plans. The HMIS Lead, in conjunction with the HMIS Governing Group and CoC, must review and update the plans and policy at least annually. During this process, the HMIS Lead must seek and incorporate feedback from the CoCs, State Agencies and other HMIS stakeholders.
- xii. Participate in the design of and follow the HMIS Governance Annual Work Plan, which includes; reporting standards, budget, priorities, policies, and directives.
- xiii. Assure transparency in resource management, prioritization, and operations. Provide regular reporting on resource management, as directed by HMIS Governance.
- xiv. Support the broad use of HMIS as a tool to document, serve and end homelessness.
- xv. Assure system performance, including the ongoing availability and accessibility of the HMIS software and system.
- xvi. Provide HMIS and HMIS-subject related trainings to end users, agencies, Coordinators, funders, and planners to insure access and as needed for the purposes of: service delivery, documentation, coordinated entry, reporting, planning, and compliance, striving for good customer satisfaction in doing so.
- xvii. Implement a customer satisfaction feedback and improvement process promote customer satisfaction.
- xviii. Encourage and support using HMIS to its maximum potential, including increasing functionality, incorporating innovations, and assuring adaptively, as appropriate.
- xix. Assure HMIS is properly staffed to achieve responsibilities, deliverables and services described in this MOU including:
 - 1. Data Analyst: Provide 1 a minimum of full-time data analyst for Minnesota's HMIS.
 - 2. Report Writer: Provide a minimum of 1 report writer.

3. Regional System Administrators:

- a. Metro: Provide a minimum of 4 metro/suburban-metro SA positions.
- b. Greater Minnesota: Provide a minimum of 3 greater Minnesota SA with regional office locations.

c. Responsibilities of HMIS Governance:

- i. Develop HMIS policies and procedures. These policies and procedures must comply with all applicable Federal law and regulations, and applicable state or local governmental requirements. The HMIS Governance may not establish local standards for any CHO that contradicts, undermines, or interferes with the implementation of the HMIS standards as prescribed in b. Privacy;
- ii. Develop a data privacy policy. At a minimum, the privacy policy must include data collection limitations; purpose and use limitations; allowable uses and disclosures; openness description; access and correction standards; accountability standards; protections for victims of domestic violence, dating violence, sexual assault, and stalking; and such additional information and standards as may be established by HUD in notice. Every organization with access to protected identifying information must implement procedures to ensure and monitor its compliance with applicable agreements and the requirements of this part, including enforcement of sanctions for noncompliance;
- iii. Oversee and monitor HMIS funds, functionality and performance;
- iv. Provide directions and guidance on HMIS practices; and
- v. Set and jointly approve with HMIS Lead an annual HMIS Work Plan, priorities, budget, and policies.

G. Deliverables and timeframes

H. Following is an outline of core deliverables. The timeframe listed indicates whether the deliverable is an expectation of on-going operations, or a deliverable due to begin on a specific date.

I.

Deliverable Definition	Begin Date
HMIS Standards: Operate HMIS in compliance current HMIS Technical Standards, HUD HMIS Data Standards and other applicable state or federal laws, assuring providers are trained and monitored on how to be compliant with said standards and laws.	On-going
Data Privacy: Operate HMIS in compliance with data privacy and data security regulations/requirements (state, federal, and funder), assuring providers are trained and monitored on how to support compliance.	On-going
Adhere to MN HMIS Policies and Procedures. Make recommendations to HMIS Governance on improvements to policies related to compliance, system quality or functionality.	On-going

Deliverable Definition	Begin Date
Participation: Review, monitor and report HMIS coverage rates to the CoC and HMIS Governance, making recommendations and supporting improved coverage.	Initial quarterly review by 9/1/2016, then annual with additional reviews as designed by HMIS Governance.
Data quality: Provide a minimum of quarterly reports to CoCs on data quality. Make recommendations for improvement to data quality and support local agencies, state agencies and CoCs on continuous quality improvement efforts.	9/1/2016
Manage Bowman Vendor contract.	On-going
State meetings: Staff and engage in Statewide HMIS, CoC, and Homeless meetings at the request of HMIS Governance.	8/1/2016
Website: host the MN HMIS website	6/1/2016
Stakeholder engagement: Hold quarterly stakeholder feedback meetings and/or surveys in collaboration with HMIS Governance and the CoCs to assure valuable stakeholder feedback is integrated into HMIS.	9/1/2016
HMIS updates: provide email blasts to HMIS users and stakeholders for the purpose of compliance, education, awareness or input.	7/1/2016
Customized Assessments: Support State agencies and CoCs in developing customized assessments.	9/1/2016
CES assessments, visibility, workflow and reports will be set-up in the live site and demo site according to the state CES plan.	6/2016
Modules: Support the immediate addition, set-up, training, and customization for HMIS Modules into system functions including Call Point and Fund Manager.	7/1/2016
Modules: Support the addition, set-up, training, and customization for HMIS Modules into system functions for Eligibility Point.	10/1/2016
Customized reports: Meet with Continuums to assess needs for additional unified reports quarterly.	9/1/2016
Customized reports: Respond to and support requests from Continuums, state and agencies for customized reports. Respond to requests within 2 business days. Follow HMIS Governance protocol on prioritization when there is a bottleneck.	9/1/2016
Customized reports: Work with MICH and state agencies to annually create and/or update customized reports.	TBD
HUD: Assure HMIS reports are available for required HUD mandates, performance measures, annual/activities reports (PIT, HIC, APR, AHAR) and for data requested during the annual NOFA competition.	On-going

Deliverable Definition	Begin Date
State Agency and CoC staff trained and licensed as LSAs will have ability to run reports and see within their designated and approved tree structure.	6/1/2016 (Hennepin & Ramsey)
Help Desk: Provide SA and analyst staffing of help desk services between hours of 8-4 or 9-5 workdays AND provide after-hours emergency response to system outages. Requests for help should be responded to within 4 hours.	On-going
New User Trainings: Provide both online and/or in-person new user trainings on a monthly basis.	On-going
Program specific training: Provide customized trainings for specific programs to help assure all data elements and other funder requirements are understood and reported.	On-going
Maximize use of HMIS: Support and train on the utilization of enhanced and customized system functions that enable agencies and CoCs to improve quality of service, gain efficiencies, reduce duplication of data entry and encourage overall desire to utilize HMIS as a tool to prevent and end homelessness.	9/1/2016
Provide budget reports that clearly compare fiscal year-to-date actuals (income and expenses), summarized by categories, to original and revised budgets.	Monthly 1 week prior to HMIS Governance meetings beginning 9/2016.

J. Performance and Evaluation of Services

- a. Monthly reports will be provided by ICA to HMIS Governance. The detailed format and content will be negotiated by the parties, but shall:
 - i. clearly articulate the status of deliverables identifying any relevant information related to responsibilities (issues, delays, challenges, solutions, recommendations, etc.),
 - ii. report financial and resource expenditures,
 - iii. provide updates on funder or federal policy/regulatory updates and changes,
 - iv. provide updates on Bowman and ServicePoint, and
 - v. identify system functions or innovations that will improve efficiencies, workflow, data quality, performance, or outcomes.
- b. HMIS Governance reserves the right to evaluate Lead Agency performance following each quarter of the contract. If performance is not compliant with the responsibilities and deliverables laid out in this MOU, HMIS Governance reserves the right to renegotiate or terminate the contract.
- c. If ICA meets or exceeds standards, HMIS Governance and Minnesota CoCs reserve the right to positively weight ICA in a future RFP, if needed, for Minnesota's HMIS.

K. Payment Standards

Payment standards and dates are covered under individual funder contracts.

L. Period of Agreement and Modification/Termination

This MOU becomes effective June 1, 2016 and shall remain in effect until December 31, 2017.

This MOU can be terminated for non-compliance by either party with a 30 day written notice.

Modification of this MOU can occur at the request and mutual agreement of either party.

The signatures of the parties indicate their agreement with the terms and conditions set forth in this document.

Central Minnesota Continuum of Care MN- 505
BY [Signature] Date 5/16/16
NAME Ab Hut- COC coordinator

The Institute for Community Alliance
BY [Signature] Date 5-1-16
NAME David Eberbach, Executive Director

Performance Measurement Module (Sys PM)

Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

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

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

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH		989		38			25	
1.2 Persons in ES, SH, and TH		1402		98			44	

b. Due to changes in DS Element 3.17, metrics for measure (b) will not be reported in 2016.

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.

	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	-	-	-	-	-	-	-	-
1.2 Persons in ES, SH, and TH	-	-	-	-	-	-	-	-

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 (0 - 180 days)		Returns to Homelessness from 6 to 12 Months (181 - 365 days)		Returns to Homelessness from 13 to 24 Months (366 - 730 days)		Number of Returns in 2 Years	
		# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO									
Exit was from ES	186	23	12%	20	11%	12	6%	55	30%
Exit was from TH	176	1	1%	3	2%	3	2%	7	4%
Exit was from SH									
Exit was from PH	120	2	2%	1	1%	5	4%	8	7%
TOTAL Returns to Homelessness	482	26	5%	24	5%	20	4%	70	15%

Performance Measurement Module (Sys PM)

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	Previous FY PIT Count	2015 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	607	696	89
Emergency Shelter Total	235	297	62
Safe Haven Total	0	0	0
Transitional Housing Total	265	194	-71
Total Sheltered Count	500	491	-9
Unsheltered Count	107	205	98

Metric 3.2 – Change in Annual Counts

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

	Previous FY	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons		1583	
Emergency Shelter Total		1083	
Safe Haven Total			
Transitional Housing Total		564	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		74	
Number of adults with increased earned income		3	
Percentage of adults who increased earned income		4%	

Performance Measurement Module (Sys PM)

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		74	
Number of adults with increased non-employment cash income		13	
Percentage of adults who increased non-employment cash income		18%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults (system stayers)		74	
Number of adults with increased total income		16	
Percentage of adults who increased total income		22%	

Metric 4.4 – Change in earned income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		65	
Number of adults who exited with increased earned income		4	
Percentage of adults who increased earned income		6%	

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

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		65	
Number of adults who exited with increased non-employment cash income		9	
Percentage of adults who increased non-employment cash income		14%	

Metric 4.6 – Change in total income for adult system leavers

	Previous FY	Current FY	Difference
Universe: Number of adults who exited (system leavers)		65	
Number of adults who exited with increased total income		13	
Percentage of adults who increased total income		20%	

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.		1292	
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.		187	
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)		1105	

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

	Previous FY	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.		1537	
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.		272	
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.)		1265	

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 2016.

Performance Measurement Module (Sys PM)

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

	Previous FY	Current FY	Difference
Universe: Persons who exit Street Outreach		107	
Of persons above, those who exited to temporary & some institutional destinations		29	
Of the persons above, those who exited to permanent housing destinations		57	
% Successful exits		80%	

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

	Previous FY	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited		1224	
Of the persons above, those who exited to permanent housing destinations		537	
% Successful exits		44%	

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

	Previous FY	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH		541	
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations		476	
% Successful exits/retention		88%	

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Become a Board Member and Give Back

Central Minnesota Housing Partnership is currently searching for individuals to serve on our board of directors. As a non-profit housing organization, we are looking for people with an interest and passion in addressing the affordable housing needs of central Minnesota. Low to moderate income individuals and minority populations are encouraged to apply. For more information please contact Deanna Hemmesch, Executive Director, at deanna@cmhp.net or (320) 259-0393.



CONTINUUM OF CARE

Primary goal of alleviating homelessness.



RENTAL PROPERTIES

View our locations & properties and apply today!

CMHP was created with the goals of preserving, improving and increasing the affordable housing stock in Central Minnesota.



HOME STRETCH

Register for a Home Stretch workshop today!



REHAB PROGRAMS

View our programs and see what is currently available!

[READ MORE](#)

[CMHP of Facebook!](#)

Home Stretch 1/2 Price

Aug
26
2016



**September
Home Stretch
Workshops**

**St Cloud ~ Thursday, September 15th
and
Baxter ~ Tuesday, September 27th**

Written by CMHP

[Print](#) [Email](#)



Central Minnesota ...

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Central Minnesota Housing Partnership

2 September at 08:28

A big thank you to [WACOSA](#) for hosting our Home Stretch workshop on Thursday, September 15th! 1/2 price registration--Only \$15! Sign up today!



Home Stretch Workshops are moving locations! If you are ready to move to your own home, but want to know more about the process, this workshop is for you! Visit us at www.cmhp.net for all the details.

Commercial Window Tinting Houston By: Skylight

Jul 12 2016

2016 HUD Continuum of Care (CoC) Program NOFA Released

2016 HUD Continuum of Care (CoC) Program NOFA Released

The Central MN Continuum of Care (CoC) is pleased to announce that a joint application will be submitted to the U.S. Department of Housing and Urban Development (HUD) for funding under the Continuum of Care McKinney-Vento Homeless Assistance Grant Program.

Please read the intent to apply and FY2016 NOFA Overview.

[2016 HUD Continuum of Care Notice](#)

[NOFA Timeline 2016 Overview -Corrected](#)

[NOFA Intent to apply and Threshold Assessment](#)

[Central Minnesota CoC Rating and Ranking Process 2016](#)

[2016 HUD NOFA Draft Consolidated application](#)

[Scoring Sheet 2016](#)

[Final Scoring 2016](#)

The Scoring, Rating and Ranking Committee meets on August 25, 2016.

If you have any questions or comments about the application, or are interested in applying, please contact AG Huot, Central MN CoC Coordinator at 320-258-0674 or ag@cmhp.net

Written by CMHP

[Print](#) [Email](#)

Jun 29 2016

Job Opportunities at CMHP

Now Hiring!

We are currently hiring for the following positions:

Click each position to view a full job description and learn how to apply.

- [Property Director \(Full-Time\)](#)
- [Coordinated Entry System Coordinator \(Full-Time\)](#)

Written by CMHP

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About CMHP

Our Mission: We are committed to assisting underserved communities to preserve, improve and increase affordable housing for low and moderate income families and individuals.

[READ MORE](#)

Who's Online

We have 6 guests and no members online

Contact Details

Direct: 1 (320) 259-0393

Fax: 1 (320) 259-9590

St. Cloud, MN 56303 • MN TDD 711



AG Huot <ag@cmhp.net>

HUD 2016 NOFA uploaded on CMHP

1 message

AG Huot <ag@cmhp.net>

Fri, Sep 9, 2016 at 11:32 AM

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Hello everyone,

the draft of the 2016 HUD NOFA application has been uploaded to the CMHP CoC website for you to take a look at and make comments. Let me know if you have any questions and/or concerns. I am also attaching a copy. thanks for all your hard work

AG

AG Huot

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 **2016 HUD NOFA Draft Consolidated application.pdf**
6183K



AG Huot <ag@cmhp.net>

NOFA

1 message

AG Huot <ag@cmhp.net>
To: Sally Battig <Sbattig@cmhp.net>

Thu, Sep 8, 2016 at 2:54 PM

Sally
Please attache both the HUD CoC 2016 NOFA Consolodated Grant and the Priority listing on the CMHP CoC website
thanks
AG

AG Huot**Program Manager/COC Coordinator*****Heading Home Central Coordinator***

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2 attachments **Final scoring 2016.xls**
48K **Central MN CoC 505 Consolidated grant draft9.8.16.pdf**
6180K