

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-504 - Northeast Minnesota CoC

1A-2. Collaborative Applicant Name: Arrowhead Economic Opportunity Agency

1A-3. CoC Designation: CA

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

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	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	No	Yes
Law Enforcement	Yes	No	No
Local Jail(s)	Yes	No	No
Hospital(s)	Yes	No	No
EMT/Crisis Response Team(s)	Yes	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	Yes
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	Yes	Yes	Yes
Non-CoC Funded Victim Service Providers	Yes	Yes	Yes
Street Outreach Team(s)	Not Applicable	No	Not Applicable
Youth advocates	Not Applicable	No	Not Applicable
Agencies that serve survivors of human trafficking	Yes	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	No	No
Tribal Representatives	Yes		

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

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.

CoC Committee members who represent County Homeless Coalitions provide info on CoC activities and invite Coalitions to attend CoC Gov. Board. The CoC Coordinator maintains a broad email list (nonprofits, volunteers, foundation representatives, public sector employees, and religious groups) and invites participation in the PIT, trainings, meetings, and funding process. The Coordinator emails and posts about resources, activities, and meetings on the CoC website (neminnnesotacontinuumofcare.org). Minnesota Assistance Council for Veterans (MACV), a Gov. Board voting member, shares info on SSVF and the CoC-funded RRH program with all Homeless Coalitions. They guide the CoC to end vet homelessness and are a liaison with the VA and county/tribal vet service offices. AEOA provides services to homeless youth in 2 counties, educates the Koochiching and Itasca Homeless Coalitions about needs/resources for homeless youth, and guides the Gov. Board in policies and priorities to end youth homelessness.

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.
Lakes and Pines Community Action	No	Yes	Yes
Arrowhead Economic Opportunity Agency	No	Yes	Yes

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.
North Shore Horizons	Yes	Yes
Aitkin Advocates Against Domestic Abuse	Yes	Yes
Advocates for Family Peace	Yes	No
Windows	No	No
Fond du Lac Human Services	Yes	Yes

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)

Throughout the year, the NE CoC Coordinator provides info about the CoC process, involvement opportunities, and the annual funding process through CoC email lists, CoC meeting notices, participation at county-level homeless coalitions, and at meetings of similar groups. Interested applicants are asked to contact the Coordinator and/or attend the next Gov. Board meeting. For the FY2016 funding process the Coordinator sent an email on July 11 to representatives from a wide variety of organizations that provide services or housing to homeless people, youth, domestic violence victims, or veterans. The email contained info about funds available for new and renewal projects, the application process, and HUD and the CoC's priorities. They were invited to attend the next CoC Gov. Board meeting or to contact the Coordinator for additional information. In 2016, the NE CoC developed a website (neminnnesotacontinuumofcare.org). The solicitation of new and renewal applications was posted on July 11.

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

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	No
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?	2
How many ESG recipients did the CoC participate with to make ESG funding decisions?	2
How many ESG recipients did the CoC consult with in the development of ESG performance standards and evaluation process for ESG funded activities?	2

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)

As stated in the St. Louis County, MN 2015-2019 Consolidated Plan, "Priorities of the NE MN CoC are shared with the advisory committees for the HOME program. The NE CoC includes the four additional counties in the HOME Consortium Cook, Itasca, Koochiching, and Lake." The NE CoC Coordinator provided the HIC and PIT as part of Plan development. St. Louis County staff consulted with NE CoC Governing Body organizations (KOOTASCA, AEOA, and Itasca HRA) on needs/priorities in Plan development. As stated in the State of MN Action Plan, "The DHS hosts a monthly meeting of all CoC Coordinators. Also attending are staff from state administered homelessness programs as well as HUD CPD staff. Issues such as accessing HUD funding, allocation of ESG resources, development of common entry tools, performance measurement and HMIS are discussed at these meetings." The NE CoC Coordinator attends these monthly meetings with the State Consolidated Plan jurisdiction.

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)

The State's competitive RFP process for ESG funds includes the opportunity for CoC representative(s) to evaluate applications for funding, including a request for members to review, score and rank proposals and make funding recommendations. The State ESG recipients meets with each CoC to discuss the review and feedback of ESG proposals in their CoC. All reviewers sign Conflict of Interest disclosures. DHS-OEO takes into consideration the CoC ranking and specific CoC feedback about DHS applicant performance and collaboration.

ESG sub-recipients' performance standards were developed with CoC representatives and reflect the basic purpose of ESG: a)keep people safely sheltered, b)re-house persons who are homeless, and c)ensure persons are stably housed at program exit. ESG sub-recipient goal/performance reports are sent to each CoC Coordinator.

Performance issues identified during State monitoring visits are addressed with assistance from CoC coordinators and committees.

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)**

Multiple agencies address the needs of DV victims in the NE Region: North Shore Horizons, Advocates Against Abuse, Fond du Lac Human Services, WINDOW Victim Services, and Advocates for Family Peace. Most receive funding the Department of Justice and/or the MN Department of Public Safety. They provide 24-hour crisis intervention, safe housing in hotels, emergency supplies, safety planning, support groups, transportation assistance, court advocacy/assistance, and support for victims of sexual assault and for child witnesses and victims. They attend CoC meetings and serve on the CoC Governing Board. They receive all CoC emails. DV victims report directly to DV agencies as part of the NE CoC's coordinated entry process. None of the agencies use HMIS. All work closely with courts and law enforcement to ensure client security. These agencies allow clients as much choice as possible regarding emergency placement, ongoing services and longterm re-housing.

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
Itasca Housing and Redevelopment Authority		No
Carlton and Cloquet Housing Authority		No
Aitkin Housing and Redevelopment Authority		No
Koochiching Housing and Redevelopment Authority.		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)**

Other projects include housing developments funded by the MN Housing Finance Agency, through bonds, grants, or tax credits. MHFA gives tax credit priority to projects to developments with at least 4 units for homeless people. There are a number of these projects in NE MN: Common Bond, Aitkin Co. (4 homeless units); Pine Ridge, Itasca Co. (4 homeless units); Grand Plaza, Itasca Co. (4 homeless units). Another source is MN's long-term homelessness (LTH) supportive service project. The project in the NE also includes rental vouchers to subsidize participant rent over 30% of income. MN LTH beds will be filled through the NE CoC CES, as the State of MN is incorporating CE as the entry

and assessment process for State-funded homeless beds. A new development that opened in 2016 is Beacon Hill in Itasca Co, which has 20 units subsidized by the Group Residential Housing Program, in addition to units subsidized with project-based Section 8 and CoC rent assistance

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 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 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)**

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)**

In 2015, CE began in Itasca & Kooch Counties. All HHs with a housing problem call 211 to be pre-screened. HHs needing prevention go to a prevention provider. HHs needing shelter are directed to shelter. HHs able to be diverted are tracked, and homeless HHs are scheduled for an assessment. The assessor completes the VI-SPDAT and sends the anonymous identifier and score to the waitlist holder who has lists for RRH, TH, and PH. When a unit is available, the highest scoring HH is first, and meetings for RRH, TH, PH, and PHA providers are held to make placements, as homeless housing units are extremely limited. HHs are anonymous to avoid a bias in placement. The model is advertised to direct all HHs no matter where they first make contact. In 2015-2016, the CoC held multiple meetings in Aitkin Co. and Carlton Co. prior to CES implementation in these counties. Entry points will be different in these counties, but the process/tools will be the same.

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CDBG/HOME/Entitlement Jurisdiction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 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 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 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
School Administrators/Homeless Liaisons	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street Outreach Team(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Homeless or Formerly Homeless Persons	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
United Way 211	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CoC Funded Permanent Housing Programs	<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"/>
CoC-funded Youth Homeless Organization	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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?	12
How many of the renewal project applications are first time renewals for which the first operating year has not expired yet?	0
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?	12
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 checked="" 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 Ranking & Review Committee reviewed PIT counts and MN Homeless Survey data to determine local priorities. Because the survey identified an increase in homeless families with children and homeless youth, the Committee changed scoring criteria to give additional points to projects serving these populations. Because the CoC's 3 TH projects serve homeless families & youth, these priority points increased the rank of TH projects. The scoring tool gives additional points for projects that target and house chronically homeless people, as these individuals are the most vulnerable. Scoring for employment income is based on a lower percentage for PH than it is for TH/RRH, as more CH participants are unable to work due to the disability. RRH & TH participants are expected to be employed. PSH, TH and RRH projects participate in CES which assesses and prioritizes chronic homeless households and severity of needs and vulnerabilities when making referrals to PSH, TH, and RRH

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)

In 2016, the NE CoC developed a website (neminnnesotacontinuumofcare.org). The website is accessible by the public and includes the solicitation of new and renewal applications. Information regarding the review, ranking, and selection criteria was posted to the website on July 11, 2016. An email notification regarding the website posting was shared with representatives from a wide variety of organizations that provide services or housing to homeless people, youth, domestic violence victims, or veterans on July 11, 2016. Additional items posted include: 1) Updated Project Scoring Tool; 2) Preliminary Scoring of Projects; 3) NE CoC NOFA Timeline; 4) NE MN CoC 2015 Funding Awards; 5) CoC Consolidated Application; and 6) NOFA Competition Page.

1F-4. On what date did the CoC and Collaborative Applicant publicly post all parts 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). 09/07/2016

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.) No

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.)

1F-6. In the Annual Renewal Demand (ARD) 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)

The Governing Board reviews APRs monthly for participant eligibility, bed utilization, exit destination, length of time homeless, change in employment and overall income. The Coordinator maintains a spreadsheet to record APR project performance, and develops for the Planning & Evaluation Committee & the Board an annual report showing benchmarks and outcomes between projects and between types of projects (TH, RRH, PH). Review/Ranking Committee reviews the APR spreadsheet and System Performance Measures to monitor agency and CoC progress in meeting HUD performance goals. APR Performance Measures (Increase in Income, Increase in Earned Income, Length of time in PH, TH and RRH exits to PH) are used as a scoring criteria for ranking. The CoC requires submission of HUD monitoring reports. Bed Utilization and E-Locs funding drawdown frequency are scoring criteria for ranking. E-Locs reports are reviewed to determine if CoC funds are unspent. Unspent funds are a risk factor for re-allocation

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

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. Attached MOU, Page 3

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 ServicePoint

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

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

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	\$19,999
ESG	\$15,572
CDBG	\$0
HOME	\$0
HOPWA	\$0
Federal - HUD - Total Amount	\$35,571

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	\$14,258
State and Local - Total Amount	\$14,258

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	\$82,538
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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): 05/02/2016

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	27	2	15	60.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	52	17	35	100.00%
Rapid Re-Housing (RRH) beds	0	0	0	
Permanent Supportive Housing (PSH) beds	210	22	180	95.74%
Other Permanent Housing (OPH) beds	0	0	0	

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)

We made an error when entering data in the HIC. Servants of Shelter, which is a shelter program located in Koochiching County, has 2 beds, not 10 beds. The data for this program actually is entered into HMIS. When this error is corrected for the 2017 HIC, the HMIS bed coverage rate for Emergency Shelter will be over 85%. In previous years, it has always been 100%. We will work with ICA, the NE CoC's HMIS lead agency, to ensure that HMIS data for Servants of Shelter is included in the NE CoC's "tree" for reporting beds on the HIC.

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 type="checkbox"/>
VASH:	<input type="checkbox"/>
Faith-Based projects/Rescue mission:	<input type="checkbox"/>
Youth focused projects:	<input type="checkbox"/>
Voucher beds (non-permanent housing):	<input type="checkbox"/>
HOPWA projects:	<input type="checkbox"/>
Not Applicable:	<input checked="" 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	1%	0%
3.2 Social Security Number	2%	6%
3.3 Date of birth	6%	0%
3.4 Race	6%	0%
3.5 Ethnicity	6%	0%
3.6 Gender	6%	0%
3.7 Veteran status	0%	0%
3.8 Disabling condition	0%	0%
3.9 Residence prior to project entry	0%	0%
3.10 Project Entry Date	0%	0%
3.11 Project Exit Date	0%	0%
3.12 Destination	0%	0%
3.15 Relationship to Head of Household	15%	0%
3.16 Client Location	2%	0%
3.17 Length of time on street, in an emergency shelter, or safe haven	11%	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 type="checkbox"/>
Annual Homeless Assessment Report (AHAR) table shells:	<input checked="" type="checkbox"/>
System Performance Measures, PIT Sheltered Count, HIC Bed Count	<input checked="" 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?

Quarterly

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)

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)** 05/02/2016

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 type="checkbox"/>
Interview of sheltered persons:	<input 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)

For the small number of DV projects not in HMIS, the MN Office of Economic Opportunity (OEO) and the CoC updated a list of agencies to survey. The CoC provided directions, timelines and contacts to participating ES and TH agencies.

After OEO conducted the sheltered survey, the CoC Coordinator reviewed the results for accuracy and followed up unresponsive agencies to get 100% response. The rest of the Sheltered PIT data was pulled from HMIS, after providers were given instructions and opportunities to fix data quality problems. A final draft of the shelter count was reviewed by the CoC committee and individual providers before becoming "final" and being submitted in HDX.

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)

No changes were made.

2F-5. Did your CoC change its provider coverage in the 2016 sheltered count? No

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

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 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)

No changes were made.

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): 05/02/2016

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

PIT Unsheltered Count coordinators in each of the six counties in the NE Region are identified. These individuals, with support from the CoC Coordinator and State of MN support team, do outreach to law enforcement, shelters, food shelves, hospitals, laundromats, churches, and congregate meal sites to notify them of the count and to ask for locations where homeless people are known to sleep. The coordinators also work with local homeless coalitions to recruit volunteers to do the count. On the day of the count, volunteers go to all known locations to conduct the count. Community agencies that serve people on the day after the count night also ask people they serve where they slept the night before. If they were unsheltered, the PIT form is completed. The survey asked for birth date and first name/last initial to avoid double counting. The NE Region is 150 mi.x100 mi. This methodology was chosen as it has the best chance of counting homeless people in this sparsely populated geography.

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)

No changes were made.

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)

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 checked="" 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)

No changes were made.

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	68	77	9
Emergency Shelter Total	9	17	8
Safe Haven Total	0	0	0
Transitional Housing Total	36	43	7
Total Sheltered Count	45	60	15
Total Unsheltered Count	23	17	-6

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	280
Emergency Shelter Total	184
Safe Haven Total	0
Transitional Housing Total	107

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)

For the period Oct. 1, 2014–Sept. 30, 2015, the number of people entering the NE CoC homeless system for the first time was 318. The Family Homelessness Prevention and Assistance Program prevents homelessness in the NE and statewide. Often participants are assisted in one day, preventing even a single day of homelessness. The FHPAP program uses a targetting tool to identify and prioritize those households, who, without assistance, are most likely to become homeless. The NE CoC’s Coordinated Entry system utilizes homeless diversion whenever possible and refers individuals at risk of homelessness to the FHPAP prevention program or other resources. CoC-funded youth providers focus on life skills to help ensure that youth do not return to homelessness after leaving TH for homeless youth.

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)

For the period Oct.1, 2014-Sept.30, 2015, the median length of time homeless for persons in ES was 16 days. The median length of time homeless for persons in ES and TH was 35 days. Steps the NE CoC has taken to reduce the length of time individuals and families remain homeless are:1) Expanded Rapid Re-housing resources so that the NE CoC can serve 20 HHS per year;2) Adopted Housing First practices in PSH so individuals can move quickly and efficiently from shelter to permanent supportive housing;3) Began to implement Coordinated Entry to more rapidly and efficiently assess the needs and barriers of people who are homeless and get them to the most appropriate housing option;4)Continue to expand PH for long term homeless persons in the region;5) Provided assistance with housing search in shelter;6)Assessed each person leaving GRACE House Shelter with VI- SPDAT to get them quickly to the most appropriate housing resource.

*** 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	115
Of the persons in the Universe above, how many of those exited to permanent destinations?	98
% Successful Exits	85.22%

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	106
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?	98
% Successful Retentions/Exits	92.45%

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)

For the period October 1, 2014 - September 30, 2015, the percentage of people returning to homelessness within 2 years of leaving ES was 0%. The percentage of returners from TH was 8.33%. The percentage of returners from PH was 1.18%. Overall, the NE region had a return to homelessness rate (within 2 years) of 2.96%. Strategies used to reduce returns to homelessness are: 1) Excellent case management and housing search assistance so that 100% of TH participants move on to PH; 2) Focus on income growth through employment and connection to mainstream resources, especially in TH so that participants can afford rental housing when they leave; 3) Ensure, through CES, that people with higher levels of barriers and more episodes of homelessness are offered housing in PH, while people more likely to be able to leave homelessness are offered TH or RRH.

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)

Currently, 36% of adult CoC leavers have increased income from employment,

47% have increased overall income. 97% of all CoC participants have at least one non-cash income source. The successful strategies the CoC has taken and will continue to take include: 1) Use a benefits eligibility tool such as Bridge to Benefits. 2) Take advantage of SOAR training and SOAR advocates to increase the number of disabled homeless persons who receive SSDI. 3) Use a common assessment form to determine each homeless person's source of income, to identify potential sources, and to connect homeless individuals to sources of non-cash income such as County Veteran Service Officers and County Human Service financial workers. 4) Assist clients to gather documentation and identification to apply for benefits. 5) Attend trainings about Work Incentives and collaborate with individuals whose job it is to help people understand and use various SSI and SSDI work incentives, such as Community Work Incentive Coordinators.

**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 primary mainstream employment organization with whom the CoC is working to grow income is the MFIP Diversionary Work Program. The Minnesota Family Investment Program is Minnesota's TANF Program. The Diversionary Work Program (DWP) is a four-month program that helps Minnesota parents find jobs. The goal is to help parents quickly find work so that they do not need to go on MFIP. When families first apply for cash assistance, most will be enrolled in this program. The NE CoC Homeless providers direct all homeless parents to apply for employment, and if they cannot get employment, to apply for MFIP. The DWP is often a first step for homeless families applying for MFIP. While no information is available on the number of CoC project participants that participate in DWP, we estimate that about one-third of homeless hhs participate in the DWP at one point in their lives.

**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)**

The NE Continuum of Care did not exclude specific geographic areas from the CoC's unsheltered PIT Count.

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)**

The NE Continuum of Care did not exclude specific geographic areas from the CoC's unsheltered PIT Count.

**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)** 08/02/2016

**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)**

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	18	2	-16
Sheltered Count of chronically homeless persons	0	1	1
Unsheltered Count of chronically homeless persons	18	1	-17

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)

The overall number of chronically homeless persons counted in the PIT decreased from 18 to 2 between the 2015 PIT and the 2016 PIT. The number of chronically unsheltered persons counted in the PIT decreased from 18 to 1. Although the NE CoC did not add dedicated chronic units between the 2015 PIT and the 2016 PIT, we did increase the number of units prioritized for chronically homeless persons. In addition, the NE CoC implemented a Coordinated Entry System and adopted the order of priority that gave highest priority in homeless units to persons with the highest vulnerabilities and the longest histories of homelessness.

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 homelessness persons identified on the HIC.	54	51	-3

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)

The number of dedicated CoC funded PSH beds dedicated for use by chronically homeless persons identified on the HIC decreased by 5. This is because we mistakenly counted some prioritized beds in 2015 as dedicated. In 2016 we only counted those beds that were dedicated by grant agreement with HUD. Thirty-five of the 2016 non-CoC funded "beds" are actually a voucher program through Minnesota's Long Term Homelessness Support Services Fund. Each year, for HIC reporting, the organization that manages the LTH Program in the NE CoC reports on the numbers of participants that meet HUD's definition of chronic homelessness, as this project does not have dedicated CH "beds". So, each year there is fluctuation in the HIC as to the number of CH "beds" in the LTH projects managed by Hearth Connection. In 2015, these projects housed 33 chronically homeless adults; in 2016, they housed 35. Overall, these two factors account for the decline of 3 CH beds from 2015 to 2016

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. pages 1-4

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)

Yes, the NE MN COC is on track to meet the goal of ending chronic homelessness by 2017. We only counted two chronically homeless people in the 2016 PIT, and providers of dedicated chronic beds in some of the NE Counties are having trouble filling vacancies with people who have experienced chronic homelessness.

Why? Utilization of VI=SPDAT vulnerability scores to fill vacant homeless units, prioritizing people experiencing chronic homelessness when filling PSH units, increasing the number of dedicated and prioritized units over the years.

In addition, Minnesota funds services and rent assistance for people who meet MN's definition of long term homeless, which is very similar to the chronic homeless definition, except that it includes couch-hopping as homeless. These units are also increasing in NE MN (though we can't count them as dedicated CH beds) and are housing people who meet the definition of chronic homelessness. Four of these units opened in Aitkin County and four in Itasca County in the last two years; more are planned for Carlton County.

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 checked="" type="checkbox"/>
Number of previous homeless episodes:	<input checked="" type="checkbox"/>
Unsheltered homelessness:	<input checked="" type="checkbox"/>
Criminal History:	<input type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder):	<input type="checkbox"/>
Head of household has mental/physical disabilities:	<input checked="" type="checkbox"/>
	<input 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)

The NE CoC developed 61 RRH beds (20 units) within the last two years by converting a TH and an SSO Project to RRH. Through Coordinated Entry, HHs that score 4-6 on the Vi-SPDAT are referred to RRH. RRH providers meet weekly to review waiting lists to identify HHs who can fill RRH slots and get them quickly into an open RRH slot and scattered site rental unit. The GRACE House Shelter conducts the Vi-SPDAT on each person who occupies one of their 10 shelter beds, so that they can get placed on the appropriate waiting list (PH, RRH, or TH) and can move quickly from shelter to housing. RRH program staff identify vacant rental units and assist participants with searching for housing. RRH housing staff identify landlords throughout the region who are willing to rent to RRH participants. RRH staff work to move participating to housing as quickly as possible.

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:	14	20	6

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 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
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Universe: Total PIT Count of sheltered and unsheltered homeless households with children:	11	9	-2
Sheltered Count of homeless households with children:	7	8	1
Unsheltered Count of homeless households with children:	4	1	-3

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 NE CoC decreased the number of homeless households with children.

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 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 type="checkbox"/>
Cross systems strategies to quickly identify and prevent occurrences of youth trafficking:	<input 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, 2015)	Difference
Total number of unaccompanied youth served in HMIS contributing programs who were in an unsheltered situation prior to entry:	1	6	5

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)

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):	\$94,879.00	\$94,879.00	\$0.00
CoC Program funding for youth homelessness dedicated projects:	\$19,879.00	\$19,879.00	\$0.00

Non-CoC funding for youth homelessness dedicated projects (e.g. RHY or other Federal, State and Local funding):	\$75,000.00	\$75,000.00	\$0.00
-----------------------------------------------------------------------------------------------------------------	-------------	-------------	--------

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:	2
LEA or SEA meetings or planning events (e.g. those about child welfare, juvenile justice or out of school time) attended by CoC representatives:	1
CoC meetings or planning events attended by youth housing and service providers (e.g. RHY providers):	12

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)

The MN Department of Education Homeless Coordinator has been active at state-wide meeting with CoC Coordinators. The MDE Homeless liaison contact list is shared with COC Coordinators. The MDE also disseminates the homeless identification data on MARSS reporting in the school for the COC and MHFA to share with their teams. The NE CoC Coordinator met with NE LEA Homeless liaisons at an all-day McKinney Vento Liaison State Training sponsored by the Minnesota Office to Prevent and End Homelessness. At the training, Liaisons learned about MN Homelessness Programs and how they can access resources and make sure all students experiencing homelessness are aware of their education rights. The NE CoC Coordinator followed up with Liaisons from the NE region by providing information about the NE CoC and resources available for homeless youth.

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)

The NE CoC requires all CoC funded projects that serve families and parenting youth to adopt and comply with a CoC-wide policy on Educational and Early Childhood Development, including all shelter, transitional housing, rapid rehousing, and permanent supportive housing. Programs are expected to comply with the following policies:

- 1) Identify staff who have primary responsibility for school attendance.
- 2) Ensure that all homeless families are informed of the McKinney Vento Act to ensure that their children are able to maintain enrollment in school.
- 3) Advocate for families with their school district to ensure that transportation is

- arranged (as needed).
- 4) Track school attendance for all children served within your program and help families to resolve any barriers that are contributing to the absences.
 - 5) Assist families in developing education related goals for all family members when completing Housing Goal Plans.
 - 6) Ensure that all family members are connected to relevant educational resources in the community
 - 7) Encourage and assist families with children ages 3-5 to apply for the Head Start Program and provide referrals to agencies that offer Head Start.
- The CoC works closely with youth serving agencies, juvenile justice programs, and schools to identify homeless youth and connect them with services.

**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)**

KOOTASCA (TH Provider, Family Homeless Prevention Provider, CoC Governing Board Representative) has a Head Start, Early Head Start and a TAPP (teen parent program) as well as a Crisis Nursery Program. KOOTASCA also has a written agreement with Invest Early.

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:	0	3	3
Sheltered count of homeless veterans:	0	3	3
Unsheltered count of homeless veterans:	0	0	0

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)

The NE CoC is at functional zero with homeless veterans in the region. Thanks to the efforts of Tribal and County Veteran Service officers, the Homeless Registries developed in Minnesota that form teams to help individual homeless veterans secure housing, a converted (from TH to RRH) and expanded RRH program in the NE CoC for homeless families that include a veteran, and an SSVF program operated by MACV.... the NE CoC counted no unsheltered veterans in 2016. Occasionally, there are veterans who need emergency shelter... and in 2016, 3 veterans were staying in Emergency Shelter or participating in TH on the night of the count.

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:	34	3	-91.18%
Unsheltered Count of homeless veterans:	30	0	-100.00%

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)

Northeast Minnesota presently has few Veterans experiencing homelessness. Strong coordination of resources and linking Veterans from their initial point of contact to Veteran-specific resources (including VA-funded resources like SSVF) have been helpful strategies. In addition, Minnesota Assistance Council

for Veterans operates a very successful RRH program for homeless households that includes a homeless veteran, and the NE CoC has been able to expand this program to service more participants in more counties. MACV also offers a SSVF program in the NE, and AICHO operates much-needed PSH for homeless veterans on the Fond du Lac Reservation.

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):	11
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).	11
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)

Minnesota is a Medicaid expansion state. In response to the ACA and under the leadership of NE CoC Governing Body member, Arrowhead Economic Opportunity Agency (AEOA), 3 community action organizations-Lakes and Pines Community Action, KOOTASCA, and AEOA-formed a shared vision and were awarded funds through MnSure to help residents of the 6 NE CoC Counties navigate the new health coverage opportunities available through the ACA and to provide 1:1 help with enrollment. As CoC-funded organizations, these organizations ensure that all homeless individuals are screened for health

insurance coverage and are connected with Medicaid. In addition, since health insurance enrollment is an automatic part of each county's benefit screening, for most people it happens when they go to the county for any assistance.

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):	12
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:	9
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":	75%

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):	12
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:	9
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:	75%

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:	<div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">X</div>
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Use of phone or internet-based services like 211:	<input checked="" type="checkbox"/>
Marketing in languages commonly spoken in the community:	<input type="checkbox"/>
Making physical and virtual locations accessible to those with disabilities:	<input 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:	14	20	6

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)

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)

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)

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. No

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

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	Communication to ...	09/13/2016
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	Public Posting of...	09/13/2016
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	NE CoC 504 Letter...	09/14/2016
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	Public Posting of...	09/13/2016
05. CoCs Process for Reallocating	Yes	NE MN CoC Realloc...	09/14/2016
06. CoC's Governance Charter	Yes	NE MN CoC Govern...	09/08/2016
07. HMIS Policy and Procedures Manual	Yes	MN HMIS Policies ...	09/14/2016
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No	Con Plan Serving ...	09/13/2016
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Administrativ...	09/11/2016
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	08.05.16 HMIS MOU...	09/14/2016
11. CoC Written Standards for Order of Priority	No	Order of Priority	09/11/2016
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	HDX Systems Perfo...	09/09/2016
14. Other	No	MOU Collabortive ...	09/14/2016
15. Other	No		