

CoC Plan for MN-508
Serving Persons Experiencing Homelessness with Severe Service Needs

The West Central MN Continuum of Care (also known as CoC, WC-CoC, or MN-508) is the HUD designated planning area for the 10 contiguous counties of Becker, Clay, Douglas, Grant, Otter Tail, Pope, Stevens, Traverse, Wilkin, and Wadena, as well as a portion of the White Earth Tribe (WET) land. Clay County, including the City of Moorhead (population 44,505), has the largest homeless population in our region and is part of what is known as the FM area (a metropolitan area with combined population of 253,136 in the cities of Fargo and West Fargo in ND and Moorhead and Dilworth in MN). Homelessness, including unsheltered homelessness, has grown significantly in the past months, as have the severity of mental health and substance abuse crises among the population. These severe service needs, combined with an unprecedented number of evictions and non-renewal of leases following the end of the rental moratorium and CERA rental assistance, have reversed our progress towards ending homelessness. While unsheltered homelessness in our region seems insignificant compared to the large encampments in New York City, Seattle, San Jose, San Francisco or even Hennepin County, MN, our region has seen a **59% rise in unsheltered homelessness the past six months** (76 unduplicated unsheltered persons were reported in HMIS for the time period ending 9/30/22 compared to 48 for the time period ending 3/31/22. Note the previous six-month period only had an increase of 4 persons). A July report of services outside of HMIS showed that an added 6 unsheltered persons received motel vouchers and 141 unduplicated youth and 30 unduplicated veterans received outreach services. Our recent Point-in-Time Counts (ten unsheltered persons counted in 2022, zero in 2021 and 2020) does not accurately reflect this system need and usage, partially due to the dangerously cold date of our three recent PIT nights, but mostly due to the recent drastic increase in homelessness.

The WC-CoC developed this plan in response to the HUD Special *Rural* and *Unsheltered* funding competition. This plan (Special) covers the entire CoC geography and strategically aligns with our current CoC System Performance (SPM) Plan, Plan to End Youth Homelessness (Youth), and Advancing Equity (AE or Equity) Plan. Beginning in early August, stakeholders, including persons with lived experience (LE) of homelessness, reviewed current CoC goals and data and were asked to identify specific strategies (either building upon current work or identifying new items) that would assure our region had comprehensive outreach and access to low-barrier shelter and permanent housing. The CoC hosted a regional survey for all stakeholders, hosted listening sessions at two Lived Experience (LE) Advisory groups, a CoC membership meeting, and all three of our sub-regional homeless committees, and held one-on-one interviews with groups (e.g., a local LGBTQIA+ service organization) or individuals (i.e., POC with lived experience of homelessness).

Combined CoC Goals for 2022-2023:

1. Enhance System Access to rapidly rehousing and stabilize households.
2. Improve the quality and consistency of practices for all homeless programs.
3. Expand formalized service coordination.
4. Increase engagement of persons with LE in system planning and service provision.
5. Improve use of data to inform system planning.
6. Expand support and education focused on increasing participants income.

7. Seek new affordable housing, including 110 units of supportive housing.
8. Increase safe emergency shelter options in rural areas.
9. Expand system outreach.

1. Leveraging Housing Resources

1a. Development of New Units-Leveraging Housing: N/A

1b. Development of New Units-PHA Commitment: *See attached letters of commitment.*

Please note that one of our rural applicants in this competition, the *CAPLP Wilkin Rural Set Aside Project*, was not able to pair their project with Stability Vouchers despite their desire to do so because Wilkin County does not have a Housing Choice Voucher (HCV) program. It is the only county in Minnesota that lacks a HCV program. Hence, it is impossible to apply for Stability Vouchers in this service area, making these resources more critical.

1c. Landlord Recruitment

1. **Current Strategy** The current strategies include: 1) Education-Assure all homeless staff are equipped with CoC engagement strategies, education, and tools; 2) Landlord Incentives-The CoC utilizes Risk Mitigation and double rents (limited to specific programs at this time) for persons with rental, credit, or legal barriers; 3) Housing Navigation-These services assist our highest needs households (currently targeted at chronic homeless only) with housing search, applications, advocacy, and stability once housed, including landlord engagement; 4) Housing Specialists-Have staff dedicated to recruit landlords and assist with housing search (currently limited to persons with a disability); 5) Landlord engagement-Programs engage on a one-on-one basis, which is supported through CoC training and policies. Broad engagement also occurs through committees and forums. The FM Homeless Coalition hosts a *Successful Outcomes for Tenants and Landlords Committee* (SOFTL) monthly meetings and quarterly brown bags to increase education and partnerships. Participants include PHAs, homeless providers, city staff, property owners and managers. Prior to COVID our other two homeless committees hosted annual landlord forums and intend to resume these in 2023; 6) Advocacy-MN Legal Services educates agencies, landlords, and clients on tenants' rights and responsibilities, participating in the SOFTL committee; 7) Trial leases-Trial leases are used with the goal of progressively lengthening to an annual lease agreement.

- a. **Effectiveness of strategy in identifying units** Prior to COVID these strategies resulted in strong landlord relationships and success at identifying and securing units across our region. Increased tenant issues and confusion about the rental moratorium, staff shortages and turnover, a temporary break from regular home visits, and delays in getting promised emergency rental assistance to landlords (months initially) caused a significant decline in landlord relationships. Additionally, our region has a significant affordable housing shortage (both single and multi-family) and an influx of out-of-state large rental companies purchasing properties. One in particular has refused to accept vouchers from PHAs or homeless programs and is terminating leases upon renewal for long standing clients with vouchers. Risk Mitigation, guaranteed insurance plus case management, has still proven effective to mitigate denials, but there currently is not adequate resources to implement as broadly as needed (i.e., not enough

funding in the pool or dedicated staff who are required to meet in clients' homes at least monthly and communicate with landlords).

b. Effectiveness of strategy in identify units in areas where the CoC has not previously be able to identify As stated above, these strategies were proven successful across the region prior to COVID and were equally successful in all CoC geography. It is also worth noting that the largest challenge is on the WET and in Becker and Clay Counties due to the shortage of available and affordable units. (e.g., In Clay County the multi-family vacancy rate is 3.9%, whereas a natural vacancy rate is 5%, with a majority of new unit developments affordable only to single renters making over \$35,000). Three proposed developments with new homeless dedicated units for our rural counties were not successful in the past two rounds of the MN Housing Multi-family tax credit RFP. These small projects are not as cost effective, and therefore not as competitive or attractive to developers or funders as some larger metro projects, limiting the development of much needed new housing stock.

2. **New practices in the past 3 years** In addition to continuing to enhance and expand upon the existing strategies listed above, the CoC strategies include: 1) adding online training and technical support on master leasing and trial leases; 2) adding two Housing Specialists; 3) developing a LE academy to train persons with LE who can, through paid and volunteer roles, assist clients with searching for and securing units; 4) expanding use of MN's HousingLink affordable housing search website to the entire region; and 5) update the CoC training site to an academy style format, expanding education to include property managers and owners and expanding education to case managers on search and landlord engagement with related tools.
3. **How data will be used in recruitment** Data points the CoC will use to identify if our strategies are effective include a shortened length of time between voucher offer and move-in and a decrease in the number of open and expired vouchers (vouchers that are not used due to unsuccessful search).

2. Leveraging Healthcare Resources See attached letters of commitment
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3. Strategy to Identify, Shelter, and House Individuals and Families Experiencing Unsheltered Homelessness

3a. Current Street Outreach (SO) Strategy

1. **Outreach coordination** Outreach is integrated into our homeless response system and includes coordination with mainstream and community partners. Outreach staff conduct coordinated entry (CARES) access and housing prioritization assessments (used to prioritize for homeless prevention, shelter, and housing programs (i.e., TH, RRH, PSH, and OPH)) and participate in CARES case consults and local homeless coalition and CoC meetings. Staff coordinate outreach with libraires, detox, homeless health, on-site meal programs, and law enforcement, which helps to reach people more rapidly and to prevent criminalization of unsheltered homelessness. Staff conduct scheduled outreach to known outdoor locations and locations identified by others (i.e., persons with LE, churches, law enforcement, city staff, community member reports, and other service providers). When health or safety is of concern, staff connect individuals with mobile mental health, detox, victim service providers, safe harbor,

hospitals, or law enforcement. Currently, only two-thirds of outreach staff enter into HMIS. The veterans and youth outreach staff enter data outside of HMIS as our youth outreach provider is victim service provider (VSP) and the VA enters only assessments for the purpose of CARES prioritization. In June, the Fargo-Moorhead (FM) Coalition formed an Outreach Coalition for outreach providers in the Cass County of ND and Clay County of MN to better coordinate outreach and track households who move across the state and CoC border and are in more than one data system (ND HMIS, MN HMIS, DVIMS, CARES alternative data base for youth and victims, and VA).

- 2. Outreach times** In Clay County, scheduled SO is conducted 2-3 times a week, with in-reach and follow-up on alternating days. Times vary throughout the week and include early morning to late night. While SO is not scheduled on weekends staff can adjust their schedules to provide outreach if needed (e.g., other outreach times are not yielding contact at known camps). In rural areas, outreach is provided in response to notifications and at targeted times throughout the workweek, with frequency dependent on program location. When not physically conducting outreach, staff communicate with other community partners and persons with LE to assist with locating and follow-up communication with unsheltered individuals. Currently, there is not enough funding to staff outreach at the desired level, including to all identified locations at the times and frequency needed.
- 3. Help people exit homelessness** Staff provide both basic need and solution-based outreach. All staff utilize the CARES access and housing assessments to help identify, prioritize, and link to community, mainstream, and homeless resources (i.e., shelter, prevention, and housing). Staff attend CARES case consults to help facilitate rapid processing of offer and enrollment when their clients are prioritized. From March 2020-January 2022, the CoC incorporated a waiver to assure Category 1 Homeless were prioritized rapidly for housing programs. SO staff will assist with completing housing applications and with housing search as requested or needed. Outreach staff screen and link to MN Medicaid funded housing and supports (HSS and HS), both through CARES and independent of CARES (i.e., HSS and HS providers can be homeless targeted or general). CARES tools incorporate client choice, housing match questions, and problem-solving techniques. The CARES Access tool incorporates a circle of support tools to help clients identify personal strengths and natural resources to resolve their homelessness outside of shelter or supportive housing. Staff are required to train on mainstream resources, landlord engagement, and core principals like trauma informed care (TIC) and Housing First (HF).
- 4. Engaging the most vulnerable and use of culturally appropriate strategies** The CoC provides and requires on-demand training on anti-discrimination, cultural awareness, HUD Equal Opportunity, and core concepts (creative engagement, harm reduction, ethics and boundaries, safety planning, client-centered care, TIC, and HF). In the past year, the CoC and the FM Coalition also held three additional equity related trainings to support agencies in understanding why and how to incorporate culturally appropriate strategies (e.g., *1-Diversity, Equity, and Inclusion*, *2-Mental Health, Trauma Informed Care and Native American Practices*, and *3-Working with Indigenous 101*). The CoC structure incorporates three sub-regional LE Advisory Boards, a LE workgroup comprised of persons of color (POC), listening sessions, and

surveys as part of CoC planning and evaluation. Program staff coordinate with other homeless and mainstream service providers to support effective linkage to housing and services based on client driven goals. In September, the Advancing Equity goals were presented to the board. POC with LE identified the goals and strategies.

- 5. Connection to PH** As stated above, CARES tools are used to assess and prioritize for homeless housing programs, MN Bridges (bridge housing for persons existing MH treatment or at risk of losing housing due to MH). MN Medicaid HSS and HS services. Staff assist with applications and enrollment and attend CARES case consults. As needed, SO staff will assist with housing search and move-in, but often do a warm handoff to housing program or housing stabilization staff for this roll.
- 6. Hire people with LE** Individual programs employ and have employed persons with LE in outreach roles but currently the CoC does not incorporate LE mentors or advocates but has started planning for the launch of a pilot Lived Experience Academy in January 2023. The intent of the Academy is to support the incorporation of more persons with LE of homelessness into paid volunteer and staff roles in the homeless response system. The Academy would serve as an alternative or supplement to a college degree (i.e., as a supplement the person may just be starting or has not completed the college degree). Two persons with LE are on the planning committee. Currently 80% of the youth street outreach team are one or more of the following: formerly homeless, LGBTQIA+, or BIPOC.

3b. Current strategy to provide immediate access to low-barrier shelter and temporary housing for people experiencing unsheltered homelessness

- 1. Current strategy** The CoCs current strategies include: 1) utilize the CARES access tool, which incorporates homeless prioritization questions, to assure the most vulnerable are rapidly prioritized for shelter; 2) support policy compliance through membership agreements (e.g., signed by agencies-requires low-barrier entry and prohibits denying access for or imposing preconditions for arbitrary reasons like sobriety, service participation, treatment, or criminal record except in the situation where safety is of immediate concern (like sex offenders being prohibited in family shelters)) and project evaluations (e.g., the CoC reviews ESG and CoC project policies for compliance with policies and provides technical assistance to assist projects if deficiencies are noted the Performance Evaluation (PE) Committee); and 3) provide training, both required and optional, to shelter and bridge housing staff on core topics like Equal Access, VAWA, TIC, anti-discrimination, and HF. In response to the Advancing Equity feedback and 2022 CoC and ESG policy review, the PE Committee identified a need to enhance how HF, VAWHA, and Equal Access policies are integrated into program polices and protocols. As a first step, the CoC created a refresher training to provide additional guidance that all ESG and CoC funded agencies were required to complete by October 14, 2022.
- 2. Performance of strategy** All ESG and CoC programs have updated policies to comply with CoC requirements which require low-barrier access. The CoC did not assess the domestic violence shelter policies but have not heard any concerns from CARES staff or community partners regarding access. Initially tasked in the last quarter of '22 but delayed due this NOFO, the PE Committee will be assessing all homeless programs, regardless of funding source, in 2023. The low-barrier entry requirements resulted in an increased need for staff training and lower staffing

patterns due to the increase mental health, behavior, and substance abuse related needs. The CoCs FY'21 Equity Analysis found that there was racial disparity in shelter access. Persons of color made up 49% of those experiencing homelessness, and 50% of those in transitional housing, but only 37% of those accessing emergency shelter. The CoC attributes a portion of this to a rise in homelessness in Becker County (18 households in 2020, 67 households served in 2021, and 59 Jan-Aug 2022 and 10 in September alone). Becker County has limited shelter beds so often refers to the FM area for shelter, but shelter space is often at or over capacity so cannot accept referrals. On average, at least 1/3 of the unsheltered population in Becker County are Native American. It is not low barrier for households to leave their community to access a safe place to stay.

3. **New practices implemented in the past 3 years** The CoC promoted the National Alliance to End Homelessness HF series on low barrier sheltering in 2018, resulting in shelter programs over the past 4 years progressively updating policies and entry requirements. The region's largest shelter was the first to change policies to allow persons who have utilized drugs or alcohol to enter and stay at the shelter as long as they were not consuming at the shelter or being disruptive to other guests or staff. As stated above, the PE Committee's enhanced review of policies and subsequent integration of policies into protocols was planned for September but will be implemented in 2023. The CoC also updated the annual refresher training listed above to strengthen understanding and integration of required policies. The CoCs stronger engagement of persons with lived experience through listening sessions, focus groups, surveys, and seats on local homeless and CoC committees (including PE) have provided new insight into gaps in training and compliance monitoring.

3c. Current strategy to provide immediate access to low barrier PH for people experiencing unsheltered homelessness

1. **Current strategy** The CoCs current strategies are to utilize CARES tools, training, CoC policies, and program evaluation to support low barrier access. 1) Tools- CARES tools prioritize those with the highest need, incorporate client choice questions, and include a comprehensive assessment of mainstream and community service needs (clients identify and prioritize needs, and staff assist in linking to identified services). CoC policies require low barrier access. CoC training provides an overview of the definition, requirement, and basics on how to implement. 2) Training- The CoC online training site has both required and optional trainings the focus on low barrier access. 3) Policies & Evaluation- All housing programs must follow CoC policies that require Housing First and prohibit discrimination. CARES policies also prohibit housing programs from rejecting referrals unless there is a conflict of interest or immediate safety is a concern (e.g., someone cannot be denied entry based on past evictions from the program or other housing, criminal activity, or high barriers). The PE committee evaluates programs on incorporation of policies, tools, and training. 4) Advocacy- Agencies report concerns with discrimination to legal services who works with all parties to clarify laws and advocate for fair access.
 - a. **Use of HF approach to implement the strategy** Programs are trained on and required to incorporate HF policies and principals (low barrier access, client choice, individualized supports, harm reduction, and linkage to community) into their program. The PE Committee reviews policies. Every three years, housing

and shelter programs must also take a HF self-assessment, with a plan to improve areas identified in the assessment. Housing staff are required to take the online HF Principals to Practice series.

- b. How the strategy is connected to PH resources “leveraging housing resources”** While the CoC leverages non-HUD funded housing resources for other programs (adding 51 units in 2022), none were requested as part of this NOFO. The CoC coordinated with three PHAs to request Stability Vouchers, two of which are paired with three program requests in this competition. Pairing the Stability Vouchers with the requested projects to provide support services allowed the CoC to expand the number of applications in this competition.
- 2. Strategy performance in providing low-barrier, culturally appropriate access to PH** All ESG and CoC programs have updated policies to comply with CoC requirements. As stated previously, the PE Committee identified a need and will be working to assure that policies are more detailed and integrated into program practices (forms, training, and evaluation). The committee identified one program that was superficially compliant and did not fully understand the requirements so worked with the program to update policies and assure staff were fully trained. The CoCs FY’21 equity analysis found that persons of color were under-represented on the priority list and in permanent housing compared to how many experienced homelessness. Whites were overrepresented at 58% of the CARES priority list and 59% of those in permanent housing compared to just 48% of those experiencing homelessness and 49% in shelter.
- 3. Evidence supporting use of strategy** HF is a proven, positive impact model for addressing homelessness that prioritizes low barrier access to permanent housing. (evidenceonhomelessness.com). In 2013, after the WC-CoC first implemented HF principals in CARES, the annual unsheltered PIT count went from 36 persons to 11 persons, remaining under 10 each year except for 2016 when a shelter in a neighboring CoC incorporated pay-to-stay policies shortly prior to the count. We also saw a decrease in chronic homelessness because programs were no longer able to deny households who were ‘challenging’ or non-responsive to program engagement. Instead, these persons were prioritized for housing. Sam Tsemberis, the founder of the HF principal has been invited to our region twice to speak and provide technical support on implementing HF.
- 4. New practices implemented in the past 3 years** In 2019, the CoC began equity planning and further assessing inequities with system access for BI-POC. In 2021, the CoC Board approved an Advancing Equity structure, centered around input from persons of color with lived experience of homelessness. This work helped identify how racial biases, real and perceived, were impacting engagement with service providers and how impacts of societal discrimination was not weighted heavily enough in our assessment tool at the time. In March 2022, the CoC replaced the VI-SPDAT with a locally developed assessment tool designed with broad input from various stakeholder groups, including persons with LE and underserved groups. In August, the PE Committee identified a need for an enhanced review of polices that includes a subsequent integration of policies into protocols, implementing for CoC projects in September, but expanded to all projects over the next year. The CoC also updated the annual refresher training identified above. The CoCs stronger

engagement of persons with lived experience through listening sessions, focus groups, surveys, and seats on local homeless and CoC committees has provided insight into gaps in training and compliance monitoring.

4. Updating the CoC Strategy to Identify Shelter and House Individuals Experiencing Unsheltered Homelessness with Data and Performance

1. For Street Outreach (SO)

- a. **How data, performance, and best practices will be utilized to improve the performance of and expand SO in the CoC** The CoC has found that some staff (across all program types), particularly those recently hired, are not fully comprehending the concepts or policies in our existing online training site so by July of 2023 the CoC will update our online training structure to an academy format. Core trainings from HF to coordinated entry will be individualized for each specific role in our system (i.e., program manager, case manager, assessor, etc.) and each program type (i.e., shelter, permanent housing, prevention, etc.). For SO, this would mean outreach workers would be trained on how to use system and program policies, core principals, data, and system tools in their specific role. DATA: the CoC has been working on aligning MN HMIS with ND HMIS and one Podio (a data base our CoC utilizes for system access-shelter and prevention prioritization). Alignment will allow us to better track (location, length of time homeless, updated eligibility, etc.) and support unsheltered persons who often move across the Fargo-Moorhead border or move between their reservation and other cities in our CoC. Multi-data systems are needed until HMIS can support the real-time data needs of SO and the CARES access tool, a function that is available in Podio. Youth and VA outreach staff, who currently enter data outside of HMIS, are able to safely enter into Podio, assuring the CoC has complete data for system planning and that household data is centrally located to assist with better service delivery. The PE Committee has historically only reviewed ESG and CoC funded projects, but in FY2023, will be expanding to projects funded through other sources including some mental health and veterans focused street outreach that we have not previously assessed. Lastly, the CoC will work with the FM Coalition to conduct a LE academy and recruit agencies to hire graduates who can take on paid support service roles in the system.
- b. **SO activities connected to CES and HMIS** Currently all SO staff are trained Access and Assessment providers in CARES. The CoC plans to provide enhanced CARES training as part of the academy (e.g., moving from a single Motivational Interviewing (MI) course to MI in Access, MI in Assessment, MI in Housing Stabilization, etc.). While the CoC desires to be compliant with HMIS data requirements and include all providers in our system, we will continue to utilize Podio and require duplicate data entry on UDEs. We must prioritize our client needs and assure we have comprehensive system data available for analysis on a regular basis. The CoC has requested that ICA, our HMIS System Administrator submit a grant request to support alignment of data.
- c. **How new partners (business owners, law enforcement and healthcare workers) will be incorporated into SO strategies** While our SO staff already have good relationships with law enforcement, hospitals, detox, faith partners,

city staff, and local businesses, we recognize that due to the complexity of needs we are currently seeing we need to improve how we work with community partners. The strategies include: 1) Expand formalized relationships. Additional formal agreements will allow for more transparent practices to assure persons are not criminalized for their homelessness, receive support as rapidly as possible, have support after hours on in times of crises (health/mental health, severe weather, violence/threats of violence), and support clear communication. Formal agreements may be with the CoC, local homeless committees, or a specific program, which may be appropriate in rural areas where services are different from the rest of the region. 2) Develop community awareness packets. Persons with LE particularly wanted community members and leaders to see data on homelessness and hear stories of why people become homeless to increase sensitivity and awareness. Awareness materials will also be developed to help expand partnerships and resources and assure system transparency. To support better system access, the FM Coalition's SO card will be shared in an editable format for other regional committee use and a system access postcard for CARES auxiliary/referral partners will be updated and distributed.

2. For low-barrier shelter (LBS) and temporary accommodation

- a. How data, performance, and best practices will be used to improve access to LBS** The academy structure described above will be used for staff at all levels (e.g., for shelter managers this may include how to supervise staff to support CoC policies like HF, Equal Access, and VAWA). LE feedback clearly indicated that training for front office staff, overnight staff, and volunteers was a priority, particularly on TIC, HF, and cultural sensitivity. The PE Committee will monitor all shelters in 2023. DATA: The CoC has struggled with how to effectively monitor shelter performance, especially in rural areas. SPM data points of length of time homeless, exits to permanent destinations, and returns will be primary data points monitored, but the CoC will be working with a consultant to develop better criteria and performance thresholds that account for the variances that affect exit destination and length of time homeless in rural areas whose shelter model is motel vouchers, small master leases, and winter church sheltering.
- b. How data, performance, and best practices will be used to expand LBS** The goal is to create local shelter solutions. Strategies to do this are to support creative solutions and seek additional funding resources. Since building a large shelter is not appropriate for rural areas, the CoC will develop an educational packet on creative shelter solutions that have been effectively used in other communities, like master leasing single units or off-season resort space, and developing host homes. Effectiveness will be measured by new shelter beds created.
- c. Any new practices and activities that will be funded through an award under this competition.** All rural SSO and RRH projects included capacity funding to help support the development of and participation in the new academy training site. Three of the rural projects have requested activities that expand new low-barrier shelter, two which also include enhanced access support for strong linkage to personal, mainstream, and community resources. The two HMIS projects will help assure we have a data solution that fits the unique needs of our cross-border system and help develop reports that better track outcomes for shelter programs.

One of the shelter projects is located in Becker County where we have seen the largest increase in unsheltered rural homelessness. The office location is in a church that is centrally located in the county's largest city, Detroit Lakes. The location is increasingly being frequented by persons who are homeless as a place to rest (they allow people to nap during the day on an as needed basis) and get connected to other services (medical, legal, shelter, social services, prevention, etc.), similar to a drop-in site. Another rural project is requesting SSO funding for a Housing Advocate with a unique combo role that helps address multiple needs in county with a small homeless population. The dual role will help individuals identify safe shelter options using existing motel voucher funding.

3. For permanent housing (PH)

a. How data, performance, and best practices will be utilized to improve the CoCs ability to rapidly house, in PH, persons with histories of unsheltered homelessness

The academy structure described above will be used for staff at all levels and all for program types (e.g., housing stabilization trainings (i.e., conducting assessments, home visits, safety planning, stopping evictions, etc.) will be updated to incorporate HF, TIC, and equity lens). Training will also be expanded to include training for PH desk staff, property managers, and maintenance staff. Managers will learn how to use data to evaluate program and staff effectiveness. The PE committee will work with programs to assure CoC policies are fully incorporated into program policies, practices, training, and forms. The PE committee will review performance outcomes for PH projects quarterly. The CoC will work with the FM Coalition to conduct a lived experience academy and recruit agencies to hire graduates to take on support service mentor and advocate roles for PH programs. The CoC will help identify resources to expand funds for double deposits and risk mitigation pools. The CoC will provide materials to promote trial leases for projects to utilize.

b. How data, performance, and best practices will be utilized to expand the CoCs ability to rapidly house, in permanent housing, individuals and families with histories of unsheltered homelessness

The CoC identified the need to create 110 new units of supportive housing (40 short-term, 70 medium to long-term, 10 permanent) through the following strategies: 1) seek more housing vouchers through state and federal funding opportunities; 2) create an educational packet on creative housing and sheltering solutions to help communities more easily introduce and replicate these concepts locally. For PH, the packet (promotional information, education on model, examples and how to guides) would include ideas on developing shared housing and master leasing (including partnering with developers for one or more units in a larger development outside of the MN Tax Credit Application); and 3) Advocate for more MN Tax Credit funding in greater MN including recruiting developers and advocating for the state to adjustment to the MN Tax Credit program for rural applications to assure there is support and scoring adjustment to accommodate for the limited developer pool and project size (making it more costly per unit than larger metro projects).

5. Identify and Prioritize Households Experiencing or with Histories of Unsheltered Homelessness.

1. **CoC strategy for ensuring that resources provided under this NOFO will reduce unsheltered homelessness** All projects requested in this competition will assist with reducing unsheltered homelessness. The three requested housing projects, paired with Stability Vouchers will help more people move rapidly into permanent housing. The projects requesting shelter funds will help individuals get into safe temporary shelter. The outreach, CARES, and navigation staff will support linkage to needed shelter, housing, and services. The Access staff will also assist with identifying natural solutions. The CoC staff will work with the projects to be integrated into CARES and support compliance with CARES, HUD, HMIS, and CoC policies. The CoC PE committee will evaluate the projects funded under this NOFO, monitoring program policies, utilization rates, data quality, and performance outcomes. Performance metrics used will include, but not be limited to, length of time homeless, the number of homeless (assessing the total number homeless and first time homeless who are unsheltered), CoC APR (counting the total number of homeless served by SO and those coming from unsheltered homelessness), exits from SO, and returns to homelessness from SO. The PE Committee will work with a consultant to establish further metrics if needed. The local homeless committees/coalitions will provide an added level of support, planning and evaluation.
2. **How the CoC will adopt**
 - a. **Program eligibility that reduces unsheltered homelessness** The CoC does not anticipate a change in program eligibility or CARES prioritization as a result of this NOFO but is currently in the process of developing action steps for our Advancing Equity plan and as a result may identify changes to help create a more equitable system.
 - b. **CARES processes that reduce unsheltered homelessness** To improve system access and transparency the CoC intends to add Access Navigators to support a comprehensive Access assessment and problem -solving, strengths-based process. The CoC also intends to add outreach/access cards and LE staff at system entry to help support a more friendly, transparent system entry. The Advancing Equity plan emphasized that adding POC who had LE of homelessness would also mitigate the real and perceived biases that stop people from engaging in the system. Improved training will assure people are served by staff who know the system policies, tools and best practices and should reduce discrimination and unconscious biases.
3. **How the CoC will use SO to connect those living in unsheltered situations with housing resources** It is the CoC goal to provide comprehensive outreach at varied times and in key locations to assure persons who are not engaging in other community services are reached. SO staff will also strengthen partnerships with community partners to help better identify, follow-up, and find solutions that lead to stable housing. Staff will conduct CARES assessments and participate in case consults, providing referrals identified using the assessment tools.
4. **Additional steps your CoC is taking to ensure that people who are unsheltered or have histories of homelessness can access housing and other resources in the community including:**
 - a. **Increase access to identification** Funding for IDs is provided by local partners (Salvation Army and CAPs), but LE input identified delays and challenges with navigating the system. The CoC will work with local coalitions/committees to identify creative solutions to expedite access and ease the process of obtaining IDs (e.g., a funding pool, receipt process, established days each week/month where homeless

persons can obtain IDs, establishing a single point of contact at the city or counties who can be trained on trauma informed care).

- b. Provide housing navigation** The CoC strategy is to: 1) add two housing navigators; 2) assess clients need for assistance with navigation on the CARES assessments; 3) increase training for homeless program staff on housing search and engagement strategies; 4) expand [HousingLink](#) online search; and 5) increase engagement with property owners and managers through landlord forums and the SOFTL committee.
- c. Provide access to healthcare and other supportive services** The CoC strategy is to increase formalized agreements (at the CoC, local coalition, and project level) with health and mainstream service partners. The CoC will provide templates and ideas to members and host forums at future CoC meetings to initiate the concept. The CoC currently has agreements with schools, the MN Dept. of education, two workforce centers, and four PHAs. This NOFO resulted in additional partner agreements with one healthcare partner for chemical dependency assessment, outpatient treatment, street outreach engagement, care coordination, Naloxone and Narcan training and access, and support groups.

6. Involving Individuals with Lived Experience of homelessness in decision-making meaningful outreach

- 1. Meaningful outreach efforts to engage those with lived homelessness experience (LE) to develop a working group** The CoC Governance Charter defines the roles and responsibilities of our three subregional local homeless committees for integrating persons with LE into their planning processes. These include hosting lived experience advisory boards at least quarterly, obtaining program input on program and system outcomes and goals, nominating at least one LE representative to their advisory board, promoting the bi-annual CoC client satisfaction and needs assessment, and integrating input from persons with LE into program policies and design. One homeless committee also has an active Youth Advisory Board. Two of the three homeless committees currently have persons with LE as chairs. The CoC Coordinator has attended six of the LE advisory committee meetings in the past year. The CoC has two persons with recent LE on the CoC board, one in the designed LE representative seat and one who fills an appointed seat. Both board members are also members of CoC committees, including this year's NOFO Ranking Committee. One of the members serves on the planning committee for the LE Academy. In the fall of 2021, the CoC created an Advancing Equity workgroup and hosted focus groups to develop goals that make our system more equitable. All participants were BIPOC with lived experience of homelessness. The CoC also hosted three surveys for CoC members and stakeholders on system goal development in 2022, all of which were intentionally marketed to and open to persons with LE. They were centered around system performance measures, our plan to end youth homelessness, and the special unsheltered and rural plan. Specific to lived experience input for this funding opportunity, the CoC hosted three listening sessions, held two 1:1 interviews, and received twelve survey responses.
- 2. How individuals and families experiencing homelessness, particularly those who have experienced unsheltered homelessness, are meaningfully and intentionally integrated into CoC decision making structure** Besides the process and methods

listed above, two examples include: 1) the Advancing Equity (AE) workgroup and focus group input was used to develop the AE plan (the only other input that was considered was from a small provider group of only persons of color); and 2) all input from the regional LE boards were integrated into the development of our new CARES assessment tool. Local programs have reported updated program policies or practices in response to feedback for our bi-annual consumer survey. This plan was shared with those who provided input and endorsed by a representative of the LE advisory board.

- 3. How your CoC encourages projects to involve individuals and families with lived experience of unsheltered homelessness in the delivery system of services** In June of 2021, the CoC hosted a forum at our full membership meeting, with a speakers (two who were LE mentors) present on LE engagement to increase mental health and substance abuse support. The guest speakers and LE members shared the value of having someone who had personal experience support them. The session included identifying ways to incorporate peer support into their programs. Subsequently the CoC began seeking a model to train peer mentors. The youth and advancing equity listening sessions expanded the roles for peer staff. One of our LE board members joined a regional peer network and became involved in planning. We ultimately decided to develop a LE Academy in partnership with the FM Homeless Coalition Education Committee. The academy is set to be live in January 2023. Planning for the academy has included interviewing agencies on qualifications/training needed and resources available.

6a. LE Letter of Support *See attached Lived Experience Support Letter*

7. Supporting Underserved Communities Equitable Community Development

- 1. Current strategy to identify populations in the CoC that have not been served by the homeless system at the same rate they are experiencing homelessness**

The CoC actively strives to solicit engagement from a broad array of stakeholders, including those from underserved communities, through membership, survey invitations, solicitation of input on tools and policies, one-on-one meetings, invitations to meetings, and email check-ins. The WET is a longstanding member of the CoC and has a designated voting and advisory seat on the CoC board. The CoC has identified a need for Native-run services in Becker and Clay Counties. The CoC encouraged the WET to apply for the YHDP, CoC, and this NOFO, but the MN Tribal Collaborative chose not to apply for any HUD funds at this time. The CoC will continue to work with the WET to identify other funding sources. As part of the CoCs equity and ending youth homelessness planning, staff reached out to organizations in the community who serve persons who identify as BIPOC or LGBTQIA+ to invite participation in the CoC and the CoCs Advancing Equity and Youth Advisory committees. As a result, the CoC added a LGBTQIA+ advocacy and service agency in 2022. The CoC has three disability advocacy organizations as members, two of which were added as a result of targeted outreach to integrate state and Medicaid funded disability housing and support services funding into our homeless response system. In 2018, True Colors staff presented the CoC and worked with agencies to assess for and identify inclusive practices for LGBTQ+ youth. The CoC completes an annual assessment of ESG and CoC funded projects

to assure they have non-discriminatory policies, incorporate HUDs Equal Access rule, have marketing materials to reach disabled and underserved populations, provide basic accessibility services like translation and interpretation, and are accessible to persons with a physical disability or provide reasonable accommodations for participation in programs.

2. How underserved communities in your CoC's geographic area interact with the homeless system, including a description of those populations

In addition to assuring our system policies, training, and project evaluation includes anti-discrimination and inclusion policies and practices, the CoC strategically seeks input from all persons including those who are disproportionately or underserved in the system. The CoC conducts a bi-annual assessment which is open to all current and previous clients served in the past year asking participants to evaluate services or identify unmet needs or new services that would improve our system. The CoCs Advancing Equity workgroup, listening sessions, focus groups, and one-on-one interviews engaged persons of color with LE in identifying solutions to reduce disparities. Our system planning for our annual CoC plan, Special NOFO, and ending youth homelessness included input from persons with LE, with at least half being persons of color and over 25% being persons with a disability. For the youth planning, five youth identified as LGBTQIA+. Our CoC board has representation from BIPOC, LGBTQIA+, and persons with a disability. DATA: The CoCs past three years of equity analyses found that POC are disproportionately represented in the homeless response system and in some CoC programs. POC only represent 5% of our regional population but represent 52% of those experiencing homelessness.

Comparatively, POC are underrepresented on the CARES priority list (42%) and in permanent housing (41%). Native Americans were the only racial group that had a higher rate of non-permanent exits (19%) from all programs compared to permanent exits (14%), and had the highest rate of return for permanent housing (16%). Of those served in all programs from January through July 2022, 11% are Hispanic (no change from 2020 or 2021), 52% are POC (a 1% increase from 2021, but 2% decrease from 2020), 42% have a disability (a 1% increase from 2020 and no change from 2021), 16% are chronic homeless (a decline of 2% from 2021 and 4% decline from 2020), and 1% have a gender that is neither male or female (no change from 2021 and up from 2020). Our FY'20 equity analysis found that POC, especially Native Americans had the most incomplete data on the priority list and most housing offers without fulfillment. We also found that many POC on the priority list did not have the high vulnerabilities our CARES housing assessment tool at the time (VI-SPDAT) measured for. After further analysis, we determined that it was a combination of the tool and the design of our intervention types that caused the disparity. We also found that POC were not chronic homeless at the same rate as Whites due to disability status, but still were experiencing longer and multiple episodes of homelessness at a similar or higher rate (depending on household type). We heard through Advancing Equity feedback that societal discrimination not only caused barriers when seeking and maintaining housing, but led to hesitancy in engaging with services due to actual and perceived discrimination. Finally, data showed that the lack of shelter in

some of rural areas disproportionately affects persons of color (over 1/3 of those in Becker County were Native American).

3. **Your CoC's current strategy to provide outreach, engagement, and housing interventions to serve populations experiencing homelessness that have not previously been served by the homeless system at the same rate they are experiencing homelessness.** Most of the CoCs strategies were developed based on input gained from POC with LE of homelessness as part of the CoCs Advancing Equity Planning. It was noted in most of the sessions (i.e., focus groups, workgroups, and listening sessions) that the strategies while focused on POC, are beneficial to the entire homeless population, especially those with disabilities and those who identify as LGBTQIA+. The strategies include: 1) Update the housing assessment tool to make it more culturally appropriate. The tool was launched in March 2022 and is being analyzed quarterly to see if the outcomes are having the intended impact; 2) Provide enhanced equity-related education. The strategy was incorporated into the CoCs strategy of updating our online learning platform to an academy format. The strategy includes integrating equity/cultural awareness into other trainings, as well as enhancing our standalone equity series (e.g., we met with technical assistance providers from Canada and spoke with the WET about an Indigenizing Housing First training). Another action plan under this strategy is to provide targeted education and data to community leaders and members to increase awareness and engagement; 3) Increase transparency of and orientation to the system. This goal aligns with the strategy of adding LE staff roles at system access, including assuring the roles proportionally reflect the population. This goal also includes expanding outreach cards to all areas of our region; 4) Increasing affordable housing options. Seek additional vouchers, host homes, master leases, shared housing, and kinship care, and permanent housing options not limited to those who are chronic homeless; and 5) Integrate LE roles into the homeless response system from system access to stabilization roles (including employment advocates). The strategy aligns with the LE Academy, with emphasis on being able to have agencies willing to hire persons once they graduate and ongoing support for the graduates once employed; 6) Increase safe emergency shelter options in rural areas so persons do not need to leave their communities if they become homeless; 7) Implement the new CARES access tool to better triage and connect more people to natural and community resources to resolve their crisis. The goal includes the need for new data solutions that support real-time and complete data to better serve clients, analyze project outcomes and utilize for system planning. To support rapid resolution for needs identified by the tool, the strategy includes developing a pool of resources that outreach and access staff can rapidly and easily access, ideally shortening their time homeless and supporting permanent solutions. Resources identified include: phones, identification, indemnification funds, postage, items that support employment, transportation assistance, and technology and 8) Expanded coordinated outreach will help reduce the length of time people are homeless but through regular and comprehensive outreach hours, with follow-up and coordination to support successful housing and support service linkage.