

Before Starting the CoC Application

You must submit all three of the following parts in order for us to consider your Consolidated Application complete:

1. the CoC Application,
2. the CoC Priority Listing, and
3. all the CoC's project applications that were either approved and ranked, or rejected.

As the Collaborative Applicant, you are responsible for reviewing the following:

1. The FY 2023 CoC Program Competition Notice of Funding Opportunity (NOFO) for specific application and program requirements.
2. The FY 2023 CoC Application Detailed Instructions which provide additional information and guidance for completing the application.
3. All information provided to ensure it is correct and current.
4. Responses provided by project applicants in their Project Applications.
5. The application to ensure all documentation, including attachment are provided.

Your CoC Must Approve the Consolidated Application before You Submit It
- 24 CFR 578.9 requires you to compile and submit the CoC Consolidated Application for the FY 2023 CoC Program Competition on behalf of your CoC.

- 24 CFR 578.9(b) requires you to obtain approval from your CoC before you submit the Consolidated Application into e-snaps.

Answering Multi-Part Narrative Questions

Many questions require you to address multiple elements in a single text box. Number your responses to correspond with multi-element questions using the same numbers in the question. This will help you organize your responses to ensure they are complete and help us to review and score your responses.

Attachments

Questions requiring attachments to receive points state, "You Must Upload an Attachment to the 4B. Attachments Screen." Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process. Include a cover page with the attachment name.

- Attachments must match the questions they are associated with—if we do not award points for evidence you upload and associate with the wrong question, this is not a valid reason for you to appeal HUD's funding determination.

- We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).

1A. Continuum of Care (CoC) Identification

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1A-1. CoC Name and Number: MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties CoC

1A-2. Collaborative Applicant Name: Hearth Connection

1A-3. CoC Designation: CA

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

1B. Coordination and Engagement–Inclusive Structure and Participation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

	Organization/Person	Participated in CoC Meetings	Voted, Including Electing CoC Board Members	Participated in CoC’s Coordinated Entry System
1.	Affordable Housing Developer(s)	Yes	No	Yes
2.	CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes	Yes
3.	Disability Advocates	Yes	No	No
4.	Disability Service Organizations	Yes	No	Yes
5.	EMS/Crisis Response Team(s)	No	No	No
6.	Homeless or Formerly Homeless Persons	Yes	Yes	Yes
7.	Hospital(s)	No	No	No
8.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes	No	No
9.	Law Enforcement	Yes	No	No
10.	Lesbian, Gay, Bisexual, Transgender (LGBTQ+) Advocates	Yes	Yes	Yes
11.	LGBTQ+ Service Organizations	Yes	No	No
12.	Local Government Staff/Officials	Yes	Yes	Yes
13.	Local Jail(s)	Yes	No	Yes
14.	Mental Health Service Organizations	Yes	Yes	Yes
15.	Mental Illness Advocates	Yes	No	No

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	No	Yes
18.	Organizations led by and serving people with disabilities	Yes	No	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	No	Yes
21.	School Administrators/Homeless Liaisons	Yes	No	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	No	Yes
24.	Substance Abuse Service Organizations	Yes	No	No
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	No	No	No
29.	State Domestic Violence Coalition	Yes	No	No
30.	State Sexual Assault Coalition	Yes	No	No
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.				
35.				

By selecting "other" you must identify what "other" is.

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	
	Describe in the field below how your CoC:	
1.	communicated a transparent invitation process annually (e.g., communicated to the public on the CoC's website) to solicit new members to join the CoC;	
2.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
3.	invited organizations serving culturally specific communities experiencing homelessness in the geographic area to address equity (e.g., Black, Latino, Indigenous, LGBTQ+, and persons with disabilities).	

(limit 2,500 characters)

1) Invitation to apply for open voting positions on the Governing Board is conducted annually. The CoC communicates in multiple ways to make stakeholders aware of open voting positions on the Governing Board. Open positions and the application process are posted on the CoC website. The CoC Coordinator maintains a listserv & sends information regarding open positions and updates to all stakeholders annually at a minimum. Opportunities are also shared at CoC committee meetings & through presentations to local stakeholder groups such as school liaisons, police departments, etc. Interested members are asked to complete a short application. Applications are reviewed and members are selected by the CoC's Directors Council, a group of people with lived experience of homelessness.

2) CoC meetings are typically held virtually with software that allows participants to use closed captioning, control volume, and use any other specialized technology they may have such as screen readers. When meetings are held in-person, the CoC uses the Owl Lab system to make meetings accessible and interactive for those who need to join remotely, and the location chosen is wheelchair-accessible. Information for open board positions is available in electronic format through email or the CoC website. In addition, opportunities are verbally communicated during stakeholder meetings of the CoC.

3) Since 2020, one of the CoC's primary goals has been to ensure that the identities and experiences of Governing Board (GB) members are reflective of those facing homelessness in our community. To accomplish this, (a) We conduct and are building partnerships with culturally specific organizations. This has included recruiting culturally specific organizations from urban areas (who have not previously operated in our CoC) to expand services and involvement in our CoC. (b) We changed CoC bylaws to empower the Directors Council to lead the recruiting, review, and selection of GB voting membership. (c) We work to change the culture of our GB to ensure it is a welcoming space where everyone has a voice. This step has included normalizing the practice of sharing our pronouns, close captioning our Zoom meetings, holding some meetings in the evening to ensure those with childcare/work obligations are able to participate, etc. As a result of these efforts, GB membership is currently 67%, BIPOC, and 20% people with lived experience of homelessness.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	
	Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;	
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;	
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and	
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.	

(limit 2,500 characters)

The CoC solicits and considers opinions and input from a robust range of community stakeholders representing interests that are committed to preventing and ending homelessness. Broad CoC membership includes over 75 organizations and 12 individuals with lived experience of homelessness who are not connected to any particular agency, as indicated in 1B-1.

1) The CoC tracks demographics of all Governing Board and committee members (race, ethnicity, gender identity, interest group etc. to ensure that broad and representative perspectives are at CoC planning and decision-making tables. Outreach is targeted to individuals whose identities/experiences are under-represented within CoC membership. The CoC’s governance and voting procedures provide equal representation among all interests and ensure all opinions are heard. All formal CoC decisions are first reviewed by the Directors Council (a group comprised entirely of people with lived experience of homelessness). People with lived experience of homelessness are active participants of all CoC committees, and bylaws require that at least 20% of Governing Board membership have lived experience of homelessness.

2) The CoC communicates in multiple ways to make stakeholders aware of public meetings. Meeting times, location, and agendas are posted on the CoC website. The CoC Coordinator maintains a listserv and sends meeting reminders and updates to all stakeholders monthly. Meetings invites are also shared at all committee meetings. Board membership by people of color and people with lived experience has increased from virtually none to now it is 67% of the board.

3) Since the COVID-19 pandemic, nearly all CoC Governing Board and committee meetings have shifted to virtual platforms. Where meetings are held in person, we ensure meetings spaces are accessible, gender-neutral bathrooms are available, and we use the Owl Labs system to ensure those joining remotely are able to actively participate. In addition to regularly scheduled Governing Board and committee meetings, the CoC held regular check in meetings with provider groups across the continuum of services to ensure system adjustments could be made as needed. The CoC also worked through the SMAC EQUITY TEAM with the HUD Racial Equity Initiative. CoC leadership engaged multiple stakeholder groups in various meetings to share the insights from the SMAC EQUITY TEAM (formerly SPARC) and get input on strategies to advance racial equity across the CoC.

1B-4.	Public Notification for Proposals from Organizations Not Previously Awarded CoC Program Funding.	
	NOFO Section V.B.1.a.(4)	
	Describe in the field below how your CoC notified the public:	
1.	that your CoC will consider project applications from organizations that have not previously received CoC Program funding;	
2.	about how project applicants must submit their project applications—the process;	
3.	about how your CoC would determine which project applications it would submit to HUD for funding; and	
4.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats.	

(limit 2,500 characters)

The CoC solicits new proposals for funding annually to encourage development of new projects & expand CoC resources.

1) The CoC distributed the new funding announcement through broad distribution lists & posted on the CoC website on 7/17/23. The request for proposals was also detailed at the Governing Board meeting on 7/25/23. The CoC reached out directly to providers to discuss CoC priorities for new projects & encourage applications. Specific outreach was conducted to DV providers to ensure these providers were aware of the bonus opportunity & to encourage them to apply. Technical assistance was offered to all projects that have not previously received CoC funds. Specific outreach was conducted to local providers not funded by HUD.

2) At the time the application was published on the CoC website, an information packet was also posted & sent via email. The information packet includes all materials a new applicant would need to complete the local CoC application & information on how to submit applications. It was requested that applications should be submitted via email to the CoC Coordinator.

3) The CoC uses a competitive process to determine the new projects to be included in CoC Program Competition. Data is reviewed & used to set local priorities. These priorities are used in selecting new projects to ensure they will fill the identified gaps in the CoC. The application for new projects is developed by the Governing Board & is widely distributed. A scoring rubric is developed & shared at the time the application is released. Responses are submitted to the CoC Coordinator and then shared with the CoC Ranking Committee, made up of members of the Governing Board and the Directors Council of people with lived experience. Ranking members score each application & discuss all responses at a virtual meeting to determine which projects will be included in the CoC Program Competition.

4)The application notices and information were accessible to individuals with disabilities and provided electronically and in meetings.

1C. Coordination and Engagement

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

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1C-1.	Coordination with Federal, State, Local, Private, and Other Organizations.	
	NOFO Section V.B.1.b.	
	In the chart below:	
	1. select yes or no for entities listed that are included in your CoC's coordination, planning, and operations of projects that serve individuals, families, unaccompanied youth, persons who are fleeing domestic violence who are experiencing homelessness, or those at risk of homelessness; or	
	2. select Nonexistent if the organization does not exist within your CoC's geographic area.	

	Entities or Organizations Your CoC Coordinates with for Planning or Operations of Projects	Coordinates with the Planning or Operations of Projects?
1.	Funding Collaboratives	Yes
2.	Head Start Program	Yes
3.	Housing and services programs funded through Local Government	Yes
4.	Housing and services programs funded through other Federal Resources (non-CoC)	Yes
5.	Housing and services programs funded through private entities, including Foundations	Yes
6.	Housing and services programs funded through State Government	Yes
7.	Housing and services programs funded through U.S. Department of Health and Human Services (HHS)	Yes
8.	Housing and services programs funded through U.S. Department of Justice (DOJ)	Yes
9.	Housing Opportunities for Persons with AIDS (HOPWA)	Yes
10.	Indian Tribes and Tribally Designated Housing Entities (TDHEs) (Tribal Organizations)	Yes
11.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes
12.	Organizations led by and serving LGBTQ+ persons	Yes
13.	Organizations led by and serving people with disabilities	Yes
14.	Private Foundations	Yes
15.	Public Housing Authorities	Yes
16.	Runaway and Homeless Youth (RHY)	Yes
17.	Temporary Assistance for Needy Families (TANF)	Yes
	Other:(limit 50 characters)	

18.		
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1C-2.	CoC Consultation with ESG Program Recipients.	
	NOFO Section V.B.1.b.	

Describe in the field below how your CoC:	
1.	consulted with ESG Program recipients in planning and allocating ESG Program funds;
2.	participated in evaluating and reporting performance of ESG Program recipients and subrecipients;
3.	provided Point-in-Time (PIT) count and Housing Inventory Count (HIC) data to the Consolidated Plan jurisdictions within its geographic area; and
4.	provided information to Consolidated Plan Jurisdictions to address homelessness within your CoC's geographic area so it could be addressed in the Consolidated Plan update.

(limit 2,500 characters)

The CoC engages with both ESG recipients in the region, Dakota County CDA and the State of Minnesota, in developing plans and allocating funding.

1) The State of Minnesota has a bi-annual competitive Request for Proposal (RFP) process for ESG funds. Representatives from the CoC participate in the review of funding applications. This review process, along with additional RFP meetings, provides an opportunity for meaningful CoC input in the allocation of ESG funds in the CoC. In addition, the CoC meets at least monthly with the Dakota County CDA through the Dakota County Affordable Housing Coalition meeting where ESG planning and funding allocation are included on the agenda annually at a minimum. The CoC collaborated closely with both ESG recipients during the allocation of ESG-CV funds through monthly planning discussions and shared review of applications for funding.

2) The CoC collaborates with all ESG recipients in creating written standards that define practices, performance standards, outcomes and evaluation processes for all ESG funded programs within the CoC. Using the written standards we have developed together, the CoC works with Dakota County CDA and the State to evaluate the performance of ESG recipients.

3) The Consolidated Plan jurisdictions covered by the CoC include: Anoka, Dakota and Washington Counties, Woodbury City and the State of Minnesota. Staff from Con Plan jurisdictions are active in CoC committees. The CoC provides input during the development of the Con Plan including providing data from HDX (PIT and HIC) and HMIS (Coordinated Entry) that inform trends and CoC identified priorities. There is regular phone and email contact between Con Plan jurisdiction staff and the CoC on projects of interest and attendance at CoC committee meetings.

1C-3.	Ensuring Families are not Separated.	
	NOFO Section V.B.1.c.	

Select yes or no in the chart below to indicate how your CoC ensures emergency shelter, transitional housing, and permanent housing (PSH and RRH) do not deny admission or separate family members regardless of each family member's self-reported sexual orientation and gender identity:

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	No
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	No
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	No

1C-4.	CoC Collaboration Related to Children and Youth—SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate the entities your CoC collaborates with:

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	No
4.	School Districts	Yes

1C-4a.	Formal Partnerships with Youth Education Providers, SEAs, LEAs, School Districts.	
	NOFO Section V.B.1.d.	

Describe in the field below the formal partnerships your CoC has with at least one of the entities where you responded yes in question 1C-4.

(limit 2,500 characters)

1) The CoC has formal agreements with youth education providers through in-reach into schools across the region. Youth outreach workers provide targeted in reach into schools that includes talking with administrative staff to identify youth & families that may be experiencing homelessness. The outreach workers serve youth within the school &/or meet with the youth or family outside of the school. The youth outreach workers regularly participate in CoC Committee meetings.

2)The CoC entered a new, ongoing Collaborative Agreement with the MN Dept. of Education (MDE) in September 2022. This agreement outlines the roles of CoCs and MDE and our collaborative efforts in ensuring that families and youth experiencing homelessness are informed of their rights under McKinney-Vento and have access to resources they need to be stably housed. In the agreement, MDE commits to a) Provide training to the CoC on how to use MDE aggregate public data on youth experiencing homelessness in Districts and Schools. b) Offer ongoing trainings to District and School Homeless Liaisons, to CoC Coordinators. c) Provide to District and School Homeless Liaisons, a list of CoC key contact information sortable by county; and encourage Liaisons to communicate and collaborate with their CoC.

The CoC commits to MDE to a) By Oct 1 each year, provide MDE a current list of CoC contacts. b) By Oct 1 of each year, provide information on how to become members of a CoC with District and School Homeless Liaisons. c) Invite MDE and educational entities within the CoC to become members of the CoC. d) As needed, provide clear information about date, time, and agenda of agreed upon collaboration meetings.

Together, MDE and the CoC commit to collaborate to distribute a bimonthly MN Homeless Education Newsletter to all homeless school liaisons with important training dates, resources, and connections to assist LEAs with serving the needs of youth experiencing homelessness.

4) The CoC collaborates with school districts throughout the year in several ways. LEAs & school district staff attend monthly CoC committee meetings & provide data on households experiencing homelessness within the district. The CoC partners with school districts in planning specific to Homework Starts with Home which is a state funded homelessness prevention program coordinated with school districts. This planning includes strategies to connect families with housing instability to homeless response system resources.

1C-4b.	Informing Individuals and Families Experiencing Homelessness about Eligibility for Educational Services.	
	NOFO Section V.B.1.d.	

Describe in the field below written policies and procedures your CoC uses to inform individuals and families who become homeless of their eligibility for educational services.

(limit 2,500 characters)

The CoC Charter contains policies regarding educational services, including early childhood services. All homeless assistance projects within the SMAC region that serve households with children (shelter, transitional housing, rapid re-housing, and permanent supportive housing) are required to agree to comply with the following policies:

- i. Ensure that all homeless families are informed of the McKinney Vento Act to ensure that their children are able to maintain enrollment in school.
- ii. Advocate for families with their school district to ensure that transportation is arranged (as needed).
- iii. Track school attendance for all children served within your program and help families to resolve any barriers that are contributing to the absences (as needed).
- iv. Assist families in developing education-related goals for all family members when completing Housing Goal Plans.
- v. Ensure that all family members are connected to relevant educational resources in the community.
- vi. Encourage and assist families with children ages 3-5 to apply for the Head Start Program and provide referrals to agencies that offer Head Start.

1C-4c.	Written/Formal Agreements or Partnerships with Early Childhood Services Providers.	
	NOFO Section V.B.1.d.	

Select yes or no in the chart below to indicate whether your CoC has written formal agreements or partnerships with the listed providers of early childhood services:

		MOU/MOA	Other Formal Agreement
1.	Birth to 3 years	No	Yes
2.	Child Care and Development Fund	No	Yes
3.	Early Childhood Providers	No	Yes
4.	Early Head Start	No	Yes
5.	Federal Home Visiting Program–(including Maternal, Infant and Early Childhood Home and Visiting or MIECHV)	No	Yes
6.	Head Start	No	Yes
7.	Healthy Start	No	Yes
8.	Public Pre-K	No	Yes
9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

1C-5.	Addressing Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors–Collaboration with Federally Funded Programs and Victim Service Providers.	
	NOFO Section V.B.1.e.	

In the chart below select yes or no for the organizations your CoC collaborates with:

Organizations		
1.	state domestic violence coalitions	Yes
2.	state sexual assault coalitions	Yes
3.	other organizations that help this population	Yes

1C-5a.	Collaboration with Federally Funded Programs and Victim Service Providers to Address Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC regularly collaborates with organizations indicated in Question 1C-5 to:

1.	update CoC-wide policies; and
2.	ensure all housing and services provided in the CoC's geographic area are trauma-informed and can meet the needs of survivors.

(limit 2,500 characters)

1) CoC policies are reviewed on a regular basis by the Governing Board which includes representation from an organization serving survivors of domestic violence and sexual assault. The CoC hosts monthly CE case consultations with VSPs, where issues facing survivors can be identified and brought to the larger CoC for discussion and policy change if needed. This process was created through a CoC-wide meeting with VSPs to problem-solve how to fairly prioritize survivors who may not have long histories of homelessness. The CoC has discussed issues that providers have brought up with Violence Free MN to ensure that the CoC is operating according to best practices. VSPs in the CoC are also members of the MN Coalition Against Sexual Assault (MNCASA), and the CoC collaborates with MNCASA to provide technical assistance to update CoC policies.

2) The CoC hosts regular CoC-wide meetings where we frequently ask DV/SA VSP providers to share their expertise. These events are informal so that attendees can ask questions directly to the DV/SA VSP staff, CE staff, or each other to gain necessary knowledge and tools to better serve survivors. The CoC coordinates with VSP providers and other experts who provide Trauma-Informed Care trainings for CoC agencies at least twice per year. SMAC by-laws include a policy specifically for providers serving unaccompanied youth. This CoC policy states that all youth providers should use trauma informed care in assessing youth housing and service needs and that support services will be provided in a trauma informed, harm reduction and victim-survivor-leader framework .

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC coordinates to provide training for:

1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).

(limit 2,500 characters)

The CoC coordinates with Victim Service Providers and local/state-wide training entities with expertise in trauma-informed care and victim-centered practices to provide training to all providers within the CoC including Coordinated Entry staff and assessors.

1) (a) Local Victim Service Providers (VSPs) are active participants in the CoC. The CoC coordinates with local VSPs to provide trainings at CoC meetings on at least an annual basis. (b) The CoC has worked with State agencies, Tribal nations, and other CoCs across the state to establish common training content/standards for 9 core training topics—which include Trauma-Informed Care and Victim Service Practices. (c) The CoC uses these training standards as we coordinate with expert training/VSP agencies across the state (MESH, Violence Free MN, MN Coalition Against Sexual Assault, Streetworks, Training Institute) to provide CoC agencies access to trainings on at least a quarterly basis for trauma-informed care and victim service practices. (d) Additional topics offered on at least an annual basis include: sexual exploitation, outreach to youth, de-escalation best practices, and Safe Harbor/no wrong door.

2) CE Assessors are able to access all resources noted above. In addition, the CoC provides CE assessor training on demand through online videos. The curriculum for this training includes trauma-informed practices and content on best practices in serving survivors. This training is developed by the Assessor Training Team which includes experts on trauma informed care. Training equips assessors to have conversations with participants regarding domestic violence and sexual exploitation. In addition, available resources are reviewed to ensure assessors can respond to needs of survivors. CES assessors are required to attend this training annually as part of the recertification process as outlined in the Coordinated Entry Policies.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC’s Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC’s coordinated entry includes:

1.	safety planning protocols; and
2.	confidentiality protocols.

(limit 2,500 characters)

1) The CoC’s coordinated entry system ensures that assessors are trained on how to sensitively ask about clients’ experiences of domestic violence, dating violence, sexual assault, and stalking so that they can promote safety and provide immediate resources. The CoC’s Coordinated Entry assessment includes a script for assessors to use if a client discloses that they are a survivor which includes a crisis phone number which will connect them to an advocate who can do safety planning with the client. During our DV case consultation, VSPs are included to provide other service providers with advice and resources regarding safety planning.

2) The CoC ensures that CES assessors share data privacy and data sharing rights with all clients prior to collecting any data. All clients, including DV survivors, are given the choice of a non-shared assessment which does not go into HMIS. Clients assessed by DV agencies are automatically given non-shared assessments, and no last names are used during DV Case Consultations. Due to the fact that more people may be experiencing violence than those that disclose, the CoC uses HMIS IDs and client initials when communicating about all individuals. For clients who are not in HMIS, the only place their full name can be found is on their CE Assessment , which can only be seen by the staff making Coordinated Entry referrals and the housing project receiving the referral. In all written and verbal communication, initials or first names only are used, including on the non-shared list. Additionally, clients who are not in HMIS can choose which agencies they consent to have their information shared with by crossing out any agencies they choose on the SMAC CE ROI.

1C-5d.	Used De-identified Aggregate Data to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below:

1.	the de-identified aggregate data source(s) your CoC used for data on survivors of domestic violence, dating violence, sexual assault, and stalking; and
2.	how your CoC uses the de-identified aggregate data described in element 1 of this question to evaluate how to best meet the specialized needs related to domestic violence and homelessness.

(limit 2,500 characters)

1)The CoC uses three primary sources for data to evaluate how to best meet the specialized needs related to domestic violence, dating violence, sexual assault, and stalking: (a) HMIS—The primary tool the CoC uses to collect information on homeless programs is HMIS. While it is understood that HMIS cannot capture data from households served by Victim Service Providers, data on victimization is collected from households participating in non-VAWA covered programs in HMIS. This is important data to include when considering the scope of the issue. (b) Coordinated Entry Priority List outside of HMIS—Households who are assessed by a Victim Service Provider or opt not to have their data shared in HMIS are added to a non-HMIS Priority List. (c) Data from Victim Service Providers within the CoC—The CoC receives de-identified aggregate data on households served, households turned away, and length of stay in emergency shelter from Victim Service Providers across the region to better understand the scope of need in the community.

2)(a) De-identified aggregate data from HMIS is used by the CoC to review how many households have experienced DV and are currently being served by Housing Services Providers. HMIS is also utilized to maintain the majority of the CoC’s Coordinated Entry Priority List. The data from the HMIS list and the non-HMIS Coordinated Entry list are combined and used quarterly by the CoC to review trends and unmet needs including unmet needs of survivors. The CoC receives de-identified aggregate data on households served, households turned away, and length of stay in emergency shelter from Victim Service Providers across the region to better understand the scope of need in the community.

** **

1C-5e.	Implemented Emergency Transfer Plan Policies and Procedures for Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC communicates to all individuals and families seeking or receiving CoC Program assistance:

1.	whether your CoC has policies and procedures that include an emergency transfer plan;
2.	the process for individuals and families to request an emergency transfer; and
3.	the process your CoC uses to respond to individuals’ and families’ emergency transfer requests.

(limit 2,500 characters)

1) The CoC has a CES Transition Plan (emergency transfer plan) located in the CES Policies Document that instructs all program staff to follow if/when a household needs to leave housing obtained through the CoC's CES for safety reasons. All safety-related transfer requests are expedited. If a household needs to be on a priority list outside the CoC, Coordinated Entry staff will make every attempt to work with the new region to ensure a successful referral to that region's priority list. In addition, the CoC partners with Day One – a statewide crisis line that connects survivors to DV shelters across the state – in the CoC's Coordinated Entry process. If a survivor discloses abuse, the assessor offers to call Day One with the client to explore crisis housing and shelter options.

2) An emergency transfer plan, also known as a transition plan, through the CoC's Coordinated Entry Policies is activated whenever a client needs to leave their program. If a household needs to request an emergency transfer, all they need to do is tell their case manager, and the case manager will submit a transfer request to the CES Advisory, providing the details necessary to ascertain eligibility for other programs and the household's preferences and needs. The CoC engaged Victim Service Providers in the creation of the emergency transfer plan to ensure it would meet the needs of survivors. The emergency transfer plan details a CES Advisory committee that expedites the transition for a household from one housing program to another for several reasons including safety concerns.

3) The CES Advisory Committee began meeting in January 2018 and is an elected group of providers and assessors. The Advisory meets twice monthly or more frequently as needed to review, discuss, and facilitate transitions. When the CES Advisory receives an emergency transfer request, they first problem-solve together to think up all possible ways to resolve the crisis, both through Coordinated Entry and through any mainstream resources that may apply. They give their recommendation to CE staff, who coordinates with both providers to facilitate the transfer.

1C-5f.	Access to Housing for Survivors of Domestic Violence, Dating Violence, Sexual Assault, and Stalking.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC:	
1.	ensures that survivors of domestic violence, dating violence, sexual assault, or stalking have safe access to all of the housing and services available within the CoC's geographic area; and
2.	proactively identifies systemic barriers within your homeless response system that create barriers to safely house and provide services to survivors of domestic violence, dating violence, sexual assault, or stalking.

(limit 2,500 characters)

1) Survivors have direct access to all programs in the CoC through the CoC's Coordinated Entry. All providers are trained on working with survivors annually, and they create safety by asking the survivor what they need and anticipating needs such as not leaving voicemails unless given permission by the survivor, meeting the survivor where they are at, and using harm reduction strategies when the survivor is still in contact with their abuser. Survivors are offered a choice to access the CES and are offered housing where they believe they may be able to safely live. If the household needs to leave housing obtained through the CoC's CES for safety reasons, program staff are instructed to follow the process outlined in the CES transition plan (emergency transfer plan). The safety-related requests are expedited. Survivors can be assessed at all CoC access points, and additionally we have VSPs who can complete Coordinated Entry assessments themselves. Knowing that survivors have specific needs in addition to stable housing, the CoC has created DV-specific processes to ensure that survivors have equitable access and priority. Tubman's Safe Journeys Program serves a combination of single youth and families. The CoC Application also includes a DV Bonus application through Southern Valley Alliance for a Rapid Re-Housing program for survivors. The CoC has created protocols for survivors to prioritize safety through the creation of a case consultation group specific to victim/survivor service providers. In this monthly meeting, CES staff, DV staff, and CE Assessors are able to discuss survivors currently in shelter or recently identified by access points and needing immediate access to a permanent housing referral through CES.

2) The CoC maintains an on-going dialogue with VSPs through regular case consultation meetings. These meetings and the on-going dialogue is designed to identify strategies to emerging issues before any such trend or barrier affects any household. When VSPs experience any difficulty or frustration with the homelessness response system, that group provides a creative problem-solving space. Sometimes, there is just a misconception that needs to be clarified, and other times further action needs to be taken by committees or the Governing Board. The CoC engaged Victim Service Providers in the creation of the emergency transfer plan to ensure it would meet the needs of survivors.

1C-5g.	Ensuring Survivors With a Range of Lived Expertise Participate in Developing CoC-Wide Policy and Programs.	
	NOFO Section V.B.1.e.	

Describe in the field below how your CoC:	
1.	ensured survivors with a range of lived expertise are involved in the development of your CoC-wide policy and programs; and
2.	accounted for the unique and complex needs of survivors.

(limit 2,500 characters)

1)Several members of the CoC’s Directors Council are survivors with a range of lived expertise, including domestic violence and trafficking. The Directors Council is a group of people who all have lived expertise of homelessness, and they direct the work of the CoC. They draft policy language in consultation with service providers and make recommendations to the CoC Governing Board. The Directors Council also has 3 reserved seats on the CoC Governing Board, which is the final voting authority of the CoC.

2)The CoC follows the CDC’s six guiding principles of trauma-informed care when conducting CoC business: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment and choice, cultural, historical, and gender issues. By the nature of working in this field, we know that survivors could be in every space we inhabit, and we create group expectations and guidelines around confidentiality, option to stay off camera, asking permission before recording meetings, etc. The CoC also makes space for people to support each other when the work is hard and/or triggering. The CoC works to maintain an understanding that we all need help and we can all provide help. The Directors Council, for example, created a code word to use when a Director is feeling triggered by something, and that signals to the group what they’re going through, and to check-in with them once their nervous system has returned to baseline. The CoC also provides multiple options for communication with survivors: text, phone calls, email, as well as in-meeting options like attending virtually, and participating only in the chat.

1C-6.	Addressing the Needs of Lesbian, Gay, Bisexual, Transgender and Queer+–Anti-Discrimination Policy and Training.	
	NOFO Section V.B.1.f.	

	1. Did your CoC implement a written CoC-wide anti-discrimination policy ensuring that LGBTQ+ individuals and families receive supportive services, shelter, and housing free from discrimination?	Yes
	2. Did your CoC conduct annual 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 (Equal Access Final Rule)?	Yes
	3. Did your CoC conduct annual CoC-wide training with providers on how to effectively implement Equal Access in Accordance With an Individual's Gender Identity in Community Planning and Development Programs (Gender Identity Final Rule)?	Yes

1C-6a.	Anti-Discrimination Policy–Updating Policies–Assisting Providers–Evaluating Compliance–Addressing Noncompliance.	
	NOFO Section V.B.1.f.	

	Describe in the field below:
1.	how your CoC regularly collaborates with LGBTQ+ and other organizations to update its CoC-wide anti-discrimination policy, as necessary to ensure all housing and services provided in the CoC are trauma-informed and able to meet the needs of LGBTQ+ individuals and families;
2.	how your CoC assisted housing and services providers in developing project-level anti-discrimination policies that are consistent with the CoC-wide anti-discrimination policy;
3.	your CoC’s process for evaluating compliance with your CoC’s anti-discrimination policies; and
4.	your CoC’s process for addressing noncompliance with your CoC’s anti-discrimination policies.

(limit 2,500 characters)

1) The COC updated its anti-discrimination policy in 2022 to provide more detailed guidance to housing and services providers in the region. LGBTQ+ staff and providers within the CoC played a prominent role in the new policy. The original anti-discrimination policy was part of the COC charter; it is now a separate document that will be reviewed and updated at least annually. The CoC ensures that staff that identify as LGBTQ+ and programs that provide specialized services to LGBTQ+ households will play prominent roles in monitoring and updating these policies. The new anti-discrimination policy was accepted by the COC governing board on September 20, 2022.

2) Part of the new COC policy requires each project or provider that is operating in the SMAC region to have its own anti-discrimination policy that is consistent with the COC's policy and offers participants recourse if they have been discriminated against.

3) All projects will now be required to review and examine their anti-discrimination policies to conform with the continuum's policies and to add a reporting requirement for any discriminatory practices along with outcomes of how the complaint was resolved including reporting to the Monitoring and Evaluation Committee at least annually.

4) Any organization that is not in compliance will face a loss of funding both locally and from HUD. All HUD funded projects will have at least an annual review of the anti-discrimination policies along with their work to be a more diverse, equitable and inclusionary workplace and in providing services and housing that address disparities. The ranking tool that is used with all projects (new and renewals) has five questions worth a total of 32 points (33% of the total points available for RRH, 35% of total points available for PSH) that ask an agency to objectively report on their staffing, leadership and their participant outcomes. The questions also provide guidance on how to increase scores which addresses racial and other disparities while providing clear expectations to all projects.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area--New Admissions--General/Limited Preference--Moving On Strategy.
	NOFO Section V.B.1.g.
	You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.
	Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with--if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Dakota County CDA	36%	No	No

Metropolitan Council Housing Redevelopment Agency	8%	No	Yes
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1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	
	Describe in the field below:	
1.	steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or	
2.	state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.	

(limit 2,500 characters)

(1) The CoC has strong working relationships with all 6 PHAs within the CoC. The largest two PHAs within the CoC (Metro HRA and Dakota County CDA) are well integrated into the homeless response system. While one of the smaller PHAs within the CoC (Radius Health) does have a homeless preference, Dakota CDA and Metro HRA have not yet created a homeless preference. Steps the CoC is taking to encourage all PHAs to adopt homeless admission preferences include: (a) working with all PHAs to implement a Move On program within the PHA. The CoC pursued a Move On program with Metro HRA and the program was approved into Metro HRA's admin plan on 9/24/19. A referral process was put in place between Metro HRA and the CoC's CES. Due to the COVID-19 pandemic the connection of households to these vouchers was delayed. The CoC will have 5 vouchers available on an annual basis. The CoC worked with both Metro HRA and Dakota CDA to distribute Emergency Housing Vouchers (EHVs), a portion of which were offered as a Move On option for participants in Supportive Housing. Now that those PHAs have had experience with larger-scale Move On initiatives, implementing a similar program with any future funds will be simple. The CoC continues to work to expand the Move On program to other PHAs in the CoC. (b) In discussing lessons learned from the EHV program, a barrier PHAs identified in implementing a homeless preference is the extra capacity required to assist unhoused households through the PHA application, housing search process, and recertification requirements. The CoC is building a roster of Housing Stabilization Services (HSS) (a Medicaid-billable service) providers who can assist voucher holders with housing Transition and Sustaining Services. The CoC is also working with CE Access Points to train them on HSS and creating a referral flow to ensure every eligible client is connected. That way, the PHA will not need to have extra capacity in order to serve this population well.

(2) N/A

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	

Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:

1.	Multifamily assisted housing owners	Yes
2.	PHA	Yes
3.	Low Income Housing Tax Credit (LIHTC) developments	Yes
4.	Local low-income housing programs	Yes
	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry. NOFO Section V.B.1.g.	
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In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

1.	Emergency Housing Vouchers (EHV)	Yes
2.	Family Unification Program (FUP)	No
3.	Housing Choice Voucher (HCV)	Yes
4.	HUD-Veterans Affairs Supportive Housing (HUD-VASH)	Yes
5.	Mainstream Vouchers	No
6.	Non-Elderly Disabled (NED) Vouchers	No
7.	Public Housing	No
8.	Other Units from PHAs:	

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness. NOFO Section V.B.1.g.	
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1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	FUP, VASH, EHV

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV). NOFO Section V.B.1.g.	
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	Did your CoC coordinate with any PHA to apply for or implement funding provided for Housing Choice Vouchers dedicated to homelessness, including vouchers provided through the American Rescue Plan?	Yes
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1C-7e.1.	List of PHAs with Active MOUs to Administer the Emergency Housing Voucher (EHV) Program.	
	Not Scored—For Information Only	

	Does your CoC have an active Memorandum of Understanding (MOU) with any PHA to administer the EHV Program?	Yes
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If you select yes to question 1C-7e.1., you must use the list feature below to enter the name of every PHA your CoC has an active MOU with to administer the Emergency Housing Voucher Program.

PHA
Dakota County CDA
Metropolitan Coun...

1C-7e.1. List of PHAs with MOUs

Name of PHA: Dakota County CDA

1C-7e.1. List of PHAs with MOUs

Name of PHA: Metropolitan Council HRA

1D. Coordination and Engagement Cont'd

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1D-1.	Discharge Planning Coordination.	
	NOFO Section V.B.1.h.	

Select yes or no in the chart below to indicate whether your CoC actively coordinates with the systems of care listed to ensure persons who have resided in them longer than 90 days are not discharged directly to the streets, emergency shelters, or other homeless assistance programs.

1. Foster Care	Yes
2. Health Care	Yes
3. Mental Health Care	Yes
4. Correctional Facilities	Yes

1D-2.	Housing First—Lowering Barriers to Entry.	
	NOFO Section V.B.1.i.	

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	17
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	17
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

1D-2a.	Project Evaluation for Housing First Compliance.	
	NOFO Section V.B.1.i.	

You must upload the Housing First Evaluation attachment to the 4B. Attachments Screen.

	Describe in the field below:
1.	how your CoC evaluates every project—where the applicant checks Housing First on their project application—to determine if they are using a Housing First approach;
2.	the list of factors and performance indicators your CoC uses during its evaluation; and
3.	how your CoC regularly evaluates projects outside of your local CoC competition to ensure the projects are using a Housing First approach.

(limit 2,500 characters)

1) The CoC evaluates projects on at least a biennial basis, using the following tools and procedures, to ensure those that commit to a Housing First approach follow Housing First principles. (a) an evaluation takes place during the local CoC NOFO competition. Housing First implementation questions are included in the Letter of Intent form for renewal projects. (b) Outside of the local competition period, projects complete the HUD Housing First Assessment form and a Self Evaluation form developed by the CoC, which includes questions about their implementation of Housing First. (c) The CoC collects client satisfaction surveys to gather first-hand feedback regarding whether services are conducted using Housing First principles. (d) Monitoring and Evaluation Committee members meet 1:1 with each provider at least biennially to discuss strengths and weaknesses identified in the tools mentioned above.

2) (a) The CoC uses the factors created in the HUD Housing First Assessment tool (access & input, leases, services & housing, and project-specific standards. (b) The letter of intent and self evaluation include access/entry--focusing on the specific barriers our data has shown to contribute to disparities (i.e. requiring sobriety, compliance issues, and criminal justice involvement. Monitoring and Evaluation Committee members meet 1:1 with each CoC project each year to review project performance and policies. Technical Assistance will be provided to projects that are falling short of a satisfactory Housing First approach based on assessments and monitoring. Commitment and progress toward achieving the goals identified through the Technical Assistance process are integrated into reallocation policies and decision making.

3) The CoC completes monitoring visits twice per year with CoC providers to discuss project performance, offer technical assistance and guidance, and ensure fidelity to program standards and policies, including Housing First. The CoC also uses a client survey to gather client insight into whether the housing providers are following through on their Housing First commitments.

1D-3.	Street Outreach—Scope.	
	NOFO Section V.B.1.j.	

	Describe in the field below:
1.	your CoC's street outreach efforts, including the methods it uses to ensure all persons experiencing unsheltered homelessness are identified and engaged;
2.	whether your CoC's Street Outreach covers 100 percent of the CoC's geographic area;
3.	how often your CoC conducts street outreach; and
4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.

(limit 2,500 characters)

1) The CoC utilizes multiple strategies to ensure all person experiencing unsheltered homelessness are identified and engaged. The CoC covers a large geographic footprint, so it is essential to offer various forms of outreach. These forms include street outreach, institutional in-reach in places like schools and drop-in centers, as well as connection through the CoC website, 211, and postings in public spaces. To ensure accessibility of information, outreach workers employ a range of strategies including using large print, connecting with sign-language interpreters or Braille formats, and ensuring the client has access to information in other languages through interpreters and translated documents. In the larger city centers, street outreach and drop-in centers are largely utilized as the primary outreach model. In areas of the CoC where the population is more spread out, outreach includes tabling at local events and posting outreach availability at local community centers or libraries on set days and times. Oftentimes, people will contact outreach staff via phone, and Outreach staff will meet households where they are physically located.

2) 100% of the CoC geography is covered by street outreach, helping us to quickly identify and engage people experiencing homelessness..

3) Street outreach is conducted for all populations weekly at a minimum.

4) The CoC has established written standards which require outreach workers to target efforts to those least likely to request assistance and to connect in person whenever possible meeting and offering services where the household is comfortable as opposed to requiring the household to come to a specific location. Street outreach staff spend time building relationships with people who are unsheltered in order to build trust and continue offering voluntary services until they are ready to accept assistance. The CoC has a diverse team of street outreach workers, and sometimes people are more comfortable and willing to accept service from someone who shares an identity with them. The outreach workers understand this and will make internal referrals when they think a client may be more likely to engage with one of their teammates.

1D-4.	Strategies to Prevent Criminalization of Homelessness.	
	NOFO Section V.B.1.k.	

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:

	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	No
2.	Engaged/educated law enforcement	Yes	No
3.	Engaged/educated local business leaders	Yes	No
4.	Implemented community wide plans	Yes	No
5.	Other:(limit 500 characters)		

1D-5.	Rapid Rehousing–RRH Beds as Reported in the Housing Inventory Count (HIC) or Longitudinal Data from HMIS.	
	NOFO Section V.B.1.I.	

	HIC Longitudinal HMIS Data	2022	2023
Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	HIC	245	412

1D-6.	Mainstream Benefits–CoC Annual Training of Project Staff.	
	NOFO Section V.B.1.m.	

Indicate in the chart below whether your CoC trains program staff annually on the following mainstream benefits available for program participants within your CoC's geographic area:

	Mainstream Benefits	CoC Provides Annual Training?
1.	Food Stamps	Yes
2.	SSI–Supplemental Security Income	Yes
3.	SSDI–Social Security Disability Insurance	Yes
4.	TANF–Temporary Assistance for Needy Families	Yes
5.	Substance Use Disorder Programs	Yes
6.	Employment Assistance Programs	Yes
7.	Other (limit 150 characters)	
	Medicaid	Yes

1D-6a.	Information and Training on Mainstream Benefits and Other Assistance.	
	NOFO Section V.B.1.m	

Describe in the field below how your CoC:

1.	systemically provides up-to-date information on mainstream resources available for program participants (e.g., Food Stamps, SSI, SSDI, TANF, substance abuse programs) within your CoC's geographic area;
2.	works with project staff to collaborate with healthcare organizations, including substance abuse treatment and mental health treatment, to assist program participants with receiving healthcare services; and
3.	works with projects to promote SSI/SSDI Outreach, Access, and Recovery (SOAR) certification of program staff.

(limit 2,500 characters)

1) CoC provides monthly updates on mainstream benefit programs through CoC committee meetings and email distribution. The CoC partners with the State of Minnesota to offer a half day training on all mainstream benefit programs including but not limited to Food Stamps, SSI, and General Assistance on at least an annual basis. This training is offered free of charge to providers in the CoC. This is ongoing will offer it annually at a minimum. Vacancies for the state’s Housing Supports program (a PSH housing benefit) are filled through the CoC’s CES. Projects are made aware of availability through a weekly phone call.

2) The CoC works closely with the Minnesota Department of Human Services and CoC providers to increase the collaboration between agencies accessing a relatively new Medicaid benefit, Housing Stabilization Services, and ensure that CoC participants are able to access healthcare services needed for housing stability. CoC membership also includes several mental health organizations that participate in the Governing Board and provide PSH.

3) The CoC coordinates with the state of Minnesota to identify providers with the CoC who can or do contract with the State to be trained and certified with SOAR. These contracted providers provide hands on application assistance to people are homeless or at risk of homelessness to apply for Social Security benefits. All of the housing and service providers in the CoC are given an updated list of SOAR certified providers each year.

1D-7.	Increasing Capacity for Non-Congregate Sheltering.	
	NOFO Section V.B.1.n.	

Describe in the field below how your CoC is increasing its capacity to provide non-congregate sheltering.

(limit 2,500 characters)

In 2023, SMAC had a 3% increase in overall shelter beds from 575 to 590, and an 18% increase in non-congregate beds from 242 to 295. This is due to an increased focus on unsheltered homelessness, including increased advocacy for resources and coordination among metro counties. Having client-centered, low-barrier shelter options is vital to decreasing unsheltered homelessness, and it also helps prevent the spread of infections diseases and protects medically vulnerable individuals. Local jurisdictions within the CoC have dedicated levy dollars and other discretionary funding to provide emergency shelter, and the CoC is supporting applications for shelter capital dollars from MN DHS. Also vital to non-congregate sheltering is service provision to increase the flow out of shelter into permanent housing, which provides more available shelter beds. In all of our shelters, local housing service providers are using Medicaid reimbursable services, Housing Stabilization Services, to provide intensive, hands-on assistance to people who are homeless to quickly move them from emergency shelter to housing. Shelter providers are also using a state disability benefit called Housing Support to pay for permanent housing when clients exit shelter. This strategy to increase exits to permanent housing allows more people to access emergency shelter.

ID-8.	Partnerships with Public Health Agencies—Collaborating to Respond to and Prevent Spread of Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC effectively collaborates with state and local public health agencies to:	
	1. develop CoC-wide policies and procedures to respond to infectious disease outbreaks; and	
	2. prevent infectious disease outbreaks among people experiencing homelessness.	

(limit 2,500 characters)

The CoC has established strong partnerships with Public Health departments at the local and state level.

1) The CoC collaborates closely with the Incident Command Structure Unit and the Highly Impacted Settings Team at MN Dept. of Health (MDH). These units were established to support homeless facilities and other congregate settings. The CoC coordinates with MDH to develop and monitor COVID-19 policies & procedures for homeless service providers related to testing, case reporting, mitigation strategies, and access to therapeutics. Building off the partnership established early into COVID-19, the CoC has extended its work with MDH to address other infectious diseases, such as monkeypox through updates and revisions to policies and procedures.

2) The CoC coordinates with MDH to access supports for homeless facilities in COVID-19 prevention measures (e.g., social distancing, PPE, ventilation) and hands-on support to facilities when they have active COVID-19 cases. As new guidance for preventing COVID-19 and managing outbreaks is developed/updated, the CoC helps to share this with shelters and other congregate settings. The CoC makes sure that all agencies are aware of how they can access a large supply of free COVID-19 tests, personal protective equipment, and supplies for on-site isolation and quarantine through MDH. MDH and local public health agencies have also supported free on-site COVID-19 testing and vaccination clinics at homeless settings and provided vaccine incentives to people experiencing homelessness. Grantees receive education and technical assistance from MDH on how vaccines work, how they were tested, when is your time to get a vaccine, and motivational interview teams are provided to meet people where they are with what they're hearing about vaccines and concerns and move them toward evidence-based practices. These activities have expanded beyond COVID to include other vaccine preventable diseases. MDH also provides grants to support HIV prevention, training, and early intervention services for people experiencing homelessness.

ID-8a.	Collaboration With Public Health Agencies on Infectious Diseases.	
	NOFO Section V.B.1.o.	
	Describe in the field below how your CoC:	
	1. shared information related to public health measures and homelessness, and	
	2. facilitated communication between public health agencies and homeless service providers to ensure street outreach providers and shelter and housing providers are equipped to prevent or limit infectious disease outbreaks among program participants.	

(limit 2,500 characters)

1) The MN Dept of Health (MDH) now has a permanent team in the emerging infectious disease unit who provides guidance & resources for homeless programs as well as correctional and higher education settings. The CoC engages MDH on at least a quarterly basis through their webinar series on public health and homelessness. Webinar topics have included harm reduction and homelessness, asyphilis and homelessness, etc. When health issues emerge (such as MPOX), MDH works with the Minnesota Interagency Council on Homelessness and CoCs around communication. The CoC has connected service providers with MDH so that they will receive regular and timely infectious disease information directly from MDH through their GovDelivery listserv. MDH’s work provided directly to service providers includes webinars and conference meetings where MDH to shares infectious disease updates (e.g., surveillance data, guidance, etc.) & learns of local public health concerns. MDH holds meetings with subgroups (e.g., outreach workers, youth shelters) to offer guidance & address specific concerns. MDH has several current and upcoming grants to promote the health of people experiencing homelessness—which the CoC helps to share with service providers.

2) The CoC identifies and maintains strong connections with State and local public health agencies, as well as other key health service providers, to ensure that service providers have quick access and timely information about infectious diseases and related resources. MDH has contracts with two healthcare partners within the CoC , Odom Medical Group and M Health Fairview, to provide vaccine clinics for homeless service providers and other congregate settings, like supportive housing, across the state through an online request form. MDH also has an Infectious Disease Trusted Messenger Program for People Experiencing Homelessness. This program provides training and stipends to people experiencing homelessness to provide peer education and support for COVID-19 and other routine vaccinations. Through CoC engagement, Local Public Health also regularly attends CoC meetings and involves social services in community planning. They have also been very helpful in sharing program information with families, such as prevention.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.B.1.p.	
	Describe in the field below how your CoC’s coordinated entry system:	
	1. covers 100 percent of your CoC’s geographic area;	
	2. uses a standardized assessment process; and	
	3. is updated regularly using feedback received from participating projects and households that participated in coordinated entry.	

(limit 2,500 characters)

The CoC has had an active Coordinated Entry System (CES) in place since January 2015.

1) The CoC has access points that cover 100% of the CoC region. The CoC has multiple CE Access Points located within each of the five counties to ensure coverage, to ensure that people are able to be served by agencies familiar to them, and that they can easily access in-person help if desired. The definition and expectations of an Access Point are detailed in the CoC's CES policies. At a minimum, Access Points must administer the CES assessment and enter data into HMIS and refer the household assessed to the Priority Pool. The CoC's CES Committee reviews Access Point capacity and performance on a biannual basis to assess if additional access is needed somewhere in the region.

2) The CoC has developed a CoC specific assessment tool that is comprehensive of the local needs of people experiencing homelessness. Questions in the assessment identify vulnerabilities, barriers, and strengths to determine the prioritization of people most in need of assistance. Households are prioritized on the "by name list" based on length of time homeless. After the "by name list" has been prioritized using these criteria, the Case Consultation teams review households at the top of the list to ensure those with the most significant barriers are served first in a program that will best fit their needs.

3) The CoC CES Committee meets monthly and consists of housing providers, county staff, CE staff, and CE assessors. The Directors Council meet twice per month and is made up of 12-15 people with lived experience navigating a homeless response system. Both groups work together to draft and update policies, procedures, assessment tools, and other documents needed to support the work of SMAC CES. Both groups also analyze CE data and trends and provide feedback and recommendations for changes to the CES. Documents are brought to the Governing Board as needed for approval. Stakeholders, including providers and participants, are also encouraged to submit feedback via an online form available at smacmn.org.

1D-9a.	Program Participant-Centered Approach to Centralized or Coordinated Entry.	
	NOFO Section V.B.1.p.	

	Describe in the field below how your CoC's coordinated entry system:	
	1. reaches people who are least likely to apply for homeless assistance in the absence of special outreach;	
	2. prioritizes people most in need of assistance;	
	3. ensures people most in need of assistance receive permanent housing in a timely manner, consistent with their preferences; and	
	4. takes steps to reduce burdens on people using coordinated entry.	

(limit 2,500 characters)

1) The CoC has established that all street outreach teams within the CoC are Coordinated Entry Access Points; enabling outreach workers to reach and immediately provide CES assessments those least likely to apply for homeless assistance. Outreach workers connect with households that are least likely to apply for homeless assistance by meeting and offering the CES assessment where the household is comfortable as opposed to requiring the household to come to a specific location. CoC outreach workers maintain outreach to encampments and other known locations and also offer regular office hours at locations where people experiencing homelessness are known to frequent, like libraries.

2) Households are prioritized on the “by name list” based on length of time homeless. After the “by name list” has been prioritized using these criteria, the Case Consultation teams review households at the top of the list to ensure those with the most significant barriers are served first in a program that will best fit their needs.

3) During Case Consultation, the households most in need of assistance are discussed and given referrals according to their preferences. If CES does not have any openings consistent with their preferences at that time, creative problem-solving is used to connect them with other housing options such as the State’s Housing Support Program, or non-homeless housing for people with disabilities.

4) To reduce burdens on households, our CoC was the first CoC in MN to vote to stop using the VI-SPDAT. The CoC participated in the HUD Racial Equity Initiative, and through that process, our team found that some site-based programs’ property management companies were putting undue burdens on households by requiring everyone with rental barriers to first get a denial letter, and then submit an appeal in order to get accepted to the unit. The CoC organized meetings with property management, the developer, the service provider, Coordinated Entry staff, and local county staff to explore solutions. These meetings resulted in increased understanding by property managers of the difficulties people experience in getting into their housing, and concrete steps to decrease the length of time and back-and-forth required to get individuals housed.

1D-9b.	Informing Program Participant about Rights and Remedies through Centralized or Coordinated Entry–Reporting Violations.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC through its centralized or coordinated entry:	
1.	affirmatively markets housing and services provided within the CoC’s geographic area and ensures it reaches all persons experiencing homelessness;
2.	informs program participants of their rights and remedies available under federal, state, and local fair housing and civil rights laws; and
3.	reports any conditions or actions that impede fair housing choice for current or prospective program participants to the jurisdiction(s) responsible for certifying consistency with the Consolidated Plan.

(limit 2,500 characters)

1) The CoC markets housing and services to all people experiencing a housing crisis through Access Points located throughout the CoC. The geographic and cultural diversity of Access Points help to promote greater awareness and accessibility across the CoC to housing and services. Outreach workers and CE Access Points are trained on Fair Housing, anti-discrimination, and cultural competency principles. The CoC regularly updates Access Points and outreach workers on what is available through Coordinated Entry and housing and service opportunities provided by mainstream or disability providers. The CoC provides training on CE to organizations likely to run in to or serve people experiencing homelessness such as school staff, libraries, county staff, law enforcement, and foodshelves to ensure everyone knows how to access assistance and where to direct people they may be working with. The CoC accesses translation services where needed to ensure limited English proficiency is not a barrier to access services.

2) Support service workers provide assistance with apartment applications and appeals as necessary. They help advocate for fair housing laws to be followed, and report to their supervisor when they think the client’s rights have been violated. The CoC partners with Legal Aid to support and represent clients with any Fair Housing concerns. When the CoCs observes unfair treatment, we come together, advocate for change, follow-up, etc.3) To proactively monitor for fair housing choice, the CoC tracks data for returned referrals and reports these to committees that include jurisdictional partners. The CoC also participates in local planning meetings that serve as the place for LIHTC properties to present their projects for CoC approval. This allows for this data to be shared with local communities that are positioned to approve/push developers to consider their policies as it relates to referral outcomes for those coming from CE. This year, the CoC has set programmatic thresholds outlining the number of exits to not permanent outcomes within our CoC Program Scoring Tool, alongside tracking this for BIPOC households.

1D-10.	Advancing Racial Equity in Homelessness—Conducting Assessment.	
	NOFO Section V.B.1.q.	

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	06/01/2023

1D-10a.	Process for Analyzing Racial Disparities—Identified Racial Disparities in Provision or Outcomes of Homeless Assistance.	
	NOFO Section V.B.1.q.	

Describe in the field below:	
1.	your CoC’s process for analyzing whether any racial disparities are present in the provision or outcomes of homeless assistance; and
2.	what racial disparities your CoC identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

1) The CoC analyzes racial disparities using a process developed by C4 and the SPARC program. This process uses quantitative data (HMIS data, disaggregated by race) to identify disparities occurring in key decision points within our homeless responses system (i.e who was assessed by CE, how quick and successful were referrals, who increased income, who exited to permanent housing, who returned to homelessness). In addition, the CoC collects qualitative data by conducting focus groups, 1:1 interviews, and client satisfaction surveys. We use this data to dig deeper into WHY disparities are occurring and identify strategies for improving outcomes.

2) Through qualitative data collected by the CoC's Racial Equity Team and the Directors Council (leadership group for people with lived experience of homelessness), the CoC identified a disparity that cannot be captured in HMIS: the number of people who do NOT receive referrals to projects due to their criminal history. It was determined that because Coordinated Entry is supposed to only send eligible referrals, the percentages of denials due to criminal history were skewed as the data set was too small. In addition, through the process named above and analyzing quantitative data from HMIS, the CoC determined that BIPOC households were more likely to be exited due to loss of contact, and less likely to have their information up-to-date in the Priority Pool.

1D-10b.	Implemented Strategies that Address Racial Disparities.	
	NOFO Section V.B.1.q.	

Select yes or no in the chart below to indicate the strategies your CoC is using to address any racial disparities.

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	Yes
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes
5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	Yes
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
	Other:(limit 500 characters)	
12.		

1D-10c.	Implemented Strategies that Address Known Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below the steps your CoC is taking to address the disparities identified in the provision or outcomes of homeless assistance.

(limit 2,500 characters)

The CoC has taken multiple steps to improve racial equity in the provision and outcome of assistance.

(a) The CoC’s Directors Council is comprised of people currently experiencing homelessness or that have experienced homelessness; 90% of these members identify as persons of color. The Council is directly involved in policy development, selecting Governing Board and Monitoring and Evaluation Committee members, and leading community conversations about needed changes in the homeless response system. Integrating people with lived experience into the daily workings and decisions of the CoC creates ongoing opportunities to increase racial equity strategies across the CoC.

(b) Increasing the number of culturally specific agencies providing services in the CoC is a vital strategy. In this year’s CoC application, one of the new providers, MN One Stop, is a BIPOC led and staffed agency.

(c) Due to concerns we heard from our Tribal partners (later confirmed in a C4 study), the CoC was among to first CoC’s in MN to discontinue using the VI-SPDAT as the assessment tool in March 2020 and replaced it with a community-specific tool targeting local needs.

(d) The CoC has followed the practice of hiring staff that share the identities and experiences of those disproportionately impacted by homelessness in our CoC. The CoC Coordinator and one of the Coordinated Entry Planners are both black women with lived experience of homelessness, and the other Coordinated Entry Planner is a queer woman; racial equity is of the utmost importance to all three staff, as well as the CoC Governing Board.

(e) The CoC participated in the HUD Racial Equity Initiative, where our Racial Equity Team identified a need to focus on engaging property managers/landlords to reduce their rental screening criteria, as BIPOC households are disproportionately affected by strict criminal and rental screening. So far this year, the CoC has met with three property management groups to discuss the issues caused by their screening processes. In all cases, property management were unaware of the issue, and were willing to accept more referrals and smooth out the appeals process for individuals who do not meet their rental screening criteria. The result has been that Coordinated Entry does not have to screen for criminal history prior to referral, and the CoC has seen a reduction in denials from all three since those interventions.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	

Describe in the field below:

1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and
2.	the tools your CoC uses.

(limit 2,500 characters)

1) The CoC looks at Coordinated Entry data and Housing Outcomes data disaggregated by race on a quarterly basis to track progress of all programs in the CoC toward eliminating disparities in our system. Most of the measures the CoC uses are connected to decision points in our homeless response system—enabling us to know where we need to target attention and change—where our system is creating disparities. The CoC uses the following measures, disaggregated by race, to track progress on preventing/eliminating disparities: (a) CES denials, (b) CES reasons for denial, (c) time from CES referral to housing, (d) increased income, (e) exits to permanent housing, (f) returns to homelessness, (g) total persons homeless (PIT) as compared to demographics of US Census general population demographics. Based on the findings from these measures, recommendations for changes to training, policies, or procedures are made to the relevant parties, and support in making those changes is offered by the CoC. All measures above are conducted on a system-wide and a provider by provider basis.

2) (a) The CoC uses the SMAC CE Reporting Tool to track HMIS data on housing outcomes, access, and referrals by race. (b) The CoC worked with C4 (SPARC program) and ICA (HMIS administrator) to develop a racial equity “decision points” and “system performance” report that allows us to track measures d-g (above) on a quarterly basis. (c) The CoC’s project scoring tool includes measures a, c, d, e, and f (above) and also scores projects the percentage of an organization’s staff and board/leadership who identify as Black, Indigenous or People of Color (BIPOC), and/or as LGBTQ+, and/or have experienced homelessness. Racial equity measures constitute 33% of the points that a project can earn on the project scoring tool.

1D-11.	Involving Individuals with Lived Experience of Homelessness in Service Delivery and Decisionmaking—CoC’s Outreach Efforts.	
	NOFO Section V.B.1.r.	

Describe in the field below your CoC’s outreach efforts (e.g., social media announcements, targeted outreach) to engage those with lived experience of homelessness in leadership roles and decision making processes.
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(limit 2,500 characters)

The CoC's Director's Council has been active since February 2020. The Directors Council is a nationally-recognized, award-winning group of people with lived experience of homelessness who are integrated into every part of CoC decision-making. Directors Council members hold leadership and decision-making roles on the Governing Board and all CoC committees – including the Monitoring and Evaluation Committee which reviews and ranks all CoC project applications. The Directors Council also elects all Governing Board and Monitoring and Evaluation Committee members, and conducts initial review and signs off on all CoC policy changes and initiatives put forth by the CoC. On an at least annual basis, the Directors Council actively seeks new members to participate in all levels of the CoC. The CoC uses flyers, targeted outreach, personal invitations by case managers and outreach workers, the CoC website, social media announcements, and word-of-mouth (including via current Director's Council members) to engage those with lived experience of homelessness in leadership roles and decision-making processes. The CoC also announces all staff positions to the Directors Council and supports them in the application process if requested. Through this process, the former Chair of the Directors Council was hired to be the CoC Coordinator for the SMAC region, and the former Vice Chair of the Directors Council was hired as a Coordinated Entry Planner. The Directors Council acts as a launch pad for members to explore other leadership opportunities both inside of and outside of the CoC. Since its inception, eight Directors have gone on to participate in other lived experience groups and leadership opportunities.

1D-11a.	Active CoC Participation of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

You must upload the Letter Signed by Working Group attachment to the 4B. Attachments Screen.

Enter in the chart below the number of people with lived experience who currently participate in your CoC under the four categories listed:

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	12	1
2.	Participate on CoC committees, subcommittees, or workgroups.	5	1
3.	Included in the development or revision of your CoC's local competition rating factors.	5	0
4.	Included in the development or revision of your CoC's coordinated entry process.	12	0

1D-11b.	Professional Development and Employment Opportunities for Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below how your CoC or CoC membership organizations provide professional development and employment opportunities to individuals with lived experience of homelessness.

(limit 2,500 characters)

The CoC promotes professional development and employment opportunities for people with lived experience of homelessness in the following ways:

(1) The CoC supports Director’s Council (DC) members (comprised entirely of people with lived experience of homelessness) with their involvement in all core CoC functions, including: project monitoring and evaluation, grant writing, meeting facilitation, organizational governance, advocacy, etc. In addition, DC members actively participate in hiring and selection processes for SMAC staff and Governing Board membership. In 2022, DC members helped to lead the hiring processes of the CoC Coordinator position AND a Coordinated Entry Planner position. This leadership, in part, resulted in both positions being filled by persons with lived experience of homelessness.

(2) The CoC convenes all CoC projects at least biennially to encourage the sharing of promising practices. This activity provides opportunities for providers to learn from each other. Existing strategies include providers offering opportunities for continuing education, skill-based training, and internships.

(3) The CoC collects information and scores providers based upon the number and percentage of staff AND the number and percentage of organizational leadership (board/executive staff) with lived experience of homelessness. This step helps to set a norm and expectation that organizations should be led by people who have experienced homelessness—which in turn, helps to promote active steps within each provider to invest in the professional development and employment of people with lived experience of homelessness.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
NOFO Section V.B.1.r.		
Describe in the field below:		
1.	how your CoC routinely gathers feedback from people experiencing homelessness;	
2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and	
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.	

(limit 2,500 characters)

1) The SMAC CoC routinely gathers information and feedback via the Director's Council (DC), comprised of people with lived experience of homelessness, who meet twice monthly. The DC's work ranges from drafting updates to Coordinated Entry assessment questions, to analyzing HMIS data on racial disparities and brainstorming interventions, to approving new policy or procedure language to be sent to the CoC Governing Board. This group provides a feedback loop of on-going dialogue within the CoC, and nothing gets approved by the CoC Governing Board without being approved by the DC first. In addition, the DC works in conjunction with other CoC committees to make recommendations to the Governing Board on new initiatives to pursue. The Governing Board considers the DC to be an executive committee, so their recommendations carry considerable weight.

2) (a) Client satisfaction survey: the DC designs the survey, collected twice per year from CoC and ESG recipients, and reviewed by Monitoring and Evaluation Committee (M&E) (which includes people with lived experience). The survey focuses on the strengths and weaknesses of the program, whether the provider is following CoC expectations around anti-discrimination and Housing First practices, the quality of communication and care from the provider, and whether the client's needs are being met. (b) Focus groups: the CoC conducts focus groups at least annually to collect qualitative data on program performance and quality. The focus groups are led by DC members to help create the safe space necessary for people to share. The results of the focus groups are reviewed with the M&E to inform program performance improvement plans.

3) One of the challenges raised by people with lived experience is the difficulty in finding housing for people with rental barriers. In order to address this challenge, the CoC is convening meetings with developers, property management companies, service providers, and county staff to ensure that people with the longest times homeless and the most severe needs are able to access housing in our CoC. These meetings have resulted in changes to referral and application procedures to reduce of application denials. The CoC also ensures that people with lived experience sit at each planning and decision-making table, including helping with project prioritization, grant reviewing, and Monitoring and Evaluation, funding decisions, and hiring.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	
	Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:	
	1. reforming zoning and land use policies to permit more housing development; and	
	2. reducing regulatory barriers to housing development.	

(limit 2,500 characters)

1) The CoC consists of five counties that are the suburbs for the cities of St. Paul and Minneapolis. Some of these counties are consistently listed as the wealthiest counties in the nation and have a history of extreme land use policies, such as minimum requirements of acreage (2 acres or more) for single family lots. The CoC has been successful recently in getting an emergency shelter sited in Washington County. To get this shelter sited, the CoC had to navigate zoning, land use policies, and NIMBYism from community members and leaders. CoC members actively work to engage and develop partnerships with local governments and businesses. Business owners have been strong allies for the development of affordable housing as they can't hire workers as there is no affordable housing or public transportation in most of the region. The CoC works with multiple housing developers to promote development of affordable housing and designated units for people experiencing homelessness. As part of this work, we learn of regulatory barriers (including impact fees and administrative/procedural barriers). CoC members who live/work in communities creating such barriers are active in advocating to local elected officials and government administrative staff. The CoC convenes homeless planning committees in each county within the CoC to raise such barriers and to identify strategies.

2) The CoC has helped this year's bonus project (which is part of a 42-unit supportive housing development). The CoC brought the developer associated with this project into city council meetings to discuss new project development, and despite initial opposition, this project is supported by local government (city and county). The CoC also is taking steps to maximize the developments we have been able to obtain through the LIHTC. Once the properties get built, in order to protect their investment, developers are hiring property management companies who screen households based on criminal history and rental history, which disproportionately affects people of color. The CoC is meeting with property management companies, developers, service providers, and local leaders together to educate on harmful practices and brainstorm strategies to increase access for people with criminal history and rental history barriers.

1E. Project Capacity, Review, and Ranking–Local Competition

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	07/17/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	07/26/2023

1E-2.	Project Review and Ranking Process Your CoC Used in Its Local Competition. We use the response to this question and the response in Question 1E-2a along with the required attachments from both questions as a factor when determining your CoC’s eligibility for bonus funds and for other NOFO criteria below. NOFO Section V.B.2.a., 2.b., 2.c., 2.d., and 2.e. You must upload the Local Competition Scoring Tool attachment to the 4B. Attachments Screen. Select yes or no in the chart below to indicate how your CoC ranked and selected project applications during your local competition:	
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1.	Established total points available for each project application type.	Yes
2.	At least 33 percent of the total points were based on objective criteria for the project application (e.g., cost effectiveness, timely draws, utilization rate, match, leverage), performance data, type of population served (e.g., DV, youth, Veterans, chronic homelessness), or type of housing proposed (e.g., PSH, RRH).	Yes
3.	At least 20 percent of the total points were based on system performance criteria for the project application (e.g., exits to permanent housing destinations, retention of permanent housing, length of time homeless, returns to homelessness).	Yes
4.	Provided points for projects that addressed specific severe barriers to housing and services.	Yes

5.	Used data from comparable databases to score projects submitted by victim service providers.	Yes
6.	Provided points for projects based on the degree the projects identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	Yes

1E-2a.	Scored Project Forms for One Project from Your CoC's Local Competition. We use the response to this question and Question 1E-2. along with the required attachments from both questions as a factor when determining your CoC's eligibility for bonus funds and for other NOFO criteria below.	
	NOFO Section V.B.2.a., 2.b., 2.c., and 2.d.	

You must upload the Scored Forms for One Project attachment to the 4B. Attachments Screen.
 Complete the chart below to provide details of your CoC's local competition:

1.	What were the maximum number of points available for the renewal project form(s)?	106
2.	How many renewal projects did your CoC submit?	17
3.	What renewal project type did most applicants use?	PH-PSH

1E-2b.	Addressing Severe Barriers in the Local Project Review and Ranking Process.	
	NOFO Section V.B.2.d.	

Describe in the field below:

1.	how your CoC analyzed data regarding each project that has successfully housed program participants in permanent housing;
2.	how your CoC analyzed data regarding how long it takes to house people in permanent housing;
3.	how your CoC considered the specific severity of needs and vulnerabilities experienced by program participants preventing rapid placement in permanent housing or the ability to maintain permanent housing when your CoC ranked and selected projects; and
4.	considerations your CoC gave to projects that provide housing and services to the hardest to serve populations that could result in lower performance levels but are projects your CoC needs in its geographic area.

(limit 2,500 characters)

The CoC collects and analyzes data for the review and ranking process through the PROJECT SCORE TOOL, the PROJECT REVIEW and the RANKING PROCESS.

1) The PROJECT SCORE TOOL measures the extent to which participants enrolled in projects are successfully housed in permanent housing through a Housing Stability measure (exits to permanent housing). This measure looks at data from the project's APR (Q23c) where the percent of participants who successfully remain in housing or exit to another permanent housing residence within the grant period. Performance for housing stability is also scored through a racial equity lens through an HMIS report that provides demographic exit details.

2) The PROJECT SCORE TOOL measures the length of time from CES referral to housing entry using the CoC's CES report.

3) The CoC considers severity of needs and vulnerabilities through the PROJECT SCORE TOOL, the PROJECT REVIEW, and the RANKING PROCESS. Through these three processes steps the CoC considers the following: low or no income, disability including substance use, history of domestic violence, chronic homelessness, and if the project fills a unique need within the region. The PROJECT SCORE TOOL awards points for PSH projects that dedicate at least 79% of their beds to Chronically Homeless or Dedicated Plus. To earn maximum points on this scoring criteria the project must dedicate at least 90% of their beds to serving Chronically Homeless or Dedicated Plus. In addition, the CoC awards points to projects that successfully increase total income not just earned income. During the PROJECT REVIEW members of the Monitoring and Evaluation Committee talk with each project to understand any circumstances during the year that led to a lower performance score. Discussions include the vulnerability of current households served such as substance use and ability to increase income. In addition, Monitoring and Evaluation members check in with projects about intake processes and how providers are screening for vulnerabilities at intake.

4) In the RANKING PROCESS, Monitoring and Evaluation members share relevant content from the project check ins. Vulnerabilities of participants in the project and special circumstances the provider experienced throughout the year identified during the check ins are considered when determining final ranking.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	

Describe in the field below:	
1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.

(limit 2,500 characters)

1) In our CoC, the biggest disparities exist for Black and Indigenous households. Black households make up 4% of the general population, but 27% of households entering Coordinated Entry. Indigenous households make 0.1% of the general population, but 3% of households in Coordinated Entry. Multiracial individuals make up 5% of the general population, but 8% of those entering Coordinated Entry. And Hispanic households make up 5% of the general population, and 9% of households in Coordinated Entry. In 2020 the CoC established a Directors Council that is comprised of people with lived experience of homelessness; 90% of these members identify as persons of color. The Directors Council maintains representation on the Governing Board and involvement in all committees – including the Monitoring and Evaluation Committee which reviews and ranks all CoC project applications. The Directors Council also elects all Governing Board and Monitoring and Evaluation Committee members, and signs off on all policy changes and initiatives put forth by the CoC. Reps from the Directors Council were involved in creating recommended changes to this year's scoring tool as part of the Monitoring and Evaluation Committee. The full Directors Council then had a formal review and supported the changes in the scoring tool.

2) The Directors Council appointed four members to sit on the 2023 ranking committee. Reps from the Directors Council are empowered to make the final motion to support the ranking order of projects at the Ranking Committee meeting. The Ranking Committee consists of 10 people – 4 people have lived experience, 4 identify as Black, 5 identify as white, and 1 identifies as Native.

3) The CoC's NOFO Scoring Tool includes 9 measures (staff composition, organizational leadership, BIPOC increase in income, BIPOC denials of CES referrals, eligibility barriers for BIPOC HHs, early exits of BIPOC households, existence of Language supports, BIPOC exits to permanent housing, and BIPOC returns to homelessness). These measures are intended to identify project performance in preventing or eliminating disparities. The measures comprise 33% of overall points for PSH providers and 35% of overall points for RRH providers.

1E-4.	Reallocation—Reviewing Performance of Existing Projects.
	NOFO Section V.B.2.f.
	Describe in the field below:
1.	your CoC's reallocation process, including how your CoC determined which projects are candidates for reallocation because they are low performing or less needed;
2.	whether your CoC identified any low performing or less needed projects through the process described in element 1 of this question during your CoC's local competition this year;
3.	whether your CoC reallocated any low performing or less needed projects during its local competition this year; and
4.	why your CoC did not reallocate low performing or less needed projects during its local competition this year, if applicable.

(limit 2,500 characters)

1) The CoC has established policies to guide the local NOFO competition within the region. The reallocation policy is included in these policies and states: Voluntary reallocation will always be fully explored first from all renewal projects. If voluntary reallocation does not establish enough funding to create a sustainable project, the CoC will consider all projects scoring in the bottom 1/3 of the ranking to be eligible for consideration for Reallocation. Factors the CoC uses to determine whether to involuntarily reallocate funds include: (a) severity of underperformance, (b) prominence/history of underperformance, (c) willingness/ability to improve underperformance, (d) progress made with corrective action plans—if applicable. The CoC Governing Board approved the policies, including the reallocation policy, on 8/17/21.

2) The CoC identified the 5 projects that scored into the bottom 1/3 of projects scored. The CoC also received notice of interest in voluntary reallocation from one project after requesting Letters of Interest for renewal funding from existing projects.

3) The Ranking Committee agreed to move forward with the voluntary reallocation of one project.

4) Our lowest scoring (by percentage of points possible) projects did not have past history of underperformance and did not have egregious underperformance. For this reason, these projects did not face reallocation. In addition to ranking these projects towards the end of the project list, we have communicated the probability of reallocation in the next competition if performance does not improve.

1E-4a.	Reallocation Between FY 2018 and FY 2023.	
	NOFO Section V.B.2.f.	

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	Yes
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1E-5.	Projects Rejected/Reduced—Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

1.	Did your CoC reject any project application(s) submitted for funding during its local competition?	No
2.	Did your CoC reduce funding for any project application(s) submitted for funding during its local competition?	No
3.	Did your CoC inform applicants why your CoC rejected or reduced their project application(s) submitted for funding during its local competition?	No
4.	If you selected Yes for element 1 or element 2 of this question, enter the date your CoC notified applicants that their project applications were being rejected or reduced, in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	

1E-5a.	Projects Accepted–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Accepted attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	08/31/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

	Does your attachment include: 1. Project Names; 2. Project Scores; 3. Project accepted or rejected status; 4. Project Rank—if accepted; 5. Requested Funding Amounts; and 6. Reallocated funds.	Yes
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1E-5c.	Web Posting of CoC-Approved Consolidated Application 2 Days Before CoC Program Competition Application Submission Deadline.	
	NOFO Section V.B.2.g. and 24 CFR 578.95.	
	You must upload the Web Posting–CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC posted the CoC-approved Consolidated Application on the CoC’s website or partner’s website—which included: 1. the CoC Application; and 2. Priority Listings for Reallocation forms and all New, Renewal, and Replacement Project Listings.	09/25/2023
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1E-5d.	Notification to Community Members and Key Stakeholders that the CoC-Approved Consolidated Application is Posted on Website.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.	

	Enter the date your CoC notified community members and key stakeholders that the CoC-approved Consolidated Application was posted on your CoC’s website or partner’s website.	09/25/2023
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2A. Homeless Management Information System (HMIS) Implementation

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2A-1.	HMIS Vendor.	
	Not Scored—For Information Only	

	Enter the name of the HMIS Vendor your CoC is currently using.	WellSky
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2A-2.	HMIS Implementation Coverage Area.	
	Not Scored—For Information Only	

	Select from dropdown menu your CoC’s HMIS coverage area.	Statewide
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2A-3.	HIC Data Submission in HDX.	
	NOFO Section V.B.3.a.	

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/26/2023
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2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

	In the field below:	
1.	describe actions your CoC and HMIS Lead have taken to ensure DV housing and service providers in your CoC collect data in HMIS comparable databases;	
2.	state whether DV housing and service providers in your CoC are using a HUD-compliant comparable database—compliant with the FY 2022 HMIS Data Standards; and	

3. state whether your CoC's HMIS is compliant with the FY 2022 HMIS Data Standards.

(limit 2,500 characters)

1) With support from the CoC, Minnesota’s statewide coalition for victim-service providers (VSPs), Violence Free MN, led a grant-funded initiative to assist VSPs in assessing their software vendors. The goal was to assess whether their available databases were truly HMIS comparable databases. Violence Free MN staff also liaised with vendors directly. Staff from the HMIS Lead Agency were actively involved in this initiative, providing guidance with respect to HMIS data standards. HMIS staff participated in meetings with VSPs and funders as needed. The HMIS Lead Agency continues to engage with Violence Free Minnesota, working with a new position funded through a grant from the Office of Justice Programs (MN Department of Public Safety). This new role aims to identify data collection, technology, and privacy barriers for VSPs and evaluate how these barriers may have prevented VSPs from obtaining sufficient funding. With this partnership between the statewide coalition and HMIS Lead, ICA agreed to provide technical guidance for VSPs via Helpdesk as they work to ensure compliance (while maintaining clear separation of client data; VSP data is not in HMIS nor shared with the HMIS lead directly). This will benefit the CoC by continuing to develop partnerships between the HMIS Lead and VSPs. The CoC is meeting with arecently formed cohort of Joint TH/RRH grantees in partnership between the local HUD Field Office, the HMIS Lead. While not limited to projects serving victims of domestic violence, there are several VSPs grantees in this cohort, which has provided a unique opportunity for collaboration, learning, and support.

2) Yes, our DV housing/service providers are using HUD-compliant comparable databases – compliant with the FY 2022 HMIS Data Standards.

3) Yes, our CoC’s HMIS is compliant with the 2022 HMIS Data Standards.

2A-5.	Bed Coverage Rate–Using HIC, HMIS Data–CoC Merger Bonus Points.	
	NOFO Section V.B.3.c. and V.B.7.	

Enter 2023 HIC and HMIS data in the chart below by project type:

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	590	95	410	82.83%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	188	63	122	97.60%
4. Rapid Re-Housing (RRH) beds	412	12	400	100.00%
5. Permanent Supportive Housing (PSH) beds	840	0	700	83.33%
6. Other Permanent Housing (OPH) beds	710	0	585	82.39%

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.	
	NOFO Section V.B.3.c.	
	For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:	
1.	steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and	
2.	how your CoC will implement the steps described to increase bed coverage to at least 85 percent.	

(limit 2,500 characters)

1. Emergency Shelter – Shelter has expanded in the CoC over the past 3 years, and not all funders have required HMIS for these shelter beds. The CoC will conduct 1:1 outreach to each emergency shelter to discuss the barriers preventing them from participating in HMIS. The CoC will coordinate with the HMIS Lead Agency and program funders to address the specific barriers identified by each agency. The programs not participating include levy-funded hotel shelter in Dakota County, state-funded hotel vouchers for Veterans, and a church rotational shelter which does not receive government funding.
 OPH - The bed coverage for other permanent beds is low because the Met Council HRA Mainstream Programs was inadvertently included in the HIC. This program has not been included in the HIC in previous years. The Metropolitan Council HRA has 107 Mainstream Vouchers but does not have a "general or limited homeless preference" for these vouchers. If these vouchers had not been included the coverage would have been 100%. The CoC has notified the HMIS Lead Agency, and they have corrected their reports to correct this error moving forward.
 PSH – the beds not reported in HMIS in this category are all VASH vouchers, which increased by 20 beds this year. The CoC will advocate to HUD to require HMIS for VASH vouchers in addition to conducting 1:1 outreach to each PHA to understand their specific barriers preventing them from participating in HMIS.

2. (a) After conducting outreach and listening non-judgmentally, the CoC will coordinate with the HMIS Lead Agency and program funders to address the specific barriers identified by each agency in using HMIS. The programs not participating include levy-funded hotel shelter in Dakota County, state-funded hotel vouchers for Veterans, and a church rotational shelter which does not receive government funding.
 (b) The state HMIS administrator, ICA, has issued an RFP for new software for HMIS. The current software that has been used in the CoC since the start of HMIS. There is a need for software that is more straightforward for the user and provides real-time data. The CoC is hopeful that a new software may incentivize emergency shelter and housing programs to use HMIS. The CoC will also discuss having an agency skilled in HMIS contract to do data entry for organizations that aren't mandated to use HMIS. SMAC will discuss this work at least quarterly at the SMAC Governing Group meetings.

2A-6.	Longitudinal System Analysis (LSA) Submission in HDX 2.0.	
	NOFO Section V.B.3.d.	
	You must upload your CoC's FY 2023 HDX Competition Report to the 4B. Attachments Screen.	

Did your CoC submit at least two usable LSA data files to HUD in HDX 2.0 by February 28, 2023, 8 p.m. EST?	Yes
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2B. Continuum of Care (CoC) Point-in-Time (PIT) Count

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2B-1.	PIT Count Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC conducted its 2023 PIT count.	01/26/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/26/2023
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

	Describe in the field below how your CoC:	
	1. engaged unaccompanied youth and youth serving organizations in your CoC’s most recent PIT count planning process;	
	2. worked with unaccompanied youth and youth serving organizations to select locations where homeless youth are most likely to be identified during your CoC’s most recent PIT count planning process; and	
	3. included youth experiencing homelessness as counters during your CoC’s most recent unsheltered PIT count.	

(limit 2,500 characters)

1) Youth serving agencies are strong members of the CoC throughout the year and are key stakeholders in planning for PIT count implementation. Focused efforts were made by youth outreach staff within the CoC to identify youth experiencing homelessness. Youth-serving agencies and youth outreach staff help with the wording of the survey and made the survey simpler to ensure that youth are engaged and willing to participate in the count. The CoC involved youth experiencing homelessness through the utilization of youth advisory committees year-round.

2) The youth advisory committees were able to identify key outreach locations for youth along with volunteering to administer survey on the night of the PIT count.

3) The CoC worked with youth stakeholders, including youth advisory committees, to support the selection of outreach locations for the night of the PIT count. Stakeholders who serve youth attended planning meetings to create a plan for where outreach should be conducted such as: libraries, teen centers, after school events etc.

2B-4.	PIT Count–Methodology Change–CoC Merger Bonus Points.	
	NOFO Section V.B.5.a and V.B.7.c.	
	In the field below:	
1.	describe any changes your CoC made to your sheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable;	
2.	describe any changes your CoC made to your unsheltered PIT count implementation, including methodology or data quality changes between 2022 and 2023, if applicable; and	
3.	describe how the changes affected your CoC’s PIT count results; or	
4.	state “Not Applicable” if there were no changes or if you did not conduct an unsheltered PIT count in 2023.	

(limit 2,500 characters)

Not Applicable/ No Changes made.

2C. System Performance

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

2C-1.	Reduction in the Number of First Time Homeless–Risk Factors Your CoC Uses.	
	NOFO Section V.B.5.b.	
	In the field below:	
	1. describe how your CoC determined the risk factors to identify persons experiencing homelessness for the first time;	
	2. describe your CoC’s strategies to address individuals and families at risk of becoming homeless; and	
	3. provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the number of individuals and families experiencing homelessness for the first time	

(limit 2,500 characters)

1) (a) The CoC uses a homeless prevention assessment tool (MPAT) that borrows from the lessons learned from Homebase in New York (2012). The tool identifies and prioritizes those most likely to become homeless, by utilizing the primary characteristics of people entering shelter. All households experiencing housing instability in the CoC complete the assessment and assistance is targeted to those who match the primary characteristics of those entering shelter in the CoC. (b) The CoC works with the Directors Council (DC)—a group comprised entirely of people with lived experience of homelessness—to periodically review and update assessments.

2) The CoC utilizes the following strategies to prevent first time homelessness: (a) Outreach/In-Reach & Engagement—The CoC works with food shelves, homeless school liaisons, landlords, etc. to identify households at risk of homelessness to connect them to emergency services. All counties within the CoC have a helpline to take calls from people who are at-risk of first-time homeless. Helpline staff provide guidance for accessing emergency assistance and supports to prevent eviction and first-time homelessness. (b) Deeper Service Models—Utilization of the prevention targeting tool has shifted CoC prevention strategies toward providing deeper/longer assistance to higher need households. (c) Strategies identified through outreach—CoC members conducted outreach to persons in unstable housing, seeking to identify resources most needed to prevent homelessness. The information has identified key areas of focus such as: service needs for SSI and medical assistance needs, eviction and criminal expungement, job and skills training, landlord strategies such as conflict resolution. (d) Advocacy for increased funding—long-time CoC advocacy has led to an historic, state-funded homeless prevention funding increase. This increase has allowed the CoC to serve a much higher number of households helping to prevent first time homelessness.

3) Since most homeless prevention funding is awarded separately to each county within the CoC, the CoC assigns staff from each county the responsibility for overseeing strategies to reduce the number of people experiencing homelessness for the first time. Laquita Love-Limo, SMAC Coordinator, convenes all five, county staff each month to monitor progress and address barriers and opportunities.

2C-1a.	Impact of Displaced Persons on Number of First Time Homeless.	
	NOFO Section V.B.5.b	

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:

1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	

In the field below:

1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.

(limit 2,500 characters)

1) The CoC has two main strategies to reduce the length of time people remain homeless. (a) New Outreach Standards: The CoC found that the most expeditious way to close the gap between the amount of need and available resources is by setting new standards for connecting to mainstream benefits. For outreach workers, shelter staff, and CE Assessors, connecting clients to Housing Stabilization Services (HSS) (a new Medicaid benefit for helping people obtain and maintain stable housing) and Housing Support (a state-funded housing benefit) increases the number of people the CoC is able to serve.. (b) Landlord engagement and education: For housing providers, standards around landlord engagement, assertive client engagement, and connection to mainstream resources will decrease the length of time people spend looking for housing. And for property managers, education around homelessness, coordinated entry, the impact of denials and the evidence to support a reduction in screening criteria will decrease the time it takes to house eligible individuals with rental barriers.

2) The CoC uses three main strategies to identify and house people with the longest lengths of time (LOT) homeless: (a) Outreach: The CoC conducts outreach to people experiencing unsheltered homelessness at least weekly, building relationships and trust with them while identifying the potential for service connection. Those who have the longest LOTs are connected to assessments for Supportive Housing. (b) CE Prioritization Criteria: The CoC's approved prioritization criteria for Coordinated Entry includes both a priority for people experiencing Chronic Homelessness, as well as prioritizing people based on the length of time they have experienced HUD homelessness, with those with the longest times being served first. (c) Case Consultation: The CoC also utilizes a case consultation approach within the CE process. This approach includes a weekly review of a "by name list" by a team of professionals that discuss households on the list that have been homeless the longest. The focus of the discussions is to move those households into permanent housing as quickly as possible and identify what supportive services the household may need ongoing to remain stably housed.

3) Coordinated Entry Planner, Carla Schweich, is responsible for monitoring the CoC's strategy to reduce the length of time individuals and families remain homeless.

2C-3.	Exits to Permanent Housing Destinations/Retention of Permanent Housing—CoC's Strategy	
	NOFO Section V.B.5.d.	
	In the field below:	
1.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in emergency shelter, safe havens, transitional housing, and rapid rehousing exit to permanent housing destinations;	

2.	describe your CoC's strategy to increase the rate that individuals and persons in families residing in permanent housing projects retain their permanent housing or exit to permanent housing destinations; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to increase the rate that individuals and families exit to or retain permanent housing.

(limit 2,500 characters)

1) (a) The CoC utilizes a case consultation process through Coordinated Entry which uses a by name list for weekly review by a team of professionals, including shelter staff, to quickly move households into permanent housing. This process ensures households staying in ES are served timely through the CE process and are exiting to permanent destinations. (b) A DV-specific case consultation meeting takes place monthly to ensure confidentiality for survivors of DV and sexual assault. Emergency shelters across the region are actively working with landlords to facilitate permanent exits from the shelter. The CoC hosts regular check-in meetings with RRH providers across region which offer exit planning support for all who attend. The CoC created a transition plan in Coordinated Entry policy which supports households in transferring from one housing program to another if housing stability is at risk. The transition plan details how the CE Advisory works with housing program staff to facilitate a transition if necessary. The CE Advisory is an elected group of providers and assessors from across the region with varied expertise who can offer advice and recommendations in addition to program transfer approvals, such checking the client's status on Section 8/Public Housing waitlists, landlord mediation, etc. The Advisory meets twice monthly or more frequently as needed to review, discuss, and facilitate transitions.

2) (a) The CoC utilizes quarterly monitoring of permanent housing retention and exit destinations through quarterly review of APR data. The CoC offers support to programs that have not met performance measures as outlined by the CoC scoring tool. (b) The CoC Supports Moving On initiatives through partnerships with local PHAs. (c) If a client's housing stability is at risk, the program seeks the advice of the CE Advisory. The CE Advisory has the authority to approve transfers between programs if needed, or recommend other individualized advice for mainstream resources, disability services, or other interventions to promote housing stability.

3) Liz Moen, Coordinated Entry Planner, is responsible for overseeing the implementation of strategies to increase exits to permanent housing/retention of permanent housing.

2C-4.	Returns to Homelessness—CoC's Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	

In the field below:

1.	describe your CoC's strategy to identify individuals and families who return to homelessness;
2.	describe your CoC's strategy to reduce the rate of additional returns to homelessness; and
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the rate individuals and persons in families return to homelessness.

(limit 2,500 characters)

1) The CoC identifies common factors of households who return to homelessness by reviewing System Performance Measures and Coordinated Entry data quarterly. The Governing Board reviews progress data on System Performance measures each quarter including how many households have returned to homelessness during that period. The system performance report is then cross-referenced with Coordinated Entry data to ensure households who have returned to homelessness are rehoused as quickly as possible.

2) The CoC’s strategies to reduce returns to homelessness include: create a network of resources households served in the CoC can turn to prior to returning to homelessness. To accomplish this the CoC worked with housing providers across the region to revise written standards for RRH and PSH providers. These updates include expectations on case management services and after care services. A key component in the expectations is communicating early and often with the household about the resources available to regain housing stability. Providers across the region are committed to re-engaging with households after program exit if the household needs support in re-stabilizing their housing. In addition to creating a robust provider network, the CoC offers formal support to all programs in the CoC through the CE Advisory. In this process, if a client has to leave their housing for any reason, the program seeks the advice of a panel of individuals from across the CoC on how best to prevent a return to homelessness whenever possible. This panel is called the CE Advisory, and they have the authority to approve transfers between programs if needed, or recommend other individualized advice for mainstream resources, disability services, or other interventions to prevent a return to homelessness.

3) The Chair of Monitoring and Evaluation Committee is responsible to oversee the strategy to reduce the rate of households returns to homelessness.

2C-5.	Increasing Employment Cash Income–CoC’s Strategy.	
	NOFO Section V.B.5.f.	
	In the field below:	
1.	describe your CoC’s strategy to access employment cash sources;	
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and	
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.	

(limit 2,500 characters)

1) The CoC’s strategy to increase access to employment includes quarterly monitoring of income performance measures through review of APR data. The CoC offers support to programs that have not met performance measures as outlined by the CoC scoring tool. Training is also offered to all projects on increasing employment income at least annually. All projects work closely with employment service providers to provide targeted employment services and comprehensive supports to increase earned income from employment with the specific goal of increasing income.

2) The CoC works to increase access to earned income through promoting job/career fairs throughout the region. Employers are invited to attend Project Community Connect events in the region to connect those experiencing homelessness directly to employment opportunities. Providers within the CoC work with participants on work readiness activities such as resume/application support and interview coaching. The CoC utilizes expertise of its members and partners, including employment services providers, such as Tasks Unlimited, Guild, & the CareerForce Centers. Governing Board members attend Work Force Center board meetings and share relevant information and ideas across sectors. CareerForce Centers staff are active members of the CoC and partner in providing trainings and resources during community events targeted to households experiencing homelessness. The CoC also assesses people’s individual ability to work and include employment as part of their goals. Individual work encompasses these areas: (a) helping people review and understand their budget and how it would look if they worked. Help them understand how their voucher will adjust and how they will still have more money to work with even though they pay more towards rent. (b) Help people search for jobs, pick up applications, write resumes, and fill out applications. (c) Assist with transportation to interviews, arranging childcare. (d) Coordinate assistance with job counselor, financial worker, and client.

3) The Chair of the CoC Monitoring and Evaluation Committee is responsible for ensuring projects have strategies to increase income.

2C-5a.	Increasing Non-employment Cash Income–CoC’s Strategy	
	NOFO Section V.B.5.f.	
	In the field below:	
	1. describe your CoC’s strategy to access non-employment cash income; and	
	2. provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase non-employment cash income.	

(limit 2,500 characters)

1) The CoC’s strategy to increase non-employment cash includes quarterly monitoring of non-employment income performance measures through review of APR data. The CoC offers support to programs that have not met performance measures as outlined by the CoC scoring tool. In addition, the CoC partners with the State of MN to offer SOAR trainings to increase staff capacity & assist people enrolling in SSI & SSDI. SOAR trained providers also attend CoC meetings & offer SOAR services to projects who may not have a SOAR person on staff. The CoC also partnered with the state to offer a half day training on all mainstream benefit programs including but not limited to Food Stamps, SSI, and General Assistance. This training was offered free of charge to providers in the CoC. This training is offered annually at a minimum.

2) The Chair of Monitoring and Evaluation Committee is responsible for overseeing the CoC’s strategy to increase non-employment cash income.

3A. Coordination with Housing and Healthcare

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3A-1.	New PH-PSH/PH-RRH Project–Leveraging Housing Resources.	
	NOFO Section V.B.6.a.	
	You must upload the Housing Leveraging Commitment attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	No
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses healthcare resources to help individuals and families experiencing homelessness?	Yes
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3A-3.	Leveraging Housing/Healthcare Resources–List of Projects.	
	NOFO Sections V.B.6.a. and V.B.6.b.	

If you selected yes to questions 3A-1. or 3A-2., use the list feature icon to enter information about each project application you intend for HUD to evaluate to determine if they meet the criteria.

Project Name	Project Type	Rank Number	Leverage Type
Prairie Pointe Fa...	PH-PSH	20	Healthcare

3A-3. List of Projects.

1. What is the name of the new project? Prairie Pointe Family PSH FY23
2. Enter the Unique Entity Identifier (UEI): CCVGVNJENW3
3. Select the new project type: PH-PSH
4. Enter the rank number of the project on your CoC's Priority Listing: 20
5. Select the type of leverage: Healthcare

3B. New Projects With Rehabilitation/New Construction Costs

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3B-1.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
--	----

3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

If you answered yes to question 3B-1, describe in the field below actions CoC Program-funded project applicants will take to comply with:

1.	Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u); and
2.	HUD’s implementing rules at 24 CFR part 75 to provide employment and training opportunities for low- and very-low-income persons, as well as contracting and other economic opportunities for businesses that provide economic opportunities to low- and very-low-income persons.

(limit 2,500 characters)
 Not applicable.

3C. Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

3C-1.	Designating SSO/TH/Joint TH and PH-RRH Component Projects to Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

	Is your CoC requesting to designate one or more of its SSO, TH, or Joint TH and PH-RRH component projects to serve families with children or youth experiencing homelessness as defined by other Federal statutes?	No
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3C-2.	Serving Persons Experiencing Homelessness as Defined by Other Federal Statutes.	
	NOFO Section V.F.	

You must upload the Project List for Other Federal Statutes attachment to the 4B. Attachments Screen.

If you answered yes to question 3C-1, describe in the field below:

1.	how serving this population is of equal or greater priority, which means that it is equally or more cost effective in meeting the overall goals and objectives of the plan submitted under Section 427(b)(1)(B) of the Act, especially with respect to children and unaccompanied youth than serving the homeless as defined in paragraphs (1), (2), and (4) of the definition of homeless in 24 CFR 578.3; and
2.	how your CoC will meet requirements described in Section 427(b)(1)(F) of the Act.

(limit 2,500 characters)

Not Applicable

4A. DV Bonus Project Applicants for New DV Bonus Funding

HUD publishes resources on the HUD.gov website at CoC Program Competition to assist you in completing the CoC Application. Resources include:

- Notice of Funding Opportunity (NOFO) for Fiscal Year (FY) 2023 Continuum of Care Competition and Noncompetitive Award of Youth Homeless Demonstration Program Renewal and Replacement Grants;
- 24 CFR part 578;
- FY 2023 CoC Application Navigational Guide;
- Section 3 Resources;
- PHA Crosswalk; and
- Frequently Asked Questions

4A-1.	New DV Bonus Project Applications.	
	NOFO Section I.B.3.I.	

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
--	-----

4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

Select yes or no in the chart below to indicate the type(s) of new DV Bonus project(s) your CoC included in its FY 2023 Priority Listing.

	Project Type	
1.	SSO Coordinated Entry	No
2.	PH-RRH or Joint TH and PH-RRH Component	Yes

You must click "Save" after selecting Yes for element 1 SSO Coordinated Entry to view questions 4A-2, 4A-2a. and 4A-2b.

4A-3.	Assessing Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects in Your CoC's Geographic Area.	
	NOFO Section I.B.3.I.(1)(c)	

1.	Enter the number of survivors that need housing or services:	684
2.	Enter the number of survivors your CoC is currently serving:	327
3.	Unmet Need:	357

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(c)		
Describe in the field below:		
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and	
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or	
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.	

(limit 2,500 characters)

1) In order to calculate the number of DV survivors needing housing or services, the CoC used HMIS data on clients who reported DV in the MN Core Homeless Programs report for Emergency Shelter, Outreach and Housing Navigation, Transitional Housing, Rapid-Rehousing, Permanent Supportive Housing and Other Permanent Housing. We added this number to the 170 DV beds (ES, TH, RRH, PSH, OPH) that are not reported in HMIS to get 684. To get the number in element two, we used the same reports, and only included housing programs: Transitional Housing, Rapid Re-housing, Permanent Supportive Housing, and Other Permanent Housing. This was the best way to ensure no duplication of clients.

2) The data sources we used were the HIC for DV projects and HMIS for non-DV projects.

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)		
Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.		

Applicant Name
Southern Valley A...

Project Applicants Applying for New PH-RRH and Joint TH and PH-RRH DV Bonus Projects

4A-3b.	Information About Unique Project Applicants and Their Experience in Housing Placement and Housing Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section II.B.11.e.(1)(d)	

Enter information in the chart below on the project applicant applying for one or more New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects included on your CoC's FY 2023 Priority Listing for New Projects:

1.	Applicant Name	Southern Valley Alliance
2.	Project Name	Joint TH/RRH for Victims of DV in Scott & Carver Counties
3.	Project Rank on the Priority Listing	21
4.	Unique Entity Identifier (UEI)	TFMMTMN93JL8
5.	Amount Requested	\$126,275
6.	Rate of Housing Placement of DV Survivors–Percentage	0%
7.	Rate of Housing Retention of DV Survivors–Percentage	0%

4A-3b.1.	Applicant Experience in Housing Placement and Retention for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

For the rate of housing placement and rate of housing retention of DV survivors reported in question 4B-3b., describe in the field below:

1.	how the project applicant calculated both rates;
2.	whether the rates accounts for exits to safe housing destinations; and
3.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects).

(limit 1,500 characters)

SVA’s first transitional housing grant through the Office of Violence Against Women (OVW) began in October 2022 and we placed our first family into TH in May 2023. During the period of October - May, we hired a Housing Manager and created all policies, procedures, and forms for the program in accordance with OVW and the National Network to End Domestic Violence (NNEDV). All four units that SVA has funded through the OVW grant are now full. No clients have exited the program yet. The participant that has been in the program the longest has been in TH for 5 months and is eligible for rent assistance up to 12.

In August of 2023, SVA was notified we would receive additional Office of Economic Opportunity (OEO) funding to expand transitional housing to Scott County. At this time, we have placed 1 additional family into TH in Scott County and are actively working to find housing with 1 other participant.

In total, SVA currently has 5 households (5 head-of-household, 5 children) we are providing transitional housing to and a total of 14 on our waitlist for a rate of 36% placed into transitional housing. SVA uses Client Track to provide demographic and programmatic statistics. this agency is new to being a housing provider but the coc is going to offer them lots of ta and support to get up and going.

4A-3c.	Applicant Experience in Providing Housing to DV Survivor for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(d)		
Describe in the field below how the project applicant:		
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;	
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan, etc.;	
3.	determined which supportive services survivors needed;	
4.	connected survivors to supportive services; and	
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.	

(limit 2,500 characters)

SVA is the only domestic violence agency in Scott and Carver counties. SVA advocates work with victim/survivors to complete an intake and assess their individual strengths and needs. Clients that are identified as being homeless, fleeing violence or needing other housing assistance are referred to our Housing Manager to complete a housing application. This staff person provides increased support and case management to victim/survivors identified as experiencing housing instability by our 24/7 crisis line, law enforcement and hospital system referrals. The Housing Manager uses the application and intake process to determine their eligibility and need for housing. We don't currently utilize the Coordinated Entry system but will if we receive HUD funding.

To offer a low-barrier housing program, Southern Valley Alliance does not require any proof of citizenship, background check or disclosure of criminal or rental history to be admitted to the housing program. Currently, SVA holds a master lease with the Carver County CDA for the apartments, allowing SVA to make quick, flexible decisions to assist victims fleeing domestic violence.

SVA's supportive services are victim-led and voluntary. Participants work with the Housing Manager to set their own housing related and non-housing goals. The Housing Manager checks in with each victim-survivor weekly, if not more frequently when they initially move into housing. The Housing Manager then helps connect the survivor to appropriate SVA services and those in the greater community. Depending on the participant's needs, the Housing Manager provides resources such as, employment and education for clients and their children, public benefits, mental and physical healthcare, substance use and harm reduction strategies, legal services, and housing opportunities. Internal resources may include budgeting assistance, support groups, help with an Order for Protection or the Safe at Home program.

As SVA's first participant entered Transitional Housing less than 5 months ago, we have not yet had a client exit the program. Determined to be best practice, Southern Valley Alliance's standard procedure is charging 30% of a client's income for rent. While clients will receive housing and electrical utility assistance for up to 12 months, the Housing Manager assists clients in determining how tapering rental assistance will support their long-term housing stability, best preparing them to be able to sustain permanent housing.

4A-3d.	Applicant Experience in Ensuring DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	
	Describe in the field below examples of how the project applicant ensured the safety and confidentiality of DV survivors experiencing homelessness by:	
1.	taking steps to ensure privacy/confidentiality during the intake and interview process to minimize potential coercion of survivors;	
2.	making determinations and placements into safe housing;	
3.	keeping information and locations confidential;	
4.	training staff on safety and confidentiality policies and practices; and	
5.	taking security measures for units (congregate or scattered site), that support survivors' physical safety and location confidentiality.	

(limit 2,500 characters)

The interview and intake process occurs exclusively between the survivor and SVA's Housing Manager. Minimal notes are taken and added to the survivors' confidential files.

Survivors' preferences are taken into consideration when determining the best placement. Once a unit becomes available, it is offered to a survivor and only after a Release of Information is signed is the potential landlord given the name of the survivor.

Locations of survivors' units are kept confidential, and survivors have the option of entering the Safe at Home program prior to entering a unit. Locations of meetings with survivors are shared only internally, for safety purposes and maintaining compliance with SVA policy.

Staff go through extensive training on safety and confidentiality, including the 40-hour required domestic violence advocacy training. SVA also keeps up-to-date policies on the confidential keeping of survivors' information.

All properties used for the transitional housing program are secured entrance buildings. Most have security cameras inside and outside of the building. For those without general security cameras, video doorbells are offered to clients for their individual units. Survivors get the ultimate say on whether the unit meets their safety requirements.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
NOFO Section I.B.3.I.(1)(d)		
Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.		

(limit 2,500 characters)

As a domestic violence agency, we are acutely aware of the importance of physical and emotional safety for the victim/survivors we serve. We continue to strive to reduce potential re-traumatization of victims and work to empower clients.

Our confidentiality and documentation processes were updated to reduce the amount of client data collected and stored, with special attention focused on advocates ensuring that all victim/survivors understand the limitations of confidentiality and potential risks of releases of information.

SVA has strict privacy and confidentiality policies and procedures. All staff adhere to the Advocate’s Confidentiality Guide and Confidentiality and Mandatory Reporting documents. SVA will also revise or expand policies as needed for this housing program.

All participating victim-survivors will have safety plans created with the assistance of SVA client advocates. Many of the rental properties are access controlled and have security cameras. SVA staff who will be engaged in this program are trained in Minnesota’s Safe at Home Program (<https://www.sos.state.mn.us/safe-at-home/about-safe-at-home/>) and fully understand the importance of resident privacy.

4A-3e.	Applicant Experience in Trauma-Informed, Victim-Centered Approaches for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

Describe in the field below examples of the project applicant’s experience using trauma-informed, victim-centered approaches to meet needs of DV survivors by:

1.	prioritizing placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs;
2.	establishing and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	providing program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasizing program participants’ strengths, e.g., strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans worked towards survivor-defined goals and aspirations;
5.	centering on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	providing a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offering support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

With all its services, SVA strives to take a client-centered, trauma-informed, and culturally responsive approach. All of Southern Valley Alliance’s programs utilize the voluntary services model. This model has been proven to be trauma-informed, as it never mandates participation. Mandated participation can often trigger and re-traumatize survivors who may have fled controlling relationships in which their thoughts and actions were dictated by their abusers. The voluntary services model allows for the trauma-informed practice of meeting the client where they are, listening without judgment, and allowing the client to decide their needs and goals.

In the past year, SVA has used a trauma-informed approach to revise forms and everyday procedures. All forms, including intake and safety plans, were updated to reduce potential re-traumatization of victims and to ensure services are more victim-led. This included using more open-ended questions, tailoring services to their unique needs, and asking about preferred methods of communication and preferred language and pronouns. Southern Valley Alliance uses the person-centered approach by giving survivors the freedom to make their own decisions. Survivors are the experts on their own lives, and Southern Valley Alliance is here to encourage and assist survivors in attaining the needed resources to reach the survivors’ self-directed goals. The SVA team works to make sure that every client feels heard and can choose how and when to engage with programs and services. The agency’s overall approach has shifted from “This is what we do.” to “How can we help you?”.

Survivors of domestic violence have resiliency and the skills to keep themselves and their children safe. It is the goal of Southern Valley Alliance programs to give survivors the space to grow those skills and accumulate the resources to gain stability. Through the strength-based approach, survivors are respected for their experience and skills and their input is valued and used to improve services and policies.

While SVA is not a culturally specific service provider, we have found that developing relationships with other organizations that do work with specific ethnic groups has improved our ability to reduce barriers and build trust with victim/survivors. Advocates have provided co-advocacy with the following organizations: Asian Women United, Isuroon, the Shakopee Mdewakanton Sioux Community and Mi C.A.S.A. Staff offer to meet clients where they feel most safe and comfortable. An example of this would be the Shakopee Mdewakanton Sioux Community, where advocates meet with victims at their community center, typically along with an SMSC advocate.

SVA staff receive training through the Office of Justice Programs and National Network to End Domestic Violence (NNEDV) to be culturally aware of differences in how domestic violence is perceived and addressed as well as the unique issues victims may face due to their culture. In 2022, we updated our website to be available in Spanish, Hmoob and Soomaaliga. All of our outreach materials were also updated to be available in Spanish. SVA provides interpreters to meet clients’ language needs, giving them the choice of in-person, virtual or phone language services. Use of translation services doubled (from 26 to 42 clients) from FY2021 to FY2022. Last year, SVA used grant monies to provide enhanced interpretation services for victim-survivors with higher needs (e.g., case management, OFP/HRO applications, housing navigation, etc.).

Program participants have a variety of opportunities for connection with peers,

specifically through SVA’s weekly support group offerings. Support groups are offered both in-person and virtually. Trained facilitators lead confidential meetings for individuals who have experienced intimate partner violence. Participants can break the silence surrounding their abuse and learn about common misperceptions about domestic violence. Peers offer each other insights and support, and participants begin feeling less isolated as they begin their journey to healing.

Southern Valley Alliance has a variety of resources for clients with families. Staff support clients in accessing services to address their children’s needs and their parenting goals, including, but not limited to school enrollment, childcare assistance applications, and ECFE. Southern Valley Alliance also has connections to social service agencies that provide basic needs to families, as well as our own donations and funds to support families’ needs. Clients are also given resources for low-cost legal services to address family court needs, as well as low-cost children and family counseling services.

SVA is part of the Family Resource Centers in Scott County, which is a place for connection to information, resources, services and support for families. Also, our clients have access to parenting support groups for families that have experienced abuse and trauma.

4A-3f.	Applicant Experience in Meeting Service Needs of DV Survivors for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(d)	

Describe in the field below examples of supportive services the project provided to domestic violence survivors while quickly moving them into permanent housing and addressing their safety needs.

(limit 5,000 characters)

SVA’s program currently supports families escaping domestic violence through a scattered-site model. Clients are placed in a safe apartment, suitable for their family size. While in housing, clients are provided up to 12 months of rental and utility financial assistance and case management services to help them gain safety, resources, financial security, and opportunities for permanent housing. To address the holistic needs of every client, the Housing Manager provides resources and support with employment and education for clients and their children, public benefits, mental and physical healthcare, substance use and harm reduction strategies, legal services, and housing opportunities. After a client exits the program, they continue to be supported through follow-up case management services for up to 12 months. Because each client will have unique needs and concerns, the Housing Manager tailors services, resources, and support to provide the best wrap-around care to help every client achieve a sense of safety and stability after enduring consequential trauma and upheaval.

All units will be fully furnished upon move-in by the client. SVA is a partner of Bridging and will utilize this partnership for furnishings. Upon program exit, clients will be able to take all furnishings with them. Furthermore, clients are provided with referrals to several different social service agencies to meet their basic needs, including food shelves, thrift stores, voucher-based household item and furniture resources.

The Housing Manager assists transitional housing clients with housing-related referrals, assistance completing housing applications, resources to address poor credit and rental history, and housing-related financial aid. The goal is to address clients’ barriers to housing and provide the wrap-around services necessary to achieve safe, stable permanent housing. The SVA Legal Advocate may assist with an Order for Protection or Harassment Restraining Order to exclude an abuser from the home, and advocates may also register the client in the Safe at Home program to keep their new address confidential.

Clients are provided resources to low-cost, accessible healthcare, including mental health services. Clients are also given referrals for signing up for health insurance benefits. Southern Valley Alliance has partnerships with CareerForce centers to give clients full range of employment and education opportunities, skill-building, group sessions, and more. Clients are provided resources and referrals for children’s needs, including, but not limited to family resource centers, school enrollment, ECFE opportunities, childcare assistance applications, and basic needs.

SVA is currently developing new skills-building classes on multiple topics – self-defense, budgeting, parenting, and more. Many of the new classes, programs and services will be offered jointly with other local providers of support services. Collaborators who are already on board include the Scott County Law Library, Scott and Carver County Workforce Services, Together WE CAN (Work to End Child Abuse and Neglect), the Allstate Foundation, and other job training and legal partners.

4A-3g.	Plan for Trauma-Informed, Victim-Centered Practices for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
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NOFO Section I.B.3.I.(1)(e)

Describe in the field below examples of how the new project(s) will:

1.	prioritize placement and stabilization in permanent housing consistent with the program participants' wishes and stated needs;
2.	establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials;
3.	provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma;
4.	emphasize program participants' strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations;
5.	center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
6.	provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
7.	offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

Depending on availability, units are offered to survivors in various locations. Survivors ultimately get to choose if the unit will meet their needs, taking into consideration their workplace, childcare and school locations, transportation options, and safety requirements.

SVA's transitional housing operates on a voluntary services model. Survivors choose when, how, and if they participate in case management and programming. SVA also utilizes a harm-reduction model, never requiring sobriety, testing, or recovery programming of their program participants. Participants are met with where they feel most safe and comfortable, often within their homes. Participants choose their goals and priorities for their stay in transitional housing and beyond.

If program participants wish to learn more about trauma or domestic violence, the Housing Manager can provide information and resources. SVA also operates support groups for domestic violence survivors that are open to transitional housing participants to attend and gain further knowledge on the effects of trauma, all within a supportive environment. SVA's transitional housing participants guide their case management. They choose if and when to set goals and priorities. Case management to participants can include strengths-based questionnaires and personal values assessments to help guide empowerment work and priority setting.

SVA staff attends several training opportunities throughout the year on cultural responsiveness and trauma-informed practices. Cultural needs are always considered and discussed when placing a participant in transitional housing and every effort is made to ensure a participant is able to participate in their own cultural practices (including access to appropriate food, cooking equipment, transportation to cultural events, and personal care items). The Housing Manager is also able to advocate for participants to the landlord or housing authority, ensuring participants can engage in cultural practices safely in their homes, without retribution (i.e., food preparation and cooking practices, burning of incense or sage, etc.). SVA also maintains relationships with culturally specific organizations in the area that can provide co-advocacy to program participants within a culturally appropriate manner and in the participant's preferred language.

Beyond SVA's own support groups, our organization maintains relationships with other service providers in Scott and Carver counties to best support program participants' needs. The Housing Manager can provide referrals or accompaniment, depending on participants' wishes, to other support or recovery groups, culturally specific organizations, spiritual groups, financial education, parenting groups, benefits access, career services, and more.

SVA can provide participants with referrals and access to a variety of parental support services. These services include parenting classes and support groups, childcare and schooling options, ECFE, childcare assistance, mental and physical health services, and more. If a participant has legal needs pertaining to their children, SVA can provide some legal assistance, including OFP/HRO filing and court accompaniment. If a participant's legal needs are beyond the scope of SVA assistance, referrals are made to other legal resources to best address the needs of the participant, such as custody or parenting-time legal assistance.

4A-3h.	Involving Survivors in Policy and Program Development, Operations, and Evaluation of New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(f)	

Describe in the field below how the new project will involve survivors:

- | | |
|----|---|
| 1. | with a range of lived expertise; and |
| 2. | in policy and program development throughout the project's operation. |

(limit 2,500 characters)

All services SVA provides, including our transitional housing program, are trauma-informed and victim-led. Staff members recognize that victim-survivors are the experts in their own experiences. The SVA team works to make sure that every client feels heard and can choose how and when to engage with programs and services. We use a voluntary services model and engage survivors in conversations to learn what their goals are and what success looks like to them. Being trauma-informed also means looking at victim-survivors' responses and reactions through the lens of the trauma they have experienced (personally, culturally, societally).

While SVA is not a culturally specific service provider, we have found that developing relationships with other organizations that do work with specific ethnic groups has improved our ability to reduce barriers and build trust with victim/survivors. SVA has created materials that are inclusive of all types of relationships and LGBTQIAP2+ staff members have reviewed and removed gendered language from support group and case management materials. Intake forms have been updated to include options for gender identity and preferred pronouns.

Applicants are not screened out due to immigration status, current sobriety, mental or physical health concerns, or lack of income. The only reasons an applicant may remain unserved, beyond the eligibility requirements are lack of funding or lack of capacity or appropriate unit availability.

Southern Valley Alliance staff are trained in harm reduction strategies and in the intersection of the trauma of victimization and substance use. Staff will not administer or require drug testing. Clients will not be required to be sober to participate in the transitional housing program; however, clients are prohibited from participating in illegal activities on site.

In addition, SVA regularly uses client feedback through evaluations to improve programming. Evaluations will show immediate steps that SVA and our partners can take to improve procedures. It will also guide longer-term program improvements to enhance outcomes.

4B. Attachments Screen For All Application Questions

We have provided the following guidance to help you successfully upload attachments and get maximum points:

1. You must include a Document Description for each attachment you upload; if you do not, the Submission Summary screen will display a red X indicating the submission is incomplete.
2. You must upload an attachment for each document listed where 'Required?' is 'Yes'.
3. We prefer that you use PDF files, though other file types are supported—please only use zip files if necessary. Converting electronic files to PDF, rather than printing documents and scanning them, often produces higher quality images. Many systems allow you to create PDF files as a Print option. If you are unfamiliar with this process, you should consult your IT Support or search for information on Google or YouTube.
4. Attachments must match the questions they are associated with.
5. Only upload documents responsive to the questions posed—including other material slows down the review process, which ultimately slows down the funding process.
6. If you cannot read the attachment, it is likely we cannot read it either.
 - . We must be able to read the date and time on attachments requiring system-generated dates and times, (e.g., a screenshot displaying the time and date of the public posting using your desktop calendar; screenshot of a webpage that indicates date and time).
 - . We must be able to read everything you want us to consider in any attachment.
7. After you upload each attachment, use the Download feature to access and check the attachment to ensure it matches the required Document Type and to ensure it contains all pages you intend to include.
8. Only use the "Other" attachment option to meet an attachment requirement that is not otherwise listed in these detailed instructions.

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No		
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/25/2023
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/25/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/25/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	09/25/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/25/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	09/25/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/25/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/25/2023
1E-5b. Local Competition Selection Results	Yes	Final Project Sco...	09/25/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting -- Co...	09/25/2023

1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	09/25/2023
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	(HDX) Competition...	09/25/2023
3A-1a. Housing Leveraging Commitments	No		
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/25/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Moving On Preference

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Final Project Scores for All Projects

Attachment Details

Document Description: Web Posting -- CoC-Approved Consolidated Application

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: (HDX) Competition Report

Attachment Details

Document Description:

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/20/2023
1B. Inclusive Structure	09/27/2023
1C. Coordination and Engagement	09/27/2023
1D. Coordination and Engagement Cont'd	09/27/2023
1E. Project Review/Ranking	09/27/2023
2A. HMIS Implementation	09/27/2023
2B. Point-in-Time (PIT) Count	09/27/2023
2C. System Performance	09/27/2023
3A. Coordination with Housing and Healthcare	09/27/2023
3B. Rehabilitation/New Construction Costs	09/27/2023
3C. Serving Homeless Under Other Federal Statutes	09/27/2023

4A. DV Bonus Project Applicants	09/27/2023
4B. Attachments Screen	09/25/2023
Submission Summary	No Input Required



2022 HOUSING CHOICE VOUCHER ADMINISTRATIVE PLAN

Metropolitan Council Housing and Redevelopment Authority

Approved by Metropolitan Council:

October 12, 2022
September 22, 2021
September 23, 2020
February 12, 2020
September 25, 2019
November 28, 2018

4-III.C. SELECTION METHOD

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

Local Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

PHA Policy

The HRA has adopted the following category of preferences:

- Insufficient Funding (4 points)

Preference will be given to any family that has been terminated or is at imminent risk of being terminated from the following HRA programs due to insufficient funding:

- Housing Choice Voucher
- Project Based Voucher
- Bridges
- Continuum of Care
- Housing Opportunities for Persons with Aids
- Housing Trust Fund

- Mobility Demonstration Program (3 points)

The PHA, in partnership with Minneapolis Public Housing Authority, was awarded funds under the Housing Choice Voucher (HCV) Mobility Demonstration Program. The program will assist families with children in gaining better access to low-poverty neighborhoods with high-performing schools and other strong community resources. The program will offer mobility-related supports to a selected group of HCV holders to determine what services are most effective in helping families move and achieve success. The program will include an independent evaluation and research component.

- Preference will be given to families with at least one child aged 13 or under that live in census tracts with a family poverty rate of 30 percent or higher.
- If the PHA does not have enough families on the waiting list that meet the required preference, the PHA will select the next available family with at least one child 17 or under from the waiting list.

- This preference will be applied to a limited number of families each year in accordance with the enrollment schedule of the HCV Demonstration Program.
 - The Metro HRA has a Joint Powers Agreement with MPHA to eliminate the portability requirement. Each agency will administer their own vouchers regardless of where the family chooses to live.
 - Participants enrolled in the Mobility Demonstration Program that move to Minneapolis will be assigned bedroom space according to the MPHA's subsidy standards.
 - Small Area Fair Market Rents (SAFMR) will be used for participants enrolled in the Mobility Demonstration Program that move to Minneapolis.
- "Move Up" from Permanent Supportive Housing (2 points)

The PHA will partner with the Hennepin, Ramsey and Suburban Metro Area Continuum of Care (CoC) to identify individuals and families ready to transition or "move up" from Permanent Supportive Housing (PSH) units. These are families that were homeless prior to entry into the PSH program and who continue to need a rental subsidy but no longer require intensive supportive services.

- The PHA will accept referrals from the CoC's Coordinated Entry Program. Move-Up applicants will be identified by PSH based on Move-Up eligibility criteria:
 - A minimum of two years living in Permanent Supportive Housing
 - Ongoing source of income
 - Paid rent on-time and in full every month for at least ten of the past twelve months or are in compliance with the Housing Supports program.
 - Connected to mainstream or community resources
 - The PHA will allocate up to 40 Housing Choice Vouchers per calendar year toward the Move-Up Preference. Once these vouchers have been utilized in a calendar year, no additional priority will be given under this category.
- Homework Starts with Home Preference (1 point)

The PHA will partner with suburban Ramsey County school districts, Solid Ground and Suburban Ramsey County Family Collaborative (program partners) to provide rent assistance to people of underserved and under-supported populations including black, indigenous and people of color, and lesbian, gay, bisexual, transgender, queer or questioning and Intersex (LGBTQI) students and families who are homeless, doubled up or at imminent risk of homelessness.

- The HSWH program partners provides rent subsidy and support services to enrolled families for 18 months.
 - The PHA will accept referrals from the program partners for families whose HSWH rent assistance has ended and who continue to have a need for rent assistance.
 - The program partners will continue to provide support services as the families transition to the Housing Choice Voucher program and for a two-year period thereafter.
 - The PHA will allocate up to 20 Housing Choice Vouchers per calendar year toward the HSWH partnership. Once these vouchers have been utilized in a calendar year, no additional priority will be given under this category.
- Residency Preference (1 point)
 - The PHA will offer a preference for 95% of waiting list placements to families who reside, work or have been hired to work or got to school full-time in the PHA's service area. Full-time student is defined as a person who is carrying a subject load that is considered full time by an educational institution with a degree or certificate program.

September 13, 2023

To: HUD Office of Special Needs Assistance Programs

From: SMAC CoC MN-503 Directors Council

Re: 2023 NOFO


The SMAC CoC MN-503 Directors Council was started in 2020 to provide the CoC with the voice and experience of people who have experienced homelessness. The Directors Council has 12 members and meets twice monthly. The current CoC Coordinator was a member of the Directors Council, as was the most recent hire for the SMAC CE Planner role. Several members of the Directors Council joined the Monitoring and Evaluation Committee to recruit, review and rank all projects submitted for possible inclusion in the Collaborative Application. The Monitoring and Evaluation Committee spent time analyzing point in time data for the past few years to ensure that the projects will fill the gaps in what is needed in our region to prioritize serving individuals and families experiencing homelessness with severe service needs. Directors Council members participated in the review and ranking meetings and 1:1 check-ins with projects. Discussions with members of the Directors Council also provided invaluable insight into the experiences that people experiencing homelessness have had with the organizations who provide services and housing in our CoC region. These discussions allow the SMAC CoC to better evaluate projects in our region and push organizations to provide higher quality services.

The SMAC Director's Council wholeheartedly supports the priorities for serving individuals and families experiencing homelessness with severe service needs in our CoC and the CoC Collaborative Application.

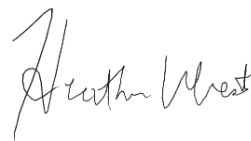
Sincerely,



Ranee Rock
Chair, Directors Council
SMAC MN-503



Ieasha Wofford
Member, Directors Council
SMAC MN-503



Heather West
Secretary, Directors Council
SMAC MN-503

Organization	Commonbond Communities						
Project Name	Granada						
CoC Model/Component	PSH						
Populations Served	Adults without Children						
Project Status	RENEWAL						
Total ARA	\$					23,735.00	
Date of Review	8/28/2023						
Reviewer	Laquita Love-Limo						
Points Possible	PHS HMIS	118 32	RRH	106	SSO	40	
EVALUATION AND RANKING STANDARDS							
OPERATIONS (28 Possible Points - 25%)							
Possible Points	Above Expectations	Meets Expectations	Below Expectations	Data	Score	Source	NOTES
	8	4	0				
Effective Use of Funds	Spent 90% or more of grant	Spent 75-89% of grant	Spent less than 75% of grant	94%	8	eLOCCS	\$1540 unspent of \$23735
Possible Points	Above Expectations	Below Expectations		Data	Score	Source	NOTES
	8	0					
eLOCCS Drawdowns	At least 1 time per quarter	Less than 1 time per quarter		YES	8	eLOCCS report, YES if at least Qly	
Housing First	Yes	No		YES	8	Project Application, #B. #3d	
Possible Points	Above Expectations	Meets Expectations	Below Expectations		Score	Source	NOTES
	4	2	0				
Unit Utilization	90-100%	80-89%	79% or less	95%	4	SAGE APR Q2	10 units, qly PIT 9/9/10/10
Data Completeness (a), (b), and (c)	All 3 are below 2.0%	2 of the 3 are below 2.0%	1 or 0 of the 3 are below 1.0% and one or more are above 5.0%	2/3 <2%	4	SAGE APR Q06a error rate column, Q06b--add error rates and divide by 5, Q06c--add error rates and divide by 4	6a = 0%, 6b = 0%, 6c = 5%
PROJECT PERFORMANCE (40 Possible Points - 36%) (38 - PSH, 32 - RRH)							
Possible Points	Above Expectations	Meets Expectations	Below Expectations	Data	Score	Source	NOTES
	8	4	0				
Dedicated Chronic Homeless Beds (PSH ONLY)	90% or higher	80-89%	79% or less	100%	8	Project Application, 4B.3 / 4B.2b	16 of 16 beds
Housing Stability (exits to permanent housing)	90% or higher (PSH) or higher (RRH)	75% 80-89% (PSH) 65-74% (RRH)	79% or less (PSH) 64% or less (RRH)	100%	8	SAGE APR, Q23c	No exits
Earned Income--Increase (RRH Only)	2	1	0	NA	0	SAGE APR, Q19a1 and Q19a2	
	30% or higher	20 - 29%	19% or less				
Non-Employment Income--Maintain/ Increase (PSH Only)	60% or higher	50 - 59%	49% or less	25%	0	SAGE APR, Q19a1 and Q19a2	1 of 4
Non-Cash Benefits	90% or higher	70-89%	69% or less	80%	1	SAGE APR, Q20b	4 of 5
Health Insurance	90% or higher	70-89%	69% or less	100%	2	SAGE APR, Q21	11 of 11
Possible Points	Above Expectations	Meets Expectations	Below Expectations		Score	Source	NOTES
	4	2	0				
Total Income PSH - Maintain or Increase RRH - Increase Only	75% or higher (PSH) 60% or higher (RRH)	65 - 74% (PSH) 50-59% (RRH)	64% or less (PSH) 49% or less (RRH)	100%	4	SAGE APR, Q19a1 and Q19a2	7 of 7
Recurrence (All exits)	0-10%	10.1%-20%	over 20%	0%	4	MIN-00-SAG-054 Returns to homelessness report, Summary by provider Tab, table 1	
Recurrence (Returns Report)	0-10%	10.1%-20%	Over 20%	0%	4	MIN-00-SAG-054 Returns to homelessness report, Summary by provider Tab, table 2	
Coordinated Entry Denials	15% or less	16-25%	Over 25%	0%	4	CE denials report	
Coordinated Entry - Length of time from referral to housing	0	0	0	0.06	0	CE report	6 days, 1 referral
	Average 45 days or less	46 - 75 days	> 75 days				
RACIAL EQUITY / Housing 1st MEASURES (32 Possible Points - 29%)							
Possible Points	Above Expectations	Meets Expectations	Below Expectations	Data	Score	Source	NOTES
	0	0	0				
Equity--Coordinated Entry Denials of BIPOC households NEW MEASURE	15% or less	16-25%	Over 25%	0%	0	CE denials report	1 of 1 successful referrals
Equity/Housing 1st--Eligibility Barriers ACCESS NEW MEASURE	Applicant answers NO to all ACCESS eligibility barriers in Agency Self-Assessment Form		Applicant answers YES or DEPENDS to any ACCESS eligibility barriers in Agency Self Assessment Form		0		No score, new measure
Equity/Housing 1st--Eligibility Barriers EARLY EXITS NEW MEASURE	Applicant answers NO to all EARLY EXITS eligibility barriers in Agency Self-Assessment Form		Applicant answers YES or DEPENDS to any EARLY EXITS eligibility barriers in Agency Self Assessment Form		0		No score, new measure
Language Supports and Translated Documents NEW MEASURE	Applicant answers YES to questions 21 and 22 in Agency Self-Assessment Form	Applicant answers YES to only ONE of questions 21 and 22 in Agency Self-Assessment Form	Applicant answers NO to questions 21 and 22 in Agency Self-Assessment Form		0		No score, new measure
Possible Points	Above Expectations	Meets Expectations	Below Expectations		Score	Source	NOTES
	4	2	0				
Equity--increase overall income	30% or more of BIPOC households increase overall income	20-29% of BIPOC households increase overall income	Less than 20% of BIPOC households increase overall income	100%	4	6 of 6 NOFO Tool	
Equity--returns to homelessness (12 months)	Less than 10% of BIPOC participants returned to homelessness within 12 months of exit to permanent housing	10-15% of BIPOC participants returned to homelessness within 12 months of exit to permanent housing	15% or more of BIPOC participants returned to homelessness within 12 months of exit to permanent housing	0%	4	MIN-00-SAG-054 Returns to Homelessness, First Exit Detail, All Exits Tab	0/1 BIPOC returns
	8	4	0				

Equity—Board/Leadership Composition	At least 20% of organization's board, directors, managers identify as BIPOC, and/or as LGBTQ+, and /or have experienced homelessness	10-19% of organization's board, directors, managers identify as BIPOC, and/or as LGBTQ+, and /or have experienced homelessness	Less than 10% of organization's board, directors, managers identify as BIPOC, and/or as LGBTQ+, and /or have experienced homelessness	43%	8	Racial equity measures document.
Equity—Staff Composition	At least 20% of organization's staff identify as Black, indigenous, or People of Color (BIPOC), and/or as LGBTQ+, and /or have experienced homelessness	10-19% of organization's staff identify as BIPOC, and/or as LGBTQ+, and /or have experienced homelessness	Less than 10% of organization's staff identify as BIPOC, and/or as LGBTQ+, and /or have experienced homelessness	100%	8	Racial equity measures document.
Equity—exits to permanent housing	At least 80% of BIPOC participants exited the program to permanent destinations.	75-80% of BIPOC participants exited the program to permanent destinations.	Less than 75% of BIPOC participants exited the program to permanent destinations.	100%	8	MIN-01-SAG-030 Core report, Destination Detail tab
OTHER MEASURES						
Possible Points	Above Expectations	Meets Expectations	Below Expectations	Data	Score	Source
	4	2	0			
Cost Effectiveness (cost/bed)	PSH - less than \$9,000/bed RRH - Less than \$6,500/bed	PSH - \$9,001-\$11,000/bed RRH - \$6,501-\$9,000/bed	PSH - more than \$11,000/bed RRH - more than \$9,000/bed	\$ 1,483	4	Project Application Budget line item 9 / total beds
Domestic Violence (experience)	Project has at least 5 years experience specifically serving DV/SA survivors	Project has 1-4 years experience specifically serving DV/SA survivors	Project has less than 1 year experience specifically serving DV/SA survivors	less than 1 yr	0	
Domestic Violence (specialized services)	Project utilizes specialized services model specifically tailored to DV/SA survivors		Project does not utilize specialized services model specifically tailored to DV/SA survivors	NO	0	
TOTAL POINTS RECEIVED					103	

0 BIPOC exits

\$23735/16 beds

Final Project Scores for All Projects

RANK	SCORE	Agency	Program	Status	Accepted/ Rejected	TOTAL	% of possible	Balance 1/Tier 2	Tier 1/Tier 2	Requested Amount
1	4	Commonbond Communities	Granada	RENEWAL	Accepted	103	87%	\$ 23,735	\$ 23,735	\$ 23,735
2	5	Tubman	TH & RRH for Youth Survivors	RENEWAL	Accepted	48	86%	\$ 284,523	\$ 284,523	\$ 260,788
3	6	Hearth Connection	PSH	RENEWAL	Accepted	98	83%	\$ 484,948	\$ 484,948	\$ 200,425
4	7	Solid Ground	Welcome Home Washington	RENEWAL	Accepted	36	82%	\$ 767,581	\$ 767,581	\$ 282,633
5	8	The Link	Rapid Rehousing	RENEWAL	Accepted	76	72%	\$ 1,424,378	\$ 1,424,378	\$ 656,797
6	9	The Link	PSH	RENEWAL	Accepted	82	69%	\$ 1,579,504	\$ 1,579,504	\$ 155,126
7	10	Dakota County	Supportive Housing Program	RENEWAL	Accepted	71	67%	\$ 2,239,138	\$ 2,239,138	\$ 659,634
8	10	S/D/C CAP Agency	Consolidated PSH	RENEWAL	Accepted	79	67%	\$ 2,394,593	\$ 2,394,593	\$ 155,455
9	12	Avivo	Permanent Housing for Chronic Homeless	RENEWAL	Accepted	28	64%	\$ 2,621,094	\$ 2,621,094	\$ 226,501
10	13	S/D/C CAP Agency	Dakota PSH Bryant & Aldrich	RENEWAL	Accepted	74	63%	\$ 2,654,869	\$ 2,654,869	\$ 33,775
11	14	S/D/C CAP Agency	SMAC PSH	RENEWAL	Accepted	70	59%	\$ 2,960,138	\$ 2,960,138	\$ 305,269
12	15	S/D/C CAP Agency	Rapid Rehousing	RENEWAL	Accepted	61	58%	\$ 3,166,918	\$ 3,166,918	\$ 206,780
13	17	Carver CDA	CCDDA PSH	RENEWAL	Accepted	65	55%	\$ 3,315,281	\$ 3,315,281	\$ 148,363
14	1	Hearth Connection	SMAC CES	RENEWAL	Accepted	32	100%	\$ 3,574,885	\$ 3,574,885	\$ 259,604
15	1	Hearth Connection	CES Expansion	RENEWAL	Accepted	32	100%	\$ 3,603,980	\$ 3,603,980	\$ 29,095
16	1	ICA	HMIS	RENEWAL	Accepted	32	100%	\$ 3,744,852	\$ 3,744,852	\$ 140,872
17	18	Minnesota One-Stop	2023 reallocation from Washington CDA	REALLOCATION	Accepted	5	6%	\$ 4,052,840	\$ 4,052,840	\$ 307,988
18	18	ICA	23 Reallocation	REALLOCATION	Accepted	5	6%	\$ 4,062,840	\$ 4,062,840	\$ 10,000
19	16	Canvas Health	Mosaic Homes	RENEWAL	Accepted	66	56%	\$ 4,104,714	\$ 4,104,714	\$ 41,874
20	20	Beacon Interfaith	2023 BONUS	NEW PROJECT	Accepted	4	5%	\$ 4,392,044	\$ 4,392,044	\$ 287,330
21	21	Southern Valley Alliance	DV Bonus	NEW PROJECT	Accepted	4	4%	\$ 4,518,319	\$ 4,518,319	\$ 126,275
Not Applicable to Be Scored or Ranked										
NR	NR	Hearth Connection	2023 Planning Grant	NEW PROJECT	Accepted	NA	Not scored	\$ 4,723,555	\$ 4,723,555	\$ 205,236

Liz Moen

From: Laquita Love-Limo
Sent: Monday, September 25, 2023 7:26 PM
To: Davis Parker; Kastler, Madeline; Christie Larson; Samantha Hawkins; 'Suzanne Misel'; Denise Smieja; mdurand@tubman.org; Tamara Stark; Thomas Ruter; Brianna Miller; Britt Heinz-Amborn; Allison Streich; Trisha Kauffman
Cc: Liz Moen; 'Peter Goldstein'; Jane Lawrenz; Jennifer Crotteau; Jayne Braun; Jaime Stampley; Jenny Mason
Subject: FW: 2023 NOFO Application!
Importance: High

Greetings:

Just in case you did not get the email blast (please sign up for our newsletter below!!!).

Thanks for all your hard work. The Coc Approved our application, please review the **Priority listing, collaborative application and planning grant application** here <https://www.smacmn.org/nofo> . Let us know if you have any suggestions or changes by 9/26/2023 at 5pm.

Best,
Laquita Love-Limo(She/Her)
CoC Coordinator
Phone: 763-760-1143
laquita@mesh-mn.org



From: Laquita Love-Limo <laquita@mesh-mn.org>
Sent: Monday, September 25, 2023 7:03 PM
To: Laquita Love-Limo <Laquita@mesh-mn.org>
Subject: 2023 NOFO Application!



SMAC NOFO Info



In this issue:

- [SMAC HUD Application Posted!](#)

Subscribe

SMAC HUD Application Posted!

The 2023 HUD Notice of Funding Opportunity application is due on Thursday, Sept. 28! A big THANK YOU to our community for showing up, being nimble, and helping out in this process. We really appreciate all your hard work and

patience - we know it was rough! Every year, we learn a lot, and this year was no exception.

The CoC-approved Collaborative Application, Priority Listing, and Planning Grant Application are posted on the [SMAC website](#)! **Please review and send feedback by 5:00pm on Tuesday, Sept. 26th!**

Thank you! Laquita Love-Limo, SMAC Coordinator: laquita@mesh-mn.org.



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SMAC

PO Box 391

Minneapolis, Mn 55442

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2023 HDX Competition Report

PIT Count Data for MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	561	756	746	807
Emergency Shelter Total	311	508	465	466
Safe Haven Total	0	0	0	0
Transitional Housing Total	104	102	101	113
Total Sheltered Count	415	610	566	579
Total Unsheltered Count	146	146	180	228

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	115	212	196	207
Sheltered Count of Chronically Homeless Persons	59	156	135	107
Unsheltered Count of Chronically Homeless Persons	56	56	61	100

2023 HDX Competition Report

PIT Count Data for MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	73	107	93	113
Sheltered Count of Homeless Households with Children	67	101	86	105
Unsheltered Count of Homeless Households with Children	6	6	7	8

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	42	21	21	17	27
Sheltered Count of Homeless Veterans	37	17	17	13	24
Unsheltered Count of Homeless Veterans	5	4	4	4	3

*For CoCs that did not conduct an unsheltered count in 2021, 2020 data were used.

2023 HDX Competition Report

HIC Data for MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current VSP Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	590	410	495	82.83%	95	95	100.00%	505	85.59%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	188	122	125	97.60%	0	63	0.00%	122	64.89%
RRH Beds	412	400	400	100.00%	0	12	0.00%	400	97.09%
PSH Beds	840	700	840	83.33%	0	0	NA	700	83.33%
OPH Beds	786	585	710	82.39%	0	0	NA	585	74.43%
Total Beds	2,816	2,217	2,570	86.26%	95	170	55.88%	2,312	82.10%

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Notes

*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.

**For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.

In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").

In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	224	182	175	147

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

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	77	88	68	92

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	277	304	293	412

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HIC Data for MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties

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FY2022 - Performance Measurement Module (Sys PM)

Summary Report for MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties

Measure 1: Length of Time Persons Remain Homeless

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

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

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

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	1349	1267	118	149	31	83	93	10
1.2 Persons in ES, SH, and TH	1490	1403	156	186	30	101	112	11

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

This measure includes data from each client's "Length of Time on Street, in an Emergency Shelter, or Safe Haven" (Data Standards element 3.17) response and prepends this answer to the client's entry date effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

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

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	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Submitted FY 2021	FY 2022	Submitted FY 2021	FY 2022	Difference	Submitted FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1762	1594	478	496	18	260	243	-17
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	2517	1728	479	500	21	314	275	-39

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FY2022 - Performance Measurement Module (Sys PM)

Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)	Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
		FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns	FY 2022	% of Returns
Exit was from SO	108	4	4%	5	5%	1	1%	10	9%
Exit was from ES	232	5	2%	2	1%	7	3%	14	6%
Exit was from TH	33	0	0%	0	0%	0	0%	0	0%
Exit was from SH	0	0		0		0		0	
Exit was from PH	353	12	3%	8	2%	14	4%	34	10%
TOTAL Returns to Homelessness	726	21	3%	15	2%	22	3%	58	8%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

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

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		746	
Emergency Shelter Total	508	465	-43
Safe Haven Total	0	0	0
Transitional Housing Total	102	101	-1
Total Sheltered Count	610	566	-44
Unsheltered Count		180	

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	1527	1471	-56
Emergency Shelter Total	1387	1324	-63
Safe Haven Total	0	0	0
Transitional Housing Total	151	174	23

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FY2022 - Performance Measurement Module (Sys PM)

Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	163	165	2
Number of adults with increased earned income	16	21	5
Percentage of adults who increased earned income	10%	13%	3%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	163	165	2
Number of adults with increased non-employment cash income	41	38	-3
Percentage of adults who increased non-employment cash income	25%	23%	-2%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	163	165	2
Number of adults with increased total income	47	55	8
Percentage of adults who increased total income	29%	33%	4%

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FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	98	102	4
Number of adults who exited with increased earned income	24	18	-6
Percentage of adults who increased earned income	24%	18%	-6%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	98	102	4
Number of adults who exited with increased non-employment cash income	38	22	-16
Percentage of adults who increased non-employment cash income	39%	22%	-17%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	98	102	4
Number of adults who exited with increased total income	56	32	-24
Percentage of adults who increased total income	57%	31%	-26%

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FY2022 - Performance Measurement Module (Sys PM)

Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	1069	1016	-53
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	128	155	27
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	941	861	-80

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

	Submitted FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1626	1492	-134
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	317	282	-35
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1309	1210	-99

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FY2022 - Performance Measurement Module (Sys PM)

Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2022 (Oct 1, 2021 - Sept 30, 2022) reporting period.

Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	308	198	-110
Of persons above, those who exited to temporary & some institutional destinations	78	40	-38
Of the persons above, those who exited to permanent housing destinations	136	81	-55
% Successful exits	69%	61%	-8%

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

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FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1194	1007	-187
Of the persons above, those who exited to permanent housing destinations	609	502	-107
% Successful exits	51%	50%	-1%

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

	Submitted FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	994	1119	125
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	937	1060	123
% Successful exits/retention	94%	95%	1%

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FY2022 - SysPM Data Quality

MN-503 - Dakota, Anoka, Washington, Scott, Carver Counties

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	246	301	454	92	105	102	1116	1248	1573	277	295	271			
2. Number of HMIS Beds	246	285	402	83	105	102	1024	1156	1289	277	295	271			
3. HMIS Participation Rate from HIC (%)	100.00	94.68	88.55	90.22	100.00	100.00	91.76	92.63	81.95	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	1231	1446	1314	176	164	174	1231	1361	1386	677	712	621	297	305	328
5. Total Leavers (HMIS)	897	1010	962	74	55	78	289	249	260	339	401	282	151	186	134
6. Destination of Don't Know, Refused, or Missing (HMIS)	306	221	141	6	3	6	39	48	24	10	6	14	3	10	16
7. Destination Error Rate (%)	34.11	21.88	14.66	8.11	5.45	7.69	13.49	19.28	9.23	2.95	1.50	4.96	1.99	5.38	11.94

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FY2022 - SysPM Data Quality

**2023 HDX Competition Report
 Submission and Count Dates for MN-503 - Dakota, Anoka, Washington,
 Scott, Carver Counties**

Date of PIT Count

	Date	Received HUD Waiver
Date CoC Conducted 2023 PIT Count	1/25/2023	

Report Submission Date in HDX

	Submitted On	Met Deadline
2023 PIT Count Submittal Date	4/28/2023	Yes
2023 HIC Count Submittal Date	4/28/2023	Yes
2022 System PM Submittal Date	2/27/2023	Yes