

1A. Continuum of Care (CoC) Identification

Instructions:

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

1A-1. CoC Name and Number: MN-508 - Moorhead/West Central Minnesota CoC

1A-2. Collaborative Applicant Name: Housing & Redevelopment Authority of Clay County

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

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

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	No
Local Jail(s)	No	No
Hospital(s)	Yes	No
EMT/Crisis Response Team(s)	Yes	No
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Not Applicable	No
Non-CoC Funded Youth Homeless Organizations	Yes	Yes
Youth Advocates	Yes	Yes
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Not Applicable	No
Non-CoC Funded Victim Service Providers	Yes	Yes
Domestic Violence Advocates	Yes	Yes
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	Yes
LGBT Service Organizations	Not Applicable	No
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	Yes
Homeless or Formerly Homeless Persons	Yes	Yes
Other:(limit 50 characters)		

Legal Services of NW MN	Yes	Yes
VA, Co. Veterans Services, MN Veterans Council	Yes	Yes
State Funders	Yes	Yes

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

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

Strategies include: 1) public member invites & email meeting notices; 2) representation at partner meetings, w/ CoC updates and requested input on key planning items (SPMs, PIT, HIC & CoC Plan, Priorities); 3) CoC website w/ member/partner input on content; 4) focus groups at 3 sub-regional homeless prevention & assistance (FHPAP) committees on SPMs in '16-17; 5) online surveys on targeted subjects (HMIS, SPMs, Youth plan); 6) Funder/partner presentations to update and inform membership; 7) SPM analysis & discussion w/ committees, membership & stakeholders; 8) 1:1 meetings w/ less active stakeholders to engage/seek feedback on funding, HRAs, CES; 9) promote local, state & federal funding opportunities; 10) partner w/ other MN CoCs to assure our CES is friendly to those who move between regions; 11) public solicitation, mtg. discussion, and approval for HUD CoC competition; and 12) monthly meetings at state level w/ MN CoCs, state agencies & associations/systems (CES, HMIS, etc.)

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

The CoC invites new membership and encourages continued membership on an ongoing basis through the following: 1) membership information/form on CoC website; 2) encouraging referrals from member partners; 3) 1:1 meetings with desired stakeholders who are not engaged or actively engaged; 4) annual membership drive in December; and 5) CoC representatives on agenda at other state, regional and local meetings. The CoC designates a board position for a person with lived experience, supporting participation with mentorship, a meeting stipend, and mileage reimbursement. Our current representative has been on the board for 2 years. Membership is also open to other homeless or formerly homeless persons, and member partners are invite/mentor other participants. Feedback from persons with lived experience is also sought through focus groups at homeless programs (i.e. focus groups were held to gain feedback on CES).

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

**proposals.
(limit 1000 characters)**

The CoC openly invites interest from current & new organizations on an ongoing basis. The CoC Coordinator follows up w/ all inquiries. Prior to the competition, Intent to Apply/Threshold forms are solicited AND 3-days post NOFA release, a public announcement of the competition w/ details is sent (policies, calendar, highlights, available funding, NOFA links), both via the CoC website and email blasts (CoC and partner). This year's notice was public on 7/18. Three new projects submitted PDF Intent to Apply forms, with two of those submitting PDF applications by the deadline. New and renewal applications were discussed publicly at the 8-10-17 CoC meeting. Renewal and new applicants submitted their applications by 8/24 and the objective CoC approved Score Card, with the Rank Committee verifying and reviewing and proposing rank on 8/30, and rank recommendations presented to the membership for review and vote on 9/11.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Not Applicable
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	Yes
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	
Prevention Programs funded by faith community.	Yes
Local Coalitions and Mental Health Collaboratives	Yes

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

MOORHEAD: The Coordinator meets quarterly w/ Community Development staff, sharing CoC information (SPMs, HMIS/PIT data) and needs. Staff attend CoC meetings. STATE: A CoC adhoc committee reviews and ranks projects

competing in the State ESG RFP. The Coordinator presents feedback and PIT/HIC data to ESG staff. Regional trends, gaps, & barriers are provided via public hearings, written comments, and directly to State staff at meetings (CoC, ESG, monthly MN Heading Home Alliance Meetings (a collaboration of state agencies, associations and MN CoCs). The CoC established Written Standards in '14, and updated in '16 with ESG recipient input. The CoC annually reviews ESG sub-recipient performance, providing feedback to the state on under-performing projects. The CoC held meetings with State and project staff when an under-performing project was considered for reallocation.

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

At CES access, safety is assessed & referrals are made to Rape & Abuse or law enforcement when safety is a concern. The CoC has one DV shelter and one safe home provider, but also utilizes a shelter on a bordering CoC. CES, prioritizes fleeing domestic violence or sexual exploitation, after other criteria are equal. Agencies also collaborate w/ the regional Safe Harbor program. The CoC incorporates, and is updating w/ HUD TA & MN Coalition for Battered Women input, CES polices and training including; safety, data security, access, and trauma informed care. All updates will be complete by January '18. Training is available on the online CoC training site, including understanding the unique circumstances of survivors (safety, access to money/transportation, trauma). The CoC maintains a CES priority list outside of HMIS to assure safety and VAWA compliance, and incorporates client choice questions (location, housing type, model) to support survivor's safety and ability to regain control.

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

(1) In June, Safe Harbor provided a training on identifying and serving persons who are trafficked. The CoC provides online training on: trauma informed care, trafficking, CES (safety/access, VAWA compliance, prioritization), HMIS (privacy, security). HUD TA was just approved to update policies and enhance trainings including assuring safety and access for victims.
(2) The CoC looks at HMIS data (PIT) annually and MN Wilder Survey tri-annually. The '17 PIT found that 24% of persons reported domestic violence, consistent w/ past counts. The '17 PIT incorporated a MN Battered Women's Coalition Survey. MN data found that 28.8% of persons were homeless due to violence/abuse/stalking, 12.9% attempted to flee but no shelter was available, causing 58% to stay w/ abusers, 5.7% to stay in a vehicle and 35.9% to stay with family/friends.

(3) See question IC-3 for CES process and client choice.

1C-4. Using the chart provided, for each of the Public Housing Agency's (PHA) in the CoC's geographic area: (1) identify the percentage of new admissions to the Public Housing or Housing Choice Voucher (HCV) Programs in the PHA's that were homeless at the time of admission; and (2) indicate whether the PHA has a homeless admission preference in its Public Housing and/or HCV program.

Attachment Required: If the CoC selected, "Yes-Public Housing", "Yes-HCV" or "Yes-Both", attach an excerpt from the PHA(s) written policies or a letter from the PHA(s) that addresses homeless preference.

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Clay County HRA	31.00%	Yes-HCV
Moorhead Public Housing Authority	10.00%	No
HRA of Fergus Falls	0.00%	No
Douglas County HRA	3.00%	No
HRA of Detroit Lakes	18.00%	No

If you select "Yes--Public Housing," "Yes--HCV," or "Yes--Both" for "PHA has general or limited homeless preference," you must attach documentation of the preference from the PHA in order to receive credit.

1C-4a. For each PHA where there is not a homeless admission preference in their written policies, identify the steps the CoC has taken to encourage the PHA to adopt such a policy. (limit 1000 characters)

The CoC contacted the 4 Public Housing Authorities without preferences to encourage/support them in doing so, meeting 1:1 with two of PHAs, both of which will work with the CoC to establish by 7/1/18. The two other declined noting short waiting lists. Two who currently do not have preferences operate MN Bridges Supportive Housing programs for persons with a severe mental health disability and have moved towards CES participation (Douglas Co. HRA is in the process and MPH started on 7/1/17). The CoC also distributed 'Achieving Housing Stability Together', to guide PHA's in working with CoCs and homeless programs. The guide was developed in a collaboration between MN NAHRO and the MN Office to Prevent & End Homelessness (OPEH), with CoC input to support PHAs in working with persons who are homeless at risk to improve access and stability.

1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity,

including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy. (limit 1000 characters)

The CoC recognizes that persons who are LGBT are more likely to experience housing discrimination and that LGBT youth are more likely to become homeless, so the CoC expects projects to follow the Equal Access Rule, attesting to compliance and viewing the HUD Equal Access webinar and CoC training, both of which are available on the CoC online training site. ESG and CoC agencies all provided Certificates to verify taking the Equal Access, HUD Fair Housing and CoC trainings. The CoC does not have a specific CoC-wide anti-discrimination policy, but will vote on one at our 12/17 annual meeting. Currently, the ESG and CoC Policies have related non-discrimination policies (i.e. Family Separation and Low Barrier Policy). MN DHS, the ESG recipient, provided a low barrier shelter training for sub-recipients and the CoC promoted the NAEH summer shelter training's on Housing First/low barrier access.

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

Engaged/educated local policymakers:	<input checked="" type="checkbox"/>
Engaged/educated law enforcement:	<input checked="" type="checkbox"/>
Engaged/educated local business leaders	<input checked="" type="checkbox"/>
Implemented communitywide plans:	<input type="checkbox"/>
No strategies have been implemented	<input type="checkbox"/>
Other:(limit 50 characters)	
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

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

N/A

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

Foster Care:	<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"/>

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

Instructions

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

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

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

Used Objective Criteria for Review, Rating, Ranking and Section	Yes
Included at least one factor related to achieving positive housing outcomes	Yes
Included a specific method for evaluating projects submitted by victim service providers	No

1E-2. Severity of Needs and Vulnerabilities

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

Overall vulnerability was taken into account in project ranking, selection and review. Outcome related ranking questions were scaled by program type, since projects are filled according to vulnerability (VI-SPDAT) score from CES. The VI-SPDAT takes into account co-occurring social and medical factors (history of homelessness and housing, risks, socialization and daily function, and wellness) when determining vulnerability. Our two Rapid Rehousing applicants had higher achievement thresholds for Income Objectives (i.e. Earned income target is 10-20% for PSH and 16-25% for RRH), knowing that PSH projects have a high population of persons who are CH. The CoC also reviewed agency policies, applications, Housing First Assessment, APR data and Threshold assessments to identify if service plans and coordination met level of need for project type and were low barrier.

1E-3. Using the following checklist, select: (1) how the CoC made publicly available to potential project applicants an objective ranking and selection process that was used for all project (new and renewal) at least 2 days before the application submission deadline; and (2) all parts of the CoC Consolidated Application, the CoC Application attachments, Priority Listing that includes the reallocation forms and Project Listings that show all project applications submitted to the CoC were either accepted and ranked, or rejected and were made publicly available to project applicants, community members and key stakeholders.

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

Public Posting	
CoC or other Website	<input checked="" type="checkbox"/>
Email	<input checked="" type="checkbox"/>
Mail	<input type="checkbox"/>
Advertising in Local Newspaper(s)	<input type="checkbox"/>
Advertising on Radio or Television	<input type="checkbox"/>
Social Media (Twitter, Facebook, etc.)	<input type="checkbox"/>

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

Option 1: The CoC actively encourages new and existing providers to apply for new projects through reallocation.

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

Option 2: The CoC has cumulatively reallocated at least 20 percent of the CoC's ARD between FY 2013 and FY 2017 CoC Program Competitions.

No Attachment Required - HUD will calculate the cumulative amount based on the CoCs reallocation forms submitted with each fiscal years Priority Listing.

Reallocation: Option 1

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

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps. 09/11/2017

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

1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps. 09/11/2017

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

Reallocation Supporting Documentation

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

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No	Reallocation Supp...	09/16/2017

Attachment Details

Document Description: Reallocation Supporting Documentation - MN508

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

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

2A-1a. Provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA. 1-4

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

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

2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area. Statewide HMIS (multiple CoC)

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

in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	151	41	110	100.00%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	87	0	87	100.00%
Rapid Re-Housing (RRH) beds	26	0	26	100.00%
Permanent Supportive Housing (PSH) beds	452	0	452	100.00%
Other Permanent Housing (OPH) beds	77	0	77	100.00%

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

(limit 1000 characters)

N/A

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

2A-7. Enter the date the CoC submitted the 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX). 04/26/2017
(mm/dd/yyyy)

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

Instructions:

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

2B-1. Indicate the date of the CoC's 2017 PIT count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception. 01/26/2017

2B-2. Enter the date the CoC submitted the PIT count data in HDX. (mm/dd/yyyy) 04/26/2017

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

Instructions:

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

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

The CoC continued to conduct a complete census count using HMIS and an online survey (for DV agencies), but data quality and validity improved due to MN transitioning to ICA as SSA in June 2016. Specific changes include: 1) Significant data clean-up occurred prior and post count (thanks to the addition of a local system administrator and PIT management process); 2) a live online PIT tool for non-HMIS agencies helped CoCs see PIT results immediately (adding to the ability to clean-up data earlier and more time to assure data was complete and accurate); 3) coordination between the 10 CoCs, state, and ICA was more streamlined (messaging to projects on timeline, instructions, and training was earlier and coordinated to reduce confusion); and 4) additional reports were provided to the CoC for the ability to monitor and verify data (extrapolation tool, HIC reports, data quality, and PIT counts that were combined, project type and count type specific).

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

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

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

Beds Added:	0
Beds Removed:	0
Total:	0

2C-4. Did the CoC change its unsheltered PIT count implementation, including methodology and data quality changes from 2016 to 2017? Yes

CoCs that did not conduct an unsheltered count in 2016 or did not report unsheltered PIT count data to HUD in 2016 should compare their efforts in 2017 to their efforts in 2015.

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

Similar to the sheltered PIT, no specific methodology changes occurred, but confidence in the data quality improved with move to ICA as State System Administrator. The live online survey, coordinated messaging, added local system administrator support, and reports helped assure data was clean and complete. In partnership with a local university, the CoC also piloted using GIS for a portion of our region, with 3 University staff joining our outreach teams. We look forward to going CoC wide to provide additional geographic data to our count in 2018.

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

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

The CoC dedicated additional planning time and training to improve our youth count. Staff attended the Voice of Youth webinar and read materials on planning a youth count. The CoC partnered with two local youth programs, 1 drop-in center and 1 outreach program in a neighboring CoC to enhance outreach efforts, planning a community event in Fargo-Moorhead with free food, connection to services and giveaways. Youth providers also helped map out

outreach teams, engaging homeless youth in identifying locations. The State of MN Office to Prevent and End Homelessness sent notice to all schools notifying them of the count and providing local contacts and the CoC County Coordinators provided follow-up with liaisons, some of which were included in local planning.

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

Pre-count outreach was done for the first time this year to help better map outreach locations for the day of the count. Staff did broad sweeps of common locations and looked for signs that people may be staying in places not meant for human habitation. Only 4 sites were found, two of which were vacant on the day of survey. As in the past, posters were placed in known service locations to direct persons to fixed site locations where they can be counted. FAMILIES: On-site meals were used in coordination with the count in three communities to try and better reach families. VETERANS: For the second year, the VA provided outreach cards and was available via call or outreach (depending on site) to verify and register any homeless veteran on the day of the count. Providers conducted VI-SPDATs on person they found unsheltered. The VA also had staff participate in street outreach.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

(1)There was no change in the universe, (-100 people were in programs the previous 24 months and 100 were 1st time entries). (2)The CoC analyzed state prevention data to identify risk factors. A sub-committee drafted an updated prevention targeting tool in June, looking at other tools and studies to assure it is evidence based. Adapting has been delayed (not moving to HMIS) due to securing HUD TA for a statewide targeting tool. 3), housing barriers, and homeless history. (3)CES is the primary strategy. Diversion & Prevention tools help connect persons to mainstream & prevention resources to stabilize housing vs. enter homelessness. The CoC has been working towards a 3/1/18 target of centralized diversion, shelter access and prevention pooled funds. Mediation Services & conversion of TH to RRH were also strategies. (4)The CoC Performance Eval Committee, w/ CoC Coordinator and Chair as leads, and reporting to board.

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

(1)There was a reduction in the median LOT by 3 nights for ES/SH and -1 night including TH. The average showed no change for ES/SH and 6 nights adding TH.(2)CES is the main strategy, focusing on: rapid access, rapid data entry (live when possible), early eligibility verification (using MN Vault and HMIS to store documents), and housing navigation for the most vulnerable (CH and highest

LOT homeless and VI-SPDAT score). The indemnification fund and improved landlord engagement strategies helped house persons who have poor rental histories and felons. The CoC also actively seeks to increase affordable and supportive housing stock.(3)The CoC utilizes a prioritization policy that aligns with the HUD PH prioritization policy, but expands to TH/RRH. There is homeless history sub-assessment in CES Step 2, used on the priority list. (4)The CoC Performance Eval. Committee, with CoC Coordinator and Committee Chair as leads, then reported to the Board.

3A-3. Performance Measures: Successful Permanent Housing Placement and Retention

Describe: (1) the numerical change the CoC experienced; (2) the CoCs strategy to increase the rate of which individuals and families move to permanent housing destination or retain permanent housing; and (3) the organization or position responsible for overseeing the CoC’s strategy for retention of, or placement in permanent housing. (limit 1000 characters)

(1)SO 8% increase (37% to 45%), ES/SH/TH/PSH had -1% difference (54% to 53%), and PH had 0% difference, remaining at 91%). (2)The CoC uses CES to assure improved linkage to appropriate intervention and mainstream resources, navigators to support search and stability for those with greatest LOT. Various trainings (CoC online, at meetings, annual Coalition, DHS ITV series, DHS online, NAEH, Org Code/Sam Tsmberis local trainings, etc.) are provided or promoted supporting housing stability practices (Harm Reduction, Housing Case Management, Housing First, MI, Client Centered Care, etc.). A committee works on landlord engagement (education, brownbags, indemnification and mediation) and increased income strategies (Income now, overcoming barriers). TA is provided to under-performing projects.(3) CoC PE Committee, with Coordinator and Chair in lead, reporting to CoC board.

3A-4. Performance Measure: Returns to Homelessness.

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

(1>Returns in 6 months is 1% (6 to 4), 6-12 months 4% (2 to 12), 13-24 months 0% (4 to 0), and 2 year 6% (16). (2)Historically, a MN Housing returns report helped identify common characteristics. The CoC worked w/ our new HMIS SSA to improve access to data. In April, the moved CES into HMIS. In July, ICA begin providing quarterly returns to Homelessness reports and will a add a frequent users report in January. (3)Strategies include; increased staffing (Mahube-Otwa requested an additional \$750,000 in MN LTH supportive services); increased training (Annual training in October, online training site added in June offering a variety of housing stability trainings (Housing Case management, landlord engagement, Harm Reduction, MI, TIC, etc.) and can verify completion). TA is provided to underperforming project. (4)CoC PE Committee, with Coordinator and Chair in lead, reporting to CoC board.

3A-5. Performance Measures: Job and Income Growth

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

(1-2)An Employment Committee was created in January, resulting in a regional Employment & Homelessness Forum in March to develop these strategies: Education to businesses (PP developed & presented) & agencies (Income Now & Overcoming Barriers trainings developed & posted online);SOAR promoted; adding CES employment sub-assessment (tabled until '18); advocating for transportation barriers; and encouraging new homeless targeted employment programs (Lakes & Prairies began a welding program & Mahube-Otwa received funding to start program). Strategies and trainings promoted by the CoC.(3)Programs partner w/ Workforce Centers & utilize MN Bridges to Benefits to screen & refer. One CAP co-located offices w/ the WFC. WFCs, and VA employment staff are members of the Employment Committee and CoC. Members participated in the annual 2nd Chance Job Fair. The CoC will promote the SNAP Employ & Training RFP. (4)The Employment Committee, with Chair and CoC Coordinator as leads, reporting to Board.

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

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

N/A

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

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

Instructions

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

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	88	144	56

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

Total number of beds dedicated as Dedicated Plus	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	264
Total	264

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

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

History of or Vulnerability to Victimization	<input checked="" type="checkbox"/>
Number of previous homeless episodes	<input checked="" type="checkbox"/>

Unsheltered homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad credit or rental history (including not having been a leaseholder)	<input checked="" type="checkbox"/>
Head of Household with Mental/Physical Disability	<input checked="" type="checkbox"/>

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

(1)The CoC strategy aligns with the NAEH Family Criteria/Benchmarks including: CES (CE is used to assure easy access, divert, prevent, link, prioritize and rehouse families, as rapidly as possible. 3 Navigators were added in '16 to aid search and stabilization for CH & LTH); increase affordable housing (new state Prevention, RRH and LTH vouchers were received in '17); increase supports (expanded DHS Supportive Services funding requested, indemnification fund expanded); and training (CoC online trainings of CES and core principles known to improve housing access & stability).

(2)The CoC has the goal of achieving the USICH Benchmark before 2020. The current LOT is 36 days for ES or 78 days including TH. The CoC will continue to monitor our LOT quarterly.

(3)The CoC is following the USICH Benchmarks and monitoring through HMIS. The ES LOT has remained the same and the TH LOT increased by 6 days.

(4)The CoC Board is responsible for setting and measuring, with Coordinator support.

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	20	6	-14

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

The CoC provides training on low barrier access, Fair Housing Laws and HUD Equal Access, and has recieved certification from all CoC & ESG programs. The CoC promoted the National Alliance Emergency Shelter Learning Series

this Summer and one of our two shelters adapted policies as a result. DHS, our ESG recipient, provided low barrier training. The CoC reviewed CoC project policies and will review ESG policies in '18. The CoC will be voting on an anti-discrimination policy at our annual meeting in December. The CoC also responds to any concerns identified by other agencies or consumers.

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

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

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

History or Vulnerability to Victimization (e.g., domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
Number of Previous Homeless Episodes	<input checked="" type="checkbox"/>
Unsheltered Homelessness	<input checked="" type="checkbox"/>
Criminal History	<input checked="" type="checkbox"/>
Bad Credit or Rental History	<input checked="" type="checkbox"/>

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

(1-2)The 5 USICH Benchmark Criteria are the basis of the CoC strategy. CES is used to identify, divert, prevent, link, and prioritize and rehouse youth. The CoC successfully advocated for a bordering ND youth provider to apply for state ESG & RHYA funds, creating youth outreach. Each CAP received increases in MN RHY and Family Homeless & Prevention funds in FY17, resulting in 10 new vouchers. Training on youth engagement will be added to the CoC online training site by December and Safe Harbor Training was provided in June. Minor youth needing shelter are assisted with a voucher or referred to a shelter in a bordering CoC. Other prevention strategies include; reunification, advocacy

for enhanced/earlier county transition strategies.

(3)The '17 PIT shows a reduction of 7 youth (18-24) and 1 (under 18). The MN Wilder Study found a reduction in youth homelessness in the past 2 counts ('12 & '15). CES data has not been accurate or readily available to mark progress (due to challenges in Homelink), but is now in HMIS (4/10/17) so will provide valuable quarterly reports moving forward. CES Priority managers currently download and review progress weekly. Currently, there are 15 youth on the priority list, with none under 18.

(4)USICH Benchmarks will be the indicator of reaching our goal, CES data will support.

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

(1&2)The CoC receives a list of liaisons from the MN Dept. of Education (MDEA) annually and distributes to providers. Providers are encouraged to contact their respective liaisons to meet and engage providers in local planning. MDEA provides trainings for schools and homeless providers. School liaisons currently serve on all 3 regional Homeless Advisory Boards (FHPAP), hosted by our 3 regional Community Actions (CAPS) who also serve on the CoC board. The 3 CAPS are host to our local Head Start Programs, which have homeless preferences. Liaisons are on the CoC email list and participate in annual PIT planning. CAPs also participate in regional Childhood Initiatives and access early childhood scholarships for participants. One family shelter in the region is converting to the Baby Space model.

(3)The CoC adopted an Education Policy in 2014 that requires all ESG and CoC funded projects with school age children to link youth to a school liaison and be rapidly enrolled (within 3 days).

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

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

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

Veterans are assessed as part of our regional Coordinated Entry System (CES) and placed on the MN Veterans Registry. Veterans are immediately offered referrals to the VA, SSVF, & County Veterans Services for access to veteran specific housing, healthcare and services including; VASH, SSVF, Grant Per Diem programs. Veterans providers participate in CoC & CES planning. Veterans are assessed and placed on the CES Prioritization list regardless of discharge status. Bi-weekly Assignment meetings include dedicated the Veterans Registry/by name list. VA and MAC-V both provide street and shelter/food program outreach. The PIT and tri-annual statewide count also request Veterans and discharge status, with immediate referrals to the VA and Statewide Veterans Registry. In June, the USICH confirmed that the CoC had reached the Benchmarks for Ending Veterans Homelessness. NOTE: A majority of our VASH & Per Diem beds are administered by the Fargo HRA so can't be reported on our HIC.

3B-3.2. Does the CoC use an active list or by name list to identify all Veterans experiencing homelessness in the CoC? Yes

3B-3.3. Is the CoC actively working with the VA and VA-funded programs to achieve the benchmarks and criteria for ending Veteran homelessness? Yes

3B-3.4. Does the CoC have sufficient resources to ensure each Veteran is assisted to quickly move into permanent housing using a Housing First approach? Yes

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

Instructions:

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

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

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

4A-1a. Mainstream Benefits

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

(1)CES Diversion refers households to a list of mainstream services including: county, mental health, CD, health, disability, legal services, veterans, SOAR, & workforce. Our primary access sites are Community Actions who also provide: state funded prevention/rehousing assistance, are co-located with other systems, and extensive community programs themselves (Energy Assistance, SOAR, Healthcare navigators, Headstart, TaxSite, Food Support, Senior). Navigators (funded through United Way funds) assist high barrier households in successfully linking to services and obtaining/retaining housing.

(2)Agencies utilize 211 and Bridges to Benefits which both provide current applications and eligibility information. Annually, the CoC targets a CoC meeting to improving Coordination with mainstream, community and other systems. The CoC assess APRs for linkage and provides feedback to agencies to improve

linkage.

(3)The Performance Eval Committee, with the CoC Coordinator and Chair as leads.

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

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	4.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	4.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	100.00%

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

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	4.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	4.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	100.00%

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

Veteran outreach covers 7 counties providing: weekly street, shelter, & referral outreach (from libraries, police, etc.). Youth outreach covers 2 counties, providing street (2-3x weekly), referral (from libraries, youth, police, etc.), shelter and known location outreach. PATH targets homeless who are severely mentally ill, covers 3 counties, & provides referral and shelter outreach. MN Dept. of Human Services administers PATH and in the new grant cycle (7/1/17) began providing training and requirements for street outreach. All outreach staff serve as CES access and assessment sites. The regions 3 Community Actions provide inreach to shelters, meet persons in the community needing to be assessed for CES (as identified through phone access or referrals), provide booths at community events, and outreach at regional food drops. Navigators outreach to persons on the CES list who are least engaged with services and who are the most vulnerable (high score, long-term homeless and CH).

**4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as**

detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach.

Describe: (1) the specific strategies that have been implemented that affirmatively further fair housing as detailed in 24 CFR 578.93(c); and (2) what measures have been taken to provide effective communication to persons with disabilities and those with limited English proficiency. (limit 1000 characters)

The CoC adopted an Affirmative Outreach Strategy in December of 2016 supporting compliance through required online Fair Housing & Equal Access Trainings, which include suggestions on how to outreach and serve to persons likely to access services. Specific actions agencies have taken include: outreach to ELL Parent Meetings, networking to Cultural Diversity Resources & Adult Basic Education, adapting office access (hours/configuration/locations), flexible scheduling in the community to adapt to persons with limited accessibility or transportation access, assuring interpretation services are readily available, providing "I speak" cards at receptionist desks, translating website information to 70 languages, utilization of MN Department of Human Services Multilingual Referral Phone, adapting forms to 6th grade reading level, reading information if person is low literacy, hiring multi-cultural staff, displaying the Pride flag, and requiring cultural competency training for all staff.

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

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	66	26	-40

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

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

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	CoC Evidence of N...	09/18/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes		
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	CoC Rating and Re...	09/20/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes		
05. CoCs Process for Reallocating	Yes	CoC Process for R...	09/18/2017
06. CoC's Governance Charter	Yes	CoC Governance Ch...	09/18/2017
07. HMIS Policy and Procedures Manual	Yes	HMIS Policy and P...	09/18/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Administratio...	09/18/2017
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No	HMIS MOU - MN 508	09/18/2017
11. CoC Written Standards for Order of Priority	No	CoC Written Stand...	09/18/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	HDX-System Perfor...	09/18/2017
14. Other	No		
15. Other	No		

Reallocation Supporting Documentation

West Central MN Continuum of Care	
Meeting Date: August 10, 2017	Meeting Time: 1:00 PM - 3:00 PM
Membership Meeting Minutes	
<p>Attendance: Heidi Hecker LSNM, Katie Pauk LSNM, Gina Kautz Clay County HRA, Theresa Hazeman Rural MN CEP, Tia Braseth City of Moorhead, Dara Lee Clay county HRA, Giny Churches United, Pat Leary DHS, Marsha Otte Mahube Otwa CAP, Colleen Murray Lakes and Prairies CAP, Emma Lakes and Prairies CAP, Cody Schuler FM Coalition, Dawn Bacon Moorhead Public Housing, Christina Olsen White Earth Homeless Programs, Carla Solem COC, Kelli Winter WCMCA, Barbara Sipson Community Volunteer.</p>	
<p>I. Dara called the meeting to order and introductions were made.</p>	
<p>II. No changes to July minutes. Colleen moves to approve, Marsha seconds. Motion carries.</p>	
<p>III. Review and input on Moorhead CDBG Plan - Tia Braseth presented plan. CDBG since 1971—lowest received was in 2016. Most ever received was in 1985. Every activity in the block grant must meet HUD objectives. Annual plan is developed yearly which is why Tia is here, to gather input and ideas to help the community. Currently in year 4 of 5 year plan. Over past 4 years have partially funded Wilder funding and some CARES. Members provided feedback on homeless needs for next plan including: MPH looking for dollars for POHP program, Dorothy Day and Churches United have capital improvement needs. Collaborate with current unused funds to use up in conjunction with Clay Co HRA and City CDBG money, Youth Activity or Drop in Center, Coordinated Entry, and Expand transportation assistance to help households get to other appointments besides employment and medical such as legal services. Email or Call Tia with any additional feedback.</p>	
<p>IV. NOFA Preparation:</p> <p>a. There is \$47,930 for bonus project. Three projects submitted pre-applications: Churches United for Bright Sky, WCMCA for RRH expansion, and CCHRA for CARES expansion, but will not withdraw if other high performing project was interested. These projects can also be considered for reallocation.</p> <p>b. Ranking committee meeting will be September 6th and COC meeting will be September 11th in White Earth.</p> <p>c. Timeline was provided with a reminder on deadlines.</p> <p>d. New tool for Ranking was approved and now HUD has sent out a new tool. Agencies will need to "score" themselves first then send in to see how they compare to how the committee scores them. Heidi motioned to approve the ranking tool. Cody seconds the motion, motion carries.</p>	
<p>V. Reports and Updates:</p> <p>a. MICH: LTH-SS received additional \$750,000 one-time funding. Will be put out in RFP which will be written when NOFA work dies down—maybe within a month or so. Will be open to all existing projects, all same eligible activities that has been funded in the past. Navigation for coordinated entry is an eligible activity. Housing locator service is eligible. Funds would start as soon as contracts are distributed. Earliest start date could be Nov. 1 but more likely Jan 1—will run for Dec. 31st 2019. Projects can have partners.</p> <p>b. Committees:</p> <p>i. Data committee discussed plans to improve data quality. HMIS policy updates have been sent out to everyone, no feedback has been received as of yet, Carla will re-send out for feedback again.</p>	

- ii. Performance Evaluation. Focus is to move from looking at APR's to looking at full system performance and making sure we are moving towards ending homelessness.
- iii. CES - New Vi-Spots and supplemental forms are on the COC website. October 16th and 17th COC mandatory training date. 18th: Motivational Interviewing training will be an add on day. 19th: An additional day is a possibility for train the trainers. Active COC members can be reimbursed for the extra days of training. (waiting on conformation)
- iv. Employment Committee still needs to meet.
- v. FHPAP Mahube cannot spend money until contracts are received. Lakes and a Prairies and WCMCA are spending. Mahube and WCMCA have RRH \$\$ for FHPAP.
- c. CoC Coordinator: State updating plan to end homelessness. Meeting Wednesday 9/16 at Camp Ripley for MN heading home plan. They'd like to update plan so it's integrated with state agencies.
 - i. Diversion screening is needing to be done by January. Mainly shelters are having difficulty but are working on it.
 - ii. Ruth Meyers shelter in Bismarck is closing their mens shelter, expect to see influx of people coming to FM area for shelter beds.
- d. AGENCY updates: White Earth: Kristy took a different job. L&P CAP: Hiring new program called HSAMI (Housing Supports for Adults with Mental Illness). Moorhead Public Housing: Waiting list is moving along, worth applying. Churches United: Busy, hiring new case manager, working on harm reduction. WCMCA: Director of Development and Operations has been hired. CEP: Department adjusting to DEED having no workforce staff. Clay Co HRA: Housing supports programming going well. Cody ND Coalition: Leadership Development training Oct 2nd, Sept. 7th Coalition Luncheon. Marsha Mahube: Opportunity for outreach grant, needing feedback on the 4 questions that were sent out to the group, return to motte@mahube.org.

Next meeting September 11th 2017 in White Earth 1-3 PM.

NOFA Competition OPEN - Response Required inbox x

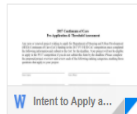
 **Carla Solem** <h2hcoordinator@gmail.com>
to emmas, Dara, Rebecca, Heather, Demetri, Julie, Elizabeth, Hyacinth, Maureen, Bonnie, Lori, Nikki, Sandi

Jul 18

The 2017 NOFA Continuum of Care Application is now open and the application materials and CoC deadline are now available. Please read the attached NOFA Timeline carefully, and enter the deadlines into your calendar. The first deadline is the Intent to Apply and Threshold Assessment (attached). The instructions and NOFA are available on the NOFA and HDX website. The application is submitted in esnaps. The CoC website will have links to all materials and CoC specific information.

- NOFA website: <https://www.hudexchange.info/programs/e-snaps/fy-2017-coc-program-nofa-coc-program-competition/>
- HDX website: https://www.hudexchange.info/programs/e-snaps/guides/coc-program-competition-resources/?utm_source=HUD+Exchange+Mailing+List&utm_campaign=6b74add14c-FY17+CoC+Comp%3A+e-snaps+is+Now+Available+7%2F18%2F17&utm_medium=email&utm_term=0_f32b935a5f6bf4add14c-19226689#general-resources
- Esnaps website: <https://esnaps.hud.gov/grantium/frontOffice.jsfn>
- CoC website: <http://www.homelesstohoused.com/>

2 Attachments



2017 Continuum of Care Pre-Application & Threshold Assessment

Any new or renewal project wishing to apply for Department of Housing and Urban Development (HUD) Continuum of Care (CoC) funding in the 2017 FY HUD CoC competition must complete the following information and submit to the CoC by the deadline. Your project will not be eligible to apply in the FY17 competition if you do not submit this form by the deadline. Please complete the proposed project overview and review each of the following ranking categories, marking those questions that apply to your project.

Name of Agency

Name of Project

Primary Contact

Contact Email

DUNS #

SAM #

Intent to Apply:

- Our agency will NOT apply for funding in the 2017 HUD CoC Competition. *(Please skip to agency signature and return to Carla Solem @ h2hcoordinator@gmail.com)*
- Our agency intends to apply for funding in the 2017 HUD CoC Competition. *(Please proceed to question one and complete all questions, sign and return to Carla Solem @ h2hcoordinator@gmail.com)*

Project Description:

1. Type of funding requested:

New:

What type of new project? BONUS Reallocation

Renewal:

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

If yes, please explain why?

If yes, by what amount? _____

If yes, describe how participants will not become homeless as a result:

2. The project component is: PSH: Chronic/Not Chronic RRH HMIS TH CES
 THP-RRH

3. Target Population:

Singles # ___ units/ ___ beds Families # ___ units/ ___ beds Youth # ___ units/ ___ beds

4. Proposed Start Date: _____, 2018 Proposed End Date: _____, 2018/19

Overview of the FY 2017 Continuum of Care (CoC) Program Competition NOFA

- Funding Opportunity Number: FR-6100-N-25
- CFDA Number: 14.267

IMPORTANT PROJECT APPLICATION DATES & DEADLINES:

- July 25, 2017 – Signed Intent to Apply & Threshold forms due to CoC via email in PDF format
- TBD – NOFA Application Lab
- August 18, 2017 – Project Draft Applications submitted to CoC via PDF for ranking
- August 24, 2017 - Project Applications due to CoC via eSnaps and PDF
- September 11, 2017 – Project Applications notified of inclusion in CoC Collaborative Application
- September 22, 2017 – Final Project Application edits submitted in eSnaps and PDF to CoC
- September 28, 2017 – Appeals to HUD if application rejected by CoC.

HUD CoC Consolidated Application Deadline: September 28, 2017 @ 6:59 PM. **Note:** *Project Applications must be submitted by the Project deadlines NOT the Consolidated Application deadline.*

Highlights of the 2017 CoC NOFA:

- About \$2 billion is available for the FY17 CoC Program NOFA. This funding may not be sufficient to fund all anticipated renewals.
- HUD will continue to CoCs to rank all projects, except CoC planning, and is requiring placing projects in Tier 1 and Tier 2. Tier 1 is equal to the greater of the combined amount of Annual Renewal Amount (ARA) for all permanent housing and HMIS projects eligible for renewal up to \$1,000,000 or 94 percent of the CoC's FY 2017 Annual Renewal Demand (ARD).
- Project Applicants must abide by the CoC deadline, meet HUD eligibility criteria, request eligible activities (listed under 24 CFR, part 578), adequately answer all questions, and attach all required documents to be considered eligible for funding.
- The CoC is required to rank projects in order of priority and identify projects rejected. Planning projects will not be ranked. Ranking is based on capacity, priorities, and performance. Reallocation should be strongly considered for underperforming projects. Projects with outstanding HUD audit findings, history of ineligible participants, evidence of untimely expenditures, or financial management concerns, may be eliminated from competition.
- Renewal projects requesting RA may request a per-unit amount less than FMR based on actual rent costs and cannot request more than 100% FMR.
- Bonus projects can be created up to 6% of CoC FPRN for:
 - New PSH serving 100% chronic homeless or meeting DedicatedPLUS criteria;
 - New RRH serving persons coming from streets, ES, fleeing DV situations or meeting criteria in paragraph 4 of definition of homeless; residing in joint TH-PH-RRH program, and receiving services from VA funded homeless assistance programs and meet other previous criteria at intake; and
 - New joint TH & PH-RRH.
 - Anticipated bonus amounts are:
 - Northwest CoC is: $\$652,918 \times 6\% = \$25,578$
 - West Central CoC is: $\$798,835 \times 6\% = \$38,288$

- **New reallocation projects may include:**
 - New PSH serving 100% chronic homeless or meeting DedicatedPLUS criteria;
 - New SSO for Coordinated Entry;
 - New RRH serving individuals and families who enter from ES, streets, fleeing domestic violence, residing in joint TH-PH-RRH program, and receiving services from VA funded homeless assistance programs and meet other previous criteria at intake;
 - New joint TH & PH-RRH
 - New HMIS for the costs of 24 CFR 578.37 carried out by HMIS Lead.
- **Expansion** projects can be requested under the bonus or reallocation in order to expand existing units in a project or serve additional persons, or in the case of HMIS, grant activities will be expanded within CoC and fits into the funding parameters of bonus or reallocation.

Important links:

- Competition page: <https://www.hudexchange.info/programs/e-snaps/fy-2017-coc-program-nofa-coc-program-competition/>
- The entire 2017 NOFA can be found at: <https://www.hudexchange.info/resource/5419/fy-2017-coc-program-nofa/> and on a link at the CoC website home page,
- HUD Ask A Questions (AAQ): www.hudexchange.info/get-assistance/.

Eligible Project Applicants: Eligible project applicants are nonprofit organizations, States, local governments, and instrumentalities of State and local governments, and public housing agencies, as such term is defined in 24 CFR 5.100.. For-profit entities are not eligible to apply for grants or to be sub-recipients of grant funds. **Furthermore, to be eligible for funding applicants must meet all HUD statutory, regulatory and threshold requirements.**

HUDS' Homeless Policy and Program Priorities:

1. **Ending homelessness for all persons.**
 - a. Identify, engage, and effectively serve all persons experiencing homelessness.
 - b. Measure performance based on data taking into account the challenges faced by all subpopulations experiencing homelessness in the geographic area.
 - c. Comprehensive outreach strategy in place to identify and engage.
 - d. Use data to understand the population and develop services tailored to their needs.
 - e. Use the reallocation process to create new projects that improve the overall performance and better respond to the needs of person who are homeless.
2. **Create a systemic response to homelessness.**
 - a. Use system performance measures (SPMs) to determine how effectively they are serving people experiencing homelessness.
 - b. Use Coordinated Entry to promote participant choice, coordinate services, ensure rapid access, and make homelessness assistance open, inclusive, and transparent.
3. **Strategically allocating and using resources.**
 - a. Use cost, performance, and outcome data to improve resources allocation to end homelessness.
 - b. Review project quality, performance, and cost effectiveness.