

Before Starting the CoC Application

The CoC Consolidated Application is made up of two parts: the CoC Application and the CoC Priority Listing, with all of the CoC's project applications either approved and ranked, or rejected. The Collaborative Applicant is responsible for submitting both the CoC Application and the CoC Priority Listing in order for the CoC Consolidated Application to be considered complete.

The Collaborative Applicant is responsible for:

1. Reviewing the FY 2017 CoC Program Competition NOFA in its entirety for specific application and program requirements.
 2. Ensuring all questions are answered completely.
 3. Reviewing the FY 2017 CoC Consolidated Application Detailed Instructions, which gives additional information for each question.
 4. Ensuring all imported responses in the application are fully reviewed and updated as needed.
 5. The Collaborative Applicant must review and utilize responses provided by project applicants in their Project Applications.
 6. Some questions require the Collaborative Applicant to attach documentation to receive credit for the question. This will be identified in the question.
- Note: For some questions, HUD has provided documents to assist Collaborative Applicants in filling out responses. These are noted in the application.
 - All questions marked with an asterisk (*) are mandatory and must be completed in order to submit the CoC Application.

For CoC Application Detailed Instructions [click here](#).

1A. Continuum of Care (CoC) Identification

Instructions:

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

1A-1. CoC Name and Number: CA-506 - Salinas/Monterey, San Benito Counties CoC

1A-2. Collaborative Applicant Name: Coalition of Homeless Services Providers

1A-3. CoC Designation: CA

1A-4. HMIS Lead: Coalition of Homeless Services Providers

1B. Continuum of Care (CoC) Engagement

Instructions:

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

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

Organization/Person Categories	Participates in CoC Meetings	Votes, including electing CoC Board Members
Local Government Staff/Officials	Yes	Yes
CDBG/HOME/ESG Entitlement Jurisdiction	Yes	Yes
Law Enforcement	Yes	No
Local Jail(s)	No	No
Hospital(s)	Yes	Yes
EMT/Crisis Response Team(s)	Yes	Yes
Mental Health Service Organizations	Yes	Yes
Substance Abuse Service Organizations	Yes	Yes
Affordable Housing Developer(s)	Yes	Yes
Disability Service Organizations	Yes	Yes
Disability Advocates	Yes	Yes
Public Housing Authorities	Yes	Yes
CoC Funded Youth Homeless Organizations	Yes	Yes
Non-CoC Funded Youth Homeless Organizations	Yes	No
Youth Advocates	No	No
School Administrators/Homeless Liaisons	Yes	Yes
CoC Funded Victim Service Providers	Yes	Yes
Non-CoC Funded Victim Service Providers	No	No
Domestic Violence Advocates	Yes	No
Street Outreach Team(s)	Yes	Yes
Lesbian, Gay, Bisexual, Transgender (LGBT) Advocates	Yes	No
LGBT Service Organizations	Yes	Yes
Agencies that serve survivors of human trafficking	Yes	Yes
Other homeless subpopulation advocates	Yes	No
Homeless or Formerly Homeless Persons	Yes	Yes
Other:(limit 50 characters)		

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

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

The CoC is comprised of a broad array of organizations and groups involved in the regional effort to end homelessness. Two specific examples are: Chinatown is the largest concentrated homeless encampment area in the CoC. The Chinatown Homeless Action Team and the Salinas Downtown Community Board are comprised of homeless service providers, street homeless, affordable housing developers, local business, city and county staff and other stakeholders. Input is solicited to address immediate and long term needs and solutions.

The Veterans Interdisciplinary Group is comprised of case managers of homeless Veteran program that meet to manage cases and share client input. This information travels upstream to the Veterans Action Team which is comprised of decision makers and the CoC representative who work together on policy and procedural issues in order to benefit homeless Veterans. Input and recommendations then flow to the CoC and are used to adjust, add or modify programs.

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

In early 2017, the CoC Board restructured its membership composition to strengthen local efforts & increase regional collaboration. Membership is now comprised of 3 categories. Category 1 voting members are comprised of jurisdictional mayors or councilmembers appointed by the Mayors Association, Homeless liaison appointed by the Office of Education, Members of the Board(s) of Supervisors and the Executive Director of the Housing Authority. Category 2 voting members are comprised of homeless representatives, faith communities, philanthropy, affordable housing developers, homeless service providers and homeless health care. Category 3 non-voting members represent the Health Department, Dept of Social Services and Health and Human Services. Annual solicitation is achieved through a contact list of approx. 300 organizations, groups, jurisdictions, advocates and interested individuals. The public is encouraged to attend meetings to become familiar with efforts & outcomes of the board.

1B-3. Describe how the CoC notified the public that it will accept and consider proposals from organizations that have not previously received

**CoC Program funding in the FY 2017 CoC Program Competition, even if the CoC is not applying for new projects in FY 2017. The response must include the date(s) the CoC made publicly knowing they were open to proposals.
(limit 1000 characters)**

The Collaborative Applicant shares CoC information to a contact list of approximately 300 organizations, groups, jurisdictions, advocates and interested individuals. The CA records contact information for any organization who has expressed interest in applying for funds. On 7/17/17, the CA issued an email notice to the contact list of 300 providing information about the NOFA release. On 7/19/17, the CoC published NOFA information on the CA Facebook and website. On 7/20 & 7/27/17, published newspaper notices in both counties within the CoC. On 7/31/17, the CA conducted a NOFA technical assistance session for all interested parties which included an overview of the funding process, housing priorities and the scoring and ranking process. The technical assistance session information was included in all published notices. The CA provides individualized face-to-face technical assistance to new project applicants as well as renewal applicants.

1C. Continuum of Care (CoC) Coordination

Instructions:

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

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

Entities or Organizations the CoC coordinates planning and operation of projects	Coordinates with Planning and Operation of Projects
Housing Opportunities for Persons with AIDS (HOPWA)	Yes
Temporary Assistance for Needy Families (TANF)	Yes
Runaway and Homeless Youth (RHY)	Yes
Head Start Program	No
Housing and service programs funded through Department of Justice (DOJ) resources	Yes
Housing and service programs funded through Health and Human Services (HHS) resources	Yes
Housing and service programs funded through other Federal resources	Yes
Housing and service programs funded through state government resources	Yes
Housing and service programs funded through local government resources	Yes
Housing and service programs funded through private entities, including foundations	Yes
Other:(limit 50 characters)	

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

The one local ESG recipient, City of Salinas, consults with the CoC in the development of written standards for providing ESG support. Standards include, but are not limited to; program eligibility, mechanisms to reduce service

duplication, Coordinated Entry requirements and standards for determining the type and duration of housing stabilization services. In 2016, the State of California implemented a complete ESG redesign. The City of Salinas agreed to become the Administrative Entity for all ESG funds, not just city limited entitlement, for the entire CoC. The CoC and the ESG recipient meet almost weekly to develop local priorities, craft RFP's, provide technical assistance and conduct monitoring activities. Through this very effective partnership, the CoC was able to secure almost \$1 million in homeless assistance in the form of rapid re-housing, homeless prevention, street outreach and emergency shelter support.

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

The CoC adheres to state laws protecting location and identify of DV housing and victims. Unique identifiers are used for case coordination between victim service providers and homeless assistance providers. CoC victim service providers are often homeless housing providers which facilitates an easy access to either victim services or housing services. Lethality assessment helps clients select among housing options. Safety plans, housing in units with security, transportation, medical care, legal services, Dept. of Justice victim's assistance and alerts from the District Attorney when abusers are released all help ensure safety. Free cell phones, protected mailboxes, in-home training and finance planning help client's bridge into the community. Special attention is paid to meeting the special needs of human trafficking victims.

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

Through the Coalition of Homeless Services Providers, the CoC provides Coordinated Entry (CE) training to more than 100 case managers and other agency staff throughout the system and ensures that knowledge remains current by routinely scheduled CE trainings. The CoC secured a consultant to ensure the CE process represent best practices which are documented in policy and taught in trainings. DV survivors have access to the full housing/service system available through CE. CE trained staff actively collaborate with victim service agencies and coordinate around safety planning and how to ensure trauma informed, culturally appropriate services. The CoC cross analyzes DV related data from homeless census findings, victim service organizations, state and federal trends to prioritize safety, fine tune programs and foster collaboration.

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

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

Public Housing Agency Name	% New Admissions into Public Housing and Housing Choice Voucher Program during FY 2016 who were homeless at entry	PHA has General or Limited Homeless Preference
Housing Authority of the County of Monterey	35.00%	Yes-Both
Santa Cruz Housing Authority	37.00%	Yes-HCV

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

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

Not applicable

**1C-5. Describe the actions the CoC has taken to: (1) address the needs of Lesbian, Gay, Bisexual, Transgender (LGBT) individuals and their families experiencing homelessness, (2) conduct regular CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity, including Gender Identify Equal Access to Housing, Fina Rule; and (3) implementation of an anti-discrimination policy.
(limit 1000 characters)**

Through the Coalition of Homeless Services Providers, providers receive annual training on proper implementation of HUD's Equal Access and Gender Identify Rule and Fair Housing & Equal Opportunity (CFR 578.93). HUD funded agencies also provide training to staff. Training topics include, but are not limited to; housing individuals in accordance with gender identity and not requiring proof of gender identity for service, providing equal access, non-discrimination requirements, creation of inclusive spaces by ensuring no client is isolated or segregated, varying the use of time and space to support client privacy and respect, creation of inclusive standards to ensure safety, privacy

and to eliminate verbal or physical harassment. Each HUD-funded program possesses and implements anti-discrimination policies in accordance with HUD requirements.

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

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

1D. Continuum of Care (CoC) Discharge Planning

Instructions:

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

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

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

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

not applicable

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

Foster Care:	<input checked="" type="checkbox"/>
Health Care:	<input checked="" type="checkbox"/>

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

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

Instructions

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

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

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

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

1E-2. Severity of Needs and Vulnerabilities

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

The Rating Panel reviews and analyzes a broad range of collected data as part of the ranking process. The CoC utilizes the Service Prioritization Tool (SPDAT), an evidence informed approach to assess an individual's or family's acuity. Information includes, but is not limited to; history of homelessness, use of community emergency services, history of assault; suicidal ideation, legal issues, risk of exploitation, self-care, wellness, physical health, substance use, family dynamic and other factors. This information is used to populate the Coordinated Entry System which prioritizes those with the most vulnerabilities for program enrollment. Client level data is captured through HMIS on a project level. The Rating Panel considers the projects ability to serve the most vulnerable when making ranking decisions. Other factors include, Alignment with HUD priorities; Consistency with Community Need; Outcomes e.g. using APR's to gauge progress re: rapid return to permanent housing.

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

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

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

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

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

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

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

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

Reallocation: Option 1

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

1E-5. If the CoC rejected or reduced project application(s), enter the date the CoC and Collaborative Applicant notified project applicants their project application(s) were being rejected or reduced in writing outside of e-snaps. 09/01/2017

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

1E-5a. Provide the date the CoC notified applicant(s) their application(s) were accepted and ranked on the Priority Listing, in writing, outside of e-snaps. 09/01/2017

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

Reallocation Supporting Documentation

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

Document Type	Required?	Document Description	Date Attached
Reallocation Supporting Documentation	No	Reallocation Docu...	09/22/2017

Attachment Details

Document Description: Reallocation Documentation

2A. Homeless Management Information System (HMIS) Implementation

Intructions:

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

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

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

2A-1a. Provide the page number(s) where the roles and responsibilities of the CoC and HMIS Lead can be found in the attached document(s) referenced in 2A-1. In addition, indicate if the page number applies to the Governance Charter or MOU/MOA. 29-35

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

2A-3. What is the name of the HMIS software vendor? Service Point

2A-4. Using the drop-down boxes, select the HMIS implementation Coverage area. Single CoC

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

in that project type.

Project Type	Total Beds in 2017 HIC	Total Beds in HIC Dedicated for DV	Total Beds in HMIS	HMIS Bed Coverage Rate
Emergency Shelter (ESG) beds	511	40	282	59.87%
Safe Haven (SH) beds	0	0	0	
Transitional Housing (TH) beds	590	0	521	88.31%
Rapid Re-Housing (RRH) beds	19	0	19	100.00%
Permanent Supportive Housing (PSH) beds	277	0	78	28.16%
Other Permanent Housing (OPH) beds	0	0	0	

**2A-5a. To receive partial credit, if the bed coverage rate is below 85 percent for any of the project types, the CoC must provide clear steps on how it intends to increase this percentage for each project type over the next 12 months.
(limit 1000 characters)**

The HUD VASH program does not currently participate in HMIS which accounts for the PSH coverage. Also, several grassroots, or faith based, emergency shelter programs have inadequate staff resources and capacity to capture HMIS data and no funding or leverage exists that will convince these providers to participate at this time. Because the local CE process is built into a HOME-Application and not HMIS reliant, we have been successful at bringing several grassroots emergency shelter providers into CE as a referring group. Our hope is that they will see the value of CE participation and express interest in HMIS in the next 12 months.

**2A-6. Annual Housing Assessment Report 7
(AHAR) Submission: How many Annual Housing Assessment Report (AHAR) tables were accepted and used in the 2016 AHAR?**

**2A-7. Enter the date the CoC submitted the 2017 Housing Inventory Count (HIC) data into the Homelessness Data Exchange (HDX).
(mm/dd/yyyy) 04/27/2017**

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

Instructions:

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

2B-1. Indicate the date of the CoC's 2017 PIT count (mm/dd/yyyy). If the PIT count was conducted outside the last 10 days of January 2017, HUD will verify the CoC received a HUD-approved exception. 01/25/2017

2B-2. Enter the date the CoC submitted the PIT count data in HDX. (mm/dd/yyyy) 04/27/2017

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

Instructions:

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

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

The methodology remains the same and has proven to be sound. The only change in that we have built in more specific redundancies and streamlined forms to make the process less burdensome to providers, especially those that do not participate in HMIS. It is important to note that it appears the CoC lost beds or units for two primary reasons. 1. 3 former homeless hsg programs reclassified so were removed from HIC/PIT. A Rapid Rehousing program provided the CoC with incorrect HIC and PIT information for two years. They reported beds as opposed to units and reported maximum program capacity instead of actual usage. This greatly inflated previous numbers. This has been rectified, but the comparable years reflect the mistake.

2C-2. Did your CoC change its provider coverage in the 2017 sheltered count? Yes

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

Beds Added:	92
Beds Removed:	196
Total:	-104

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

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

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Beds Added:	0
Beds Removed:	0
Total:	0

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

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

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

The CoC contracts with Applied Survey Research (ASR), a nonprofit research firm founded in 1980. ASR developed a unique methodology which has been cited as a best practice by HUD, which we use to both count and survey the homeless population. With two exceptions, the CoC utilized the same best practices methodology established by ASR. The two exceptions were: 1. Identification of additional "hot spots." For a five month period before the PIT, the CoC requested encampment locations and composition from law enforcement, business, jurisdictions, public works, faith communities, park rangers, fire departments and others. This "hot spot" information was mapped, tracked and used to enhance PIT efforts. 2. Increased youth efforts. The CoC significantly enhanced youth based PIT efforts. The changes described resulted in our ability to locate hidden homeless who had not been counted in previous PIT counts.

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

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

The CoC tripled efforts related to the youth PIT in 2017. In addition to standard PIT strategies, the CoC partnered with four youth based programs; Community Human Services, Ranch Cielo, EpiCenter and Peacock Acres to hyper-focus on the youth PIT. Special focus groups were conducted with current or formally homeless youth within these programs who had extensive knowledge on where

unsheltered youth sleep and how best to locate them. A team of knowledge youth who were paid for their time, led efforts to identify youth for the PIT. Special efforts carefully designed to eliminate duplication were employed such as free early breakfast for homeless youth on the day of the count and special outreach to beaches and skateboard parks. Rancho Cielo utilized its vans and drivers who transported the youth led teams throughout the CoC on the day of the count.

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

People who are chronically homelessness tend to cycle in and out of public services, like emergency rooms, hospitals and jails. The CoC stepped up efforts to partner with public service facilities to identify and count individuals and families experiencing chronic homelessness. Other such examples include partnerships with the Whole Person Care program designed to identify and provide wrap around services to homeless individuals and families who are identified as high utilizers of public services.

3A. Continuum of Care (CoC) System Performance

Instructions

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

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

In 2015, the number of first time homeless was 1,001. In 2016, the number was 1,091 which represents an increase of 90. The increase is attributed to several overarching factors. The average 1 bedroom unit in Monterey is \$1,850 and rising. Percentage of available units is less than 2%. Insufficient numbers of landlords accept subsidized housing vouchers or participate in rapid rehousing due to lack of incentive. Risk factors are identified through the CE process which uses the VI-SPDAT which captures housing history, barriers, family dynamics, mental/physical health & other key data used to determine vulnerabilities. The Coalition of Homeless Services Providers is responsible for overseeing the CoC strategy. The CoC has launched a multifaceted landlord recruitment campaign (print, TV, landlord summit), is working to increase homeless prevention resources & conducting local polling to determine if a local housing bond would pass to help build additional truly affordable housing.

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

In 2015, the length of time homeless was 191 days. In 2016, the number was 271 which represents an increase of 80 days. As discussed in 3A-1, the increase is attributed to several overarching factors. PIT counts, HMIS, Coordinated Entry and comparable databases represent our primary sources of data related to length of time homeless. We are employing 2 key strategies : 1.

Increase inventory of easily and quickly accessible affordable housing by exploring the possibility of a county housing bond to step up housing development, 2. Expanding capacity to provide RRH and homeless prevention activities. RRH has been successful in reducing Veteran length of time homeless due to extremely well funded efforts. The Coalition of Homeless Services Providers is responsible for overseeing the CoC strategy.

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

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

In 2015, the number of successful permanent housing placements was 588. In 2016, the number of successful placements was 615 which represents an increase of permanent placements of 144. In 2015, the number of retentions was 139. In 2016, the number was 103 which represents a decrease of 36. The CoC is working hard to place priority emphasis on increasing targeted housing navigation services within programs which has had a positive impact on placements. The extraordinarily high cost of rental housing in the CoC negatively impacts retention rates. The CoC has implemented a landlord recruitment campaign (TV, print, summits, one on one) and is polling the possibility of a local housing bond to develop additional truly affordable housing. Length of time homeless is identified via CE and HMIS data. The Coalition of Homeless Services Providers is responsible for overseeing the CoC strategy.

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

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

In 2015, the # related to return to homelessness was 487. In 2016, the # was 628 which represents an increase of 141. The increase is attributed to several overarching factors. The average 1 bdm unit is \$1,850 with % of available units less than 2%. Insufficient numbers of landlords accept subsidized housing vouchers due to lack of incentive. The CoC includes a large network of srvs providers & community resources that focus on attaining residential stability & improving social stability in a variety of areas. The CoC has launched a multifaceted landlord recruitment campaign, is working to increase HP resources & conducting local polling to determine if a local housing bond would pass to help build additional affordable housing. ES & TH programs can provide tailored services, but without affordable inventory, the chances of a client returning to homelessness increase. The Coalition of Homeless Services Providers is responsible for overseeing the CoC strategy.

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

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

Through the Services, Income and Employment committee of the CoC board, agency staff is provided with specific training on best practices as they relate to linking clients with mainstream benefits and how to assist clients with preparing, searching and securing employment. Special emphasis is placed on reducing barriers for those with challenges such as previous incarceration or substance abuse histories. HUD funded programs work closely with the Department of Social Services and Health and Human Services to assist clients in accessing TANF, GA and Social Security and with the VA to access veteran's benefits. The CoC and providers work closely with mainstream employment organizations such as the Employment Development, Goodwill Industries, One Stop Career Centers, Labor Ready and others. The Coalition of Homeless Services Providers is responsible for overseeing the CoC strategy.

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

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

not applicable

**3A-7. Enter the date the CoC submitted the System Performance Measures data in HDX, which included the data quality section for FY 2016.
(mm/dd/yyyy)** 05/26/2017

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

Instructions

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

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homelessness persons identified on the HIC.	0	66	66

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

Total number of beds dedicated as Dedicated Plus	0
Total number of beds dedicated to individuals and families experiencing chronic homelessness	48
Total	48

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

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

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

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

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

PIT counts, HMIS, and comparable data bases represent our primary sources of data related to individuals' and families' length of time homeless. The CoC is comprised of two counties. Each county operates Family Stabilization and Housing Support programs geared to delivering rapid rehousing to homeless families. In addition, 40% of the CoC ESG allocation is dedicated to rapid rehousing efforts with emphasis on family RRH. The goal of each of these programs is to rapidly rehouse participants within 30 days of becoming homeless. This is a difficult due to an insufficient number of landlords willing to participate in RRH programs because they have no financial incentive to do so. The CoC has launched a multifaceted landlord recruitment campaign (print, TV, landlord summit) and is working to increase landlord participation. The Coalition of Homeless Services Providers is responsible for overseeing the CoC's strategy.

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

	2016	2017	Difference
Number of CoC Program and non-CoC Program funded PSH units dedicated for use by chronically homelessness persons identified on the HIC.	0	66	66

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

Providers receive annual training on proper implementation of HUD's Equal Access and Gender Identify Rule and Fair Housing & Equal Opportunity (CFR 578.93). HUD funded agencies also provide training to staff. Training topics include, but are not limited to; housing individuals in accordance with gender identity and not requiring proof of gender identity for service, providing equal

access, non-discrimination requirements, creation of inclusive spaces by ensuring no client is isolated or segregated, varying the use of time and space to support client privacy and respect, creation of inclusive standards to ensure safety, privacy and to eliminate verbal or physical harassment. In addition, training is provided to ensure programs promote accessibility and integrative housing for persons with disabilities and have prohibitions against involuntary family separation. Each HUD-funded program possesses and implements anti-discrimination policies in accordance with HUD requirements.

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

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

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

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

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

Youth based CoC agencies have been successful in securing additional funding from varied sources such as: Health & Human Services; Family & Youth Services Bureau; Basic Center Program; Street Outreach Program; Community Action Partnership; CDBG; private foundations and service organizations. At one particular program, 41 youth were reunified with family or secured alternative placement between 9/30/16-3/31/17, all positive permanent

outcomes. HMIS is used to collect client demographic information, service statistics and client outcomes. Outcomes are also tracked via a Self-Sufficiency Matrix tool that measures clients at intake & discharge in 8 different domains, rating them on a scale from 1-5, where 1 equals "In Crisis" and 5 equals "Thriving." The domains include mental health, substance abuse, support systems, housing, employment, food, health care, and education.

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

Funded programs have dedicated staff who serve as point of contact for ensuring the educational needs of program participants are met. Posters with information on parental rights are on display in all HUD-funded facilities. Children Welfare Agency staffs attend CoC meetings and serve as a conduit to provide information to front line workers in order to fully inform them of program eligibility as well as identifying those in need of access to educational services. Runaway homeless youth are identified and linked with educational services. The CoC works closely with Homeless Liaisons to ensure those in need are identified and matched with services. The Juvenile justice system works with providers to ensure the educational needs of children within the system are met. The County McKinney-Vento representative serves on the CoC board.

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

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

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

**(GPD).
(limit 1000 characters)**

Local decisions and policies are crafted by the Veterans Action Group (VAT) and interdisciplinary case conferencing is accomplished through the Veterans Interdisciplinary Group (VIG.) VIG is populated by case managers who work together to identify ideal housing options, plan outreach paths, locate homeless Veterans who have dropped out of sight and work together to reduce barriers and increase outcomes. Representation includes SSVF providers, HUD-VASH, Per Diem, VA Clinic and the CoC representative. Three specific homeless Veteran programs conduct outreach within the CoC to identify homeless Veterans. Identified Veterans are entered into a Veteran specific by name list which is reconciled with the Master List of the Coordinated Entry System. Homeless Veterans are assessed via SPDAT and flow through the Coordinated Entry System to SSVF, HUD-VASH, Per Diem or other CoC housing. Data is entered into HMIS, analyzed and used to fine tune programmatic components.

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

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

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

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

Instructions:

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

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

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

4A-1a. Mainstream Benefits

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

The Coalition of Homeless Services Providers is the organization responsible for overseeing the CoC's strategy for mainstream benefits. The CoC works with the Monterey County Dept. of Social Services (DSS) and San Benito Co. Health & Human Services in regard to accessing SOAR. Case managers assist program participants in completion of the DSS single application related to TANF, food stamps, general assistance and other benefits. Enrollment for health insurance is conducted by DSS, San Benito Health & Human Services, Salud Para la Gente, Clinica de Salud, Community Bridges, CSUMB Learning Center and the Franciscan Workers. The Services/Income/Benefits subcommittee of the CoC Board provides mainstream benefits training to homeless provider staff. Client level data related to mainstream benefit enrollment is entered into HMIS, analyzed and used to monitor outcomes

across the CoC.

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

Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO project applications in the FY 2017 competition (new and renewal)	13.00
Total number of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications that selected "low barrier" in the FY 2017 competition.	10.00
Percentage of PH (PSH and RRH), TH, Safe-Haven and non-Coordinated Entry SSO renewal and new project applications in the FY 2017 competition that will be designated as "low barrier"	76.92%

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

Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH project applications in the FY 2017 competition (new and renewal).	13.00
Total number of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications that selected Housing First in the FY 2017 competition.	10.00
Percentage of PSH, RRH, non-Coordinated Entry SSO, Safe Haven and TH renewal and new project applications in the FY 2017 competition that will be designated as Housing First.	76.92%

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

Multiple outreach teams cover the majority of the CoC's geographic area with trained teams deployed on a weekly basis at minimum. Examples include: Youth with particular attention to those who have experienced or at-risk of sexual abuse, prostitution, trafficking or sexual exploitation. Special outreach teams concentrate on reaching those with mental health challenges. Tailored outreach is provided to homeless Veterans. The Mobile Outreach Services Team (MOST) travels throughout the CoC. Hot-spotting is used to identify concentrations of high-needs individuals geographically. Under ROI's data sharing across the system helps identify those less likely to request assistance more easily from multiple systems and to match the appropriate outreach team to the individual client. The Coordinated Entry System ensure standardization of housing assessment and referrals, improve targeting and more quickly connect people to appropriate housing and services.

4A-5. Affirmative Outreach
Specific strategies the CoC has implemented that furthers fair housing as detailed in 24 CFR 578.93(c) used to market housing and supportive services to eligible persons regardless of race, color, national origin,

religion, sex, gender identify, sexual orientation, age, familial status, or disability; who are least likely to apply in the absence of special outreach.

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

The CoC works to housing and services comply with all state, federal, and local fair housing laws. No program applicant is denied housing or services based on their race, color, national origin, religion, age, sex, marital status, familial status, disability, sexual orientation, and gender identity. Training is provided to providers, to include outreach workers who engage with homeless least likely to apply for programs, on non-discrimination and fair housing policies. Fair Housing information is provided in a culturally and linguistically appropriate manner throughout the CoC. Although all providers effectively communicate Fair Housing information to disabled clients, the Central Coast Center for Independent Living serves as the CoC expert in Fair Housing issues as they relate to the disabled homeless population. The CoC works with local government to ensure fair housing efforts are coordinated. Echo (Eden Council for Hope and Opportunity) serves as the local Fair Hsg Agency.

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

	2016	2017	Difference
RRH beds available to serve all populations in the HIC	317	19	-298

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

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

4B. Attachments

Instructions:

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

Document Type	Required?	Document Description	Date Attached
01. 2016 CoC Consolidated Application: Evidence of the CoC's communication to rejected participants	Yes	Evidence of CoC C...	09/21/2017
02. 2016 CoC Consolidated Application: Public Posting Evidence	Yes	Public Posting No...	09/22/2017
03. CoC Rating and Review Procedure (e.g. RFP)	Yes	Rating and Review...	09/22/2017
04. CoC's Rating and Review Procedure: Public Posting Evidence	Yes	Rating and Review...	09/22/2017
05. CoCs Process for Reallocating	Yes	CoC Reallocation ...	09/22/2017
06. CoC's Governance Charter	Yes	Gov Charter HMIS ...	09/22/2017
07. HMIS Policy and Procedures Manual	Yes	HMIS Policy and P...	09/21/2017
08. Applicable Sections of Con Plan to Serving Persons Defined as Homeless Under Other Fed Statutes	No		
09. PHA Administration Plan (Applicable Section(s) Only)	Yes	PHA Admin Plan	09/22/2017
10. CoC-HMIS MOU (if referenced in the CoC's Governance Charter)	No		
11. CoC Written Standards for Order of Priority	No	Priority Standard...	09/22/2017
12. Project List to Serve Persons Defined as Homeless under Other Federal Statutes (if applicable)	No		
13. HDX-system Performance Measures	Yes	HDX System Perfor...	09/21/2017
14. Other	No	Hsg Authority Let...	09/22/2017
15. Other	No		

Attachment Details

Document Description: Evidence of CoC Communication

Attachment Details

Document Description: Public Posting Notices

Attachment Details

Document Description: Rating and Review Procedure

Attachment Details

Document Description: Rating and Review Public Noticing

Attachment Details

Document Description: CoC Reallocation Process

Attachment Details

Document Description: Gov Charter HMIS Section

Attachment Details

Document Description: HMIS Policy and Procedures

Attachment Details

Document Description:

Attachment Details

Document Description: PHA Admin Plan

Attachment Details

Document Description:

Attachment Details

Document Description: Priority Standards for Priority Order

Attachment Details

Document Description:

Attachment Details

Document Description: HDX System Performance Measures

Attachment Details

Document Description: Hsg Authority Letter of CoC Involvement

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. Identification	09/05/2017
1B. Engagement	09/13/2017
1C. Coordination	09/14/2017
1D. Discharge Planning	09/05/2017
1E. Project Review	09/14/2017
1F. Reallocation Supporting Documentation	09/22/2017
2A. HMIS Implementation	09/22/2017
2B. PIT Count	09/14/2017
2C. Sheltered Data - Methods	09/22/2017
3A. System Performance	09/22/2017
3B. Performance and Strategic Planning	09/22/2017

4A. Mainstream Benefits and Additional Policies	09/22/2017
4B. Attachments	09/22/2017
Submission Summary	No Input Required

Katherine Thoeni

From: Katherine Thoeni <chspmontry@aol.com>
Sent: Friday, September 1, 2017 10:49 AM
To: 'Ashley Schweickart'; 'Barbara Mitchell'; 'Betsy Wilson'; 'Bonnie Jellison'; 'Carlos Jurado'; 'Celia Romero'; 'Christina Soto'; 'Enrique Arreola'; 'Jack Murphy'; 'James Rydingsword'; 'Janelle Delgado'; 'Jean Goebel'; 'Jill Allen'; 'Katherine Thoeni'; 'Kathy Damon'; 'Katrina McKenzie'; 'Kimberly Ferguson (kimberlyf@hrcmc.org)'; 'Kurt Schake'; 'Linda Byrne'; 'Maria Mola'; 'Nancy DeSerpa'; 'Natalie Mayana'; 'Reyes Bonilla (rbonilla@communityhomelessolutions.org)'; 'Rob Rapp'; 'Robin McCrae'; 'Roxanne Wilson'; 'Roy Melendez'; 'Sarahi Soto'; 'Scott Lines'; 'Shannon Tonkin'; 'Sophie at Interim'
Subject: 2017 HUD Competition Priority Ranking
Attachments: 2017 HUD CoC Competition Priority Ranking.pdf
Importance: High

Good Morning,

Attached please find the priority ranking for the 2017 National HUD CoC Competition. The priority ranking was approved by the Leadership Council (CoC Board) on August 31, 2017. The approved priority ranking will be submitted to HUD as part of the Consolidated Application. The Coalition will now close the local portion of the process and focus on developing the overall Consolidated Application.

Thank you to everyone for your hard work. Please do not hesitate to contact me directly with any questions you may have.

Katherine Thoeni
Executive Officer
Coalition of Homeless Services Providers
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MONTEREY COUNTY WEEKLY

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Seaside, CA 93955

Proof of publication

State of California
County of Monterey

I am a citizen of the
United States and a resident of
the State of California. I am
over the age of 18 years and
not party to or interested in the
above-entitled matter.

I am the principal clerk of
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a newspaper of general
circulation, published weekly by
Milestone Communications, Inc.
in the City of Seaside,
County of Monterey,
and which newspaper has been
adjudicated a newspaper of
general circulation by the
Superior Court of the County
of Monterey, State of
California; that the notice of
which the annexed is a printed
copy has been published in
each regular and entire issue of
said newspaper and not in any
supplement thereof on the
following dates to wit.

July 27, 2017

I certify (or declare) under
penalty of perjury that the
foregoing is true and correct.

Name.....Linda S. Maceira.....

Signature.....*Linda S. Maceira*.....

Dated:..July 27, 2017..Monterey, California

Notice of Monterey/San Benito County's Continuum of Care (CoC) Application Process for US Dept. of HUD's FY 2017 CoC Program Notification of Funding Availability (NOFA).

The US Dept of Housing and Urban Development (HUD) issued its Notice Of Funding Availability (NOFA) for FY 2017 Continuum of Care (CoC) Homeless Assistance Programs on July 14, 2017. The funds will pay for development, rehabilitation or leasing of housing and for supportive services for programs serving the homeless. The Monterey/San Benito County CoC's Leadership Council and Collaborative Applicant, the Coalition of Homeless Services Providers, announces formation of a CoC Working Group that will assist over the next several weeks' project applicants in response to the Homeless Assistance portion of the NOFA. NOTE: All local 2017 HUD CoC Project Applications are due by August 17, 2017. A mandatory pre-proposal conference will be conducted at 2:00 on July 31, 2017 at 220 12th Street, Marina for all interested applicants. The deadline for the submittal of the Collaborative Application, Project Applications and Project Priority Listing is September 28, 2017. Call the Coalition of Homeless Services Providers at (831) 883-3080 to participate, or for general information. All prospective applicants are encouraged to thoroughly read the full US Dept. of HUD NOFA and related materials, available at www.hudexchange.info.

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The US Dept of Housing and Urban Development (HUD) issued its Notice Of Funding Availability (NOFA)

posted on *Thu* 07/20/2017 - 5:23pm



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Location:

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Summary:

The US Dept of Housing and Urban Development (HUD) issued its Notice Of Funding Availability (NOFA) for FY 2017 Continuum of Care (CoC) Homeless Assistance Programs on July 14, 2017.

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The US Dept of Housing and Urban Development (HUD) issued its Notice Of Funding Availability (NOFA) for FY 2017 Continuum of Care (CoC) Homeless Assistance Programs on July 14, 2017. The funds will pay for development, rehabilitation or leasing of housing and for supportive services for programs serving the homeless. The Monterey/San Benito County CoC's Leadership Council and Collaborative Applicant, the Coalition of Homeless Services Providers, announce formation of a CoC Working Group that will assist over the next several weeks' project applicants in response to the Homeless Assistance portion of the NOFA. **NOTE: All local 2017 HUD CoC Project Applications are due by August 17, 2017. A mandatory** pre-proposal conference will be conducted at 2:00 on July 31, 2017 at 220 12th Street, Marina for all interested applicants. The deadline for the submittal of the Collaborative Application, Project Applications and Project Priority Listing) is September 28, 2017. Call the Coalition of Homeless Services Providers at (831) 883-3080 to participate, or for general information. All prospective applicants are encouraged to thoroughly read the full US Dept. of HUD NOFA and related materials, available at www.hudexchange.info.

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Chapter III:

Designating and Operating an HMIS

The CoC Interim Rule requires that each Continuum of Care designate a Homeless Management Information System (HMIS) for the geographic region and elect an eligible applicant, or HMIS Lead, to manage that system. This chapter details the responsibilities and duties of the CoC and the HMIS Lead as it relates to operation and coordination of all HMIS-related activities, including training, maintenance, and technical assistance to agencies.

Homeless Management Information System

The primary purpose of a Homeless Management Information System (HMIS) is to aggregate data on homelessness at local and national levels to accurately describe the scope of homelessness and the effectiveness of efforts to ameliorate it. Beyond data collection, HMIS provides significant opportunities to improve access to and delivery of services for people experiencing homelessness and to strengthen community planning and resource allocation. The Lead Me Home Continuum of Care (LMH CoC) uses HMIS to:

- Understand the characteristics and service needs of homeless people
- Analyze how homeless people use services
- Evaluate program effectiveness and outcomes

The LMH CoC operates a single HMIS through Bowman Systems' ServicePoint – the Monterey and San Benito (MOSBE) HMIS Project.

LMH CoC HMIS Lead Agency/Administrator

The LMH CoC Leadership Council has designated the Coalition of Homeless Services Providers (CHSP) as the CoC's HMIS Lead Agency/Administrator. CHSP works closely with the CoC and Leadership Council in this capacity and is responsible for maintaining the LMH CoC's HMIS system in compliance with HUD standards and coordinating all related activities, including training, maintenance, and technical assistance to participating agencies. Specifically, the HMIS Lead is responsible for the following:

- Providing operation, security, maintenance, system auditing, and technical support of HMIS central hardware, software, and connectivity
- Execute a written HMIS Participation Agreement with each Contributing HMIS Organization (CHO), which includes the obligations and authority of the HMIS Lead and the CHO and requirements to comply with all security, privacy, and data quality plans
- Setting up and managing user accounts, access levels, and passwords
- Providing technical and user support for HMIS software, including agency account set-up, system monitoring and testing, problem diagnosis and resolution, and routine software and information maintenance
- Providing and coordinating ongoing training and technical support for the system
- Coordinating regular end-user (i.e. HMIS User Group) meetings to discuss software updates, data entry, report writing, and system management issues
- Serving as initial point of contact for end-user questions and concerns
- Assessing compliance with the HMIS Policies and Procedures
- Maintaining contact with the software product developer to ensure consistent and uniform communication among product support personnel and the community
- Generating information on the community's homeless and housing situation for community planning, advocacy, and funder reporting requirements
- Assisting end users in the creation of custom reports and queries
- Monitoring and approving the dissemination of data collected through the HMIS
- Providing regular aggregate data reports to agencies and the greater community
- Reviewing and implementing product upgrades
- Completing the Annual Homeless Assessment Report

- Conducting regular data quality checks and providing reports to the HMIS Oversight Committee
- Providing staff support to both the HMIS Oversight Committee and HMIS User Group
- Serving as the applicant to HUD for grant funds to be used for HMIS activities for the Continuum of Care's geographic area, as directed by the LMH CoC, and, if selected for an award by HUD, entering into a grant agreement with HUD to carry out the HUD-approved activities

The LMH CoC and Leadership Council are responsible for overseeing the work of the HMIS Lead Agency, including approving all policies and plans the HMIS Lead is required to develop to ensure compliance with HUD standards.

To assist in many of its duties, the HMIS Lead Agency contracts with Community Technology Alliance (CTA), an HMIS technical assistance provider.

Provider Participation

All agencies within the CoC geographic region that receive Continuum of Care Program and Emergency Solutions Grant (ESG) funds must participate in HMIS as a CHO, unless they are prohibited from doing so.²

In addition, the LMH CoC encourages all homeless service providers in the CoC geographic area, regardless of whether they receive CoC or ESG funds, to become a CHO and include all of their homeless-dedicated beds in HMIS. The LMH CoC will review and assess its HMIS bed coverage annually.

In order to participate as a CHO, that organization must be an active member of the LMH CoC and adhere to the LMH CoC HMIS Governance Policies and Procedures and the Data Quality Plan (see below).

HMIS Oversight Committee

The HMIS Oversight Committee of the LMH CoC advises and supports HMIS operations. Issues delegated to the HMIS Oversight Committee include:

- Determining the guiding principles that should underlie the implementation activities of the project and participating organizations and service programs
- Selecting software or managing the renewal of existing software
- Setting and enforcing minimum data collection requirements to be collected by all programs participating in the project
- Encouraging CoC-wide provider participation
- Facilitating consumer involvement
- Ensuring adequate and uniformed privacy protection provisions in project implementation
- Defining criteria, standards, and parameters for the usage and release of all data collected as part of the HMIS

² HUD prohibits victim service providers and legal service providers from contributing data to HMIS. However, these providers are required to have a comparable database to collect data.

- Compiling and analyzing HMIS data with other provider and community data sources
- Fulfilling federal reporting requirements
- Developing a data archive plan
- Developing data quality control strategies, e.g. an HMIS Data Quality Control Plan

The HMIS Oversight Committee will also provide ongoing outreach to agency and community leadership to cultivate and maintain support and understanding of the HMIS initiative.

HMIS Governance Policies and Procedures and Data Quality Plan

To ensure compliance with HUD requirements, the HMIS Lead, in collaboration with the HMIS Oversight Committee, is responsible for developing and annually reviewing and updating the "Monterey and San Benito Counties' Homeless Management Information System (HMIS) Governance Policies & Procedures." The LMH CoC and Leadership Council are ultimately responsible for approval of all policies and procedures included in the document. The Governance Policies and Procedures document provides the framework for the ongoing operations of the CoC's HMIS system. It includes the CoC's privacy and security plans for the HMIS system.

In addition, the Governance Policies and Procedures includes policies on the following:

- Roles and Responsibilities
- Project Participation
- User Authorization and Passwords
- Collection and Entry of Client Data
- Release and Disclosure of Client Data Policies
- Workstation Security
- Training
- Compliance
- Technical Support
- Changes to the Policies and Procedures
- Forms Control

The HMIS Lead, with approval by the LMH CoC and Leadership Council, is also responsible for developing and annually reviewing and updating the "Monterey/San Benito Continuum of Care Data Quality Plan." This document sets expectations for both the community and end users to capture reliable and valid data on persons accessing the CoC's homeless programs and services. The plan sets policies for the following:

- Data Quality Standards
- Minimizing Data Quality Issues
- When to Correct Data Quality Issues
- Correcting Data Quality Issues
- Annual Homeless Assessment Report (AHAR)
- Annual Performance Review (CoC APR)

At any time, the HMIS Oversight Committee may identify elements of either the Governance Policies and Procedures or Data Quality Plan that need to be amended. The process for the HMIS Oversight Committee or its designee to identify amendments is as follows:

- Any individual, organization or LMH CoC committee/workgroup can raise concerns or recommendations for revisions to a specific document or procedure.
- The HMIS Oversight Committee may designate a specific sub-committee or workgroup to explore the concern and to develop a recommendation for full HMIS Oversight Committee consideration.
- Proposed revisions must be presented and approved by the full HMIS Oversight Committee.
- If approved by the full HMIS Oversight Committee, the Leadership Council must also approve the change.
- After approval, a list of all revisions, the date revised, and a brief description of the change should be incorporated as part of the Table of Contents in the relevant document. Most current revision dates should also be noted at the top of each individual policy.

Use of HMIS

The HMIS must:

- Collect unduplicated counts of individuals and families experiencing homelessness;
- Analyze patterns of use of applicable assistance provided for the Continuum of Care;
- Provide information to project sponsors and applicants for needs analyses and funding priorities; and
- Be developed in accordance with HUD's Data and Technical Standards, including standards that provide for—
 - encryption of data collected;
 - documentation, including keeping an accurate accounting, proper usage, and disclosure, of HMIS data;
 - access to HMIS data by staff, contractors, law enforcement, and academic researchers;
 - rights of persons receiving services under HUD Homeless Assistance Grant-funded programs;
 - criminal and civil penalties for unlawful disclosure of data; and
 - such other standards as may be determined necessary by HUD.

In addition, the HMIS can serve in the following capacities:

- Information and Referral (I&R), to include Coordinated Assessment & Referral System (CARS)
 - Database of available resources
 - Online referrals
 - Possible electronic submission of applications and benefits
 - Eligibility assessments
- Client Intake
 - Client-specific tracking of intake process
 - Demographic and basic assessment of needs
- Bed Management
 - Day-to-day emergency and transitional bed utilization
 - Housing registry
- Case Management
 - Client-specific intake and tracking system

- Ability to capture change over time
- Goals and outcomes tracking
- Case notes documentation
- Service Tracking
 - Services delivered by provider
 - Services received by clients
 - Ability to plan, schedule, and follow-up on delivery of services; assess gaps across continuum
- Reporting
 - Conducting Point-in-Time Counts
 - Completing the Annual Performance Report
 - Developing and tracking Performance Measurements for the CoC
 - Completing the Annual Homeless Assessment Report

HMIS User Group

The HMIS User Group of the LMH CoC is a forum for the HMIS user agencies to provide input on planning and HMIS governance issues. The HMIS User Group manages communication on system issues between user agencies, the Continuum, and HMIS management.

The HMIS User Group is responsible for:

- Identifying and prioritizing system enhancements
- Providing a quick feedback loop on system performance
- Brainstorming the best uses of the HMIS to inform training and other TA

Annual Homeless Assessment Report (AHAR)

The Annual Homeless Assessment Report (AHAR) is a report by HUD to the U.S. Congress on the extent and nature of homelessness in America. It is based on data from Homeless Management Information Systems (HMIS) and on information from Continuum of Care (CoC) Applications. The AHAR provides estimates of the number of homeless persons nationally, a descriptive profile of homeless persons, and an analysis of service use patterns. For our CoC, the local AHAR report provides useful information on homelessness and service needs at the local level.

The Coalition of Homeless Services Providers (CHSP), as HMIS Lead Agency for the LMH CoC, is responsible for completing the local AHAR. Client-level data for the AHAR will be collected through the HMIS based on HUD's universal data elements which all communities receiving HUD Homeless Assistance funding are required to collect and maintain and which are the same data elements used to generate HUD's Annual Performance Reports (APRs).

- Unduplicated data will be collected for the four standard AHAR reporting categories: Emergency Shelter-Individuals (ES-IND), Emergency Shelter-Families (ES-FAM), Transitional Housing-Individuals (TH-IND), Transitional Housing-Families (TH-FAM), Permanent Supportive Housing-Individuals (PSH-IND), and Permanent Supportive Housing-Families (PSH-FAM). Data will also be collected for any supplemental reporting categories established by HUD.
- In order to participate in the AHAR, the HMIS must be capable of:
 - Producing a one-day point-in-time count, average day count, and longitudinal counts
 - Identifying clients with multiple program use—e.g., how many people in ES-IND were also served in TH-IND
 - Counting persons by household type—e.g., individual adult male, adult in household with children, or unaccompanied youth
 - Generating frequencies by basic demographic characteristics
 - Cross-tabulating total length of stays within each program-household type, by gender and age
 - Totaling the number of households with children by program type

All agencies receiving HUD CoC or ESG funding will submit information to the HMIS on each client served, including data needed for the AHAR report.

The CoC Data Quality Plan includes extensive information about AHAR completion, including:

- Submission Schedule
- Submission Criteria
- Recommended Data Quality Process
- Review of the 252 Data Completeness Report Card
- Uploading AHAR Data to HDX.

The AHAR data will also be reviewed to identify:

- CoC, program or user-level problems
- Client-level problems

- **Anomalies between data collected between similar programs**
- **Anomalies between data collected in recent period vs. previous ones**
- **Other discrepancies**

The LMH CoC will establish a process for obtaining feedback from providers about the AHAR data collected to confirm accuracy of information collected.

The LMH CoC, in coordination with the HMIS Oversight Committee, will organize periodic trainings on data collection and quality for front-line staff that are engaged in data entry activities.

On an annual basis (according to HUD's designated data collection schedule), the LMH CoC will de-duplicate and aggregate the client information collected to produce and submit a local AHAR data report using a standardized template.

HUD Application Reporting Requirements: Annual Performance Reports

Annual Performance Reports (APRs), formerly called Annual Progress Reports, are required by HUD on an annual basis to track the progress and accomplishments of HUD's Continuum of Care Homeless Assistance Programs. The APR gathers information on how programs assist homeless persons to obtain and remain in permanent housing, increase skills and income, and attain greater self-determination. This information is used by HUD and Congress to assess outcomes from federal funding.

The APR is also useful to the LMH CoC recipients and subrecipients as a planning and management tool to analyze client demographics and service needs; to evaluate project outcomes; to make improvements; and to set future goals for projects.

Any agency receiving HUD CoC Program funding must report their annual progress to HUD through an APR submitted for each year in which HUD funding is provided. Basic submission requirements are:

- A separate APR must be submitted for each HUD grant received.
- If a project extension is received for a partial year, then an APR must be submitted for the operating year and another APR submitted for the extension period.
- For grants being transferred, the exiting grantee must complete an APR as of the time of transfer.

The CoC Data Quality Plan includes extensive information about APR completion, including:

- Submission Schedule
- Submission Criteria
- Recommended Data Quality Process
- Review of the 243 or 252 Data Completeness Report Card
- Uploading APR to e-snaps.

The Lead Me Home CoC Coordinator is responsible for providing support and ensuring each of the CoC-funded agencies complete their APRs in a timely manner.

*Monterey and San Benito Counties’
Homeless Management Information System (HMIS)*

Governance Policies & Procedures

Monterey and San Benito Counties’ HMIS Project
c/o Coalition of Homeless Services Providers
220 12th Street
Marina, CA 93933

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1. INTRODUCTION

This document provides the framework for the ongoing operations of the *Monterey and San Benito Counties' Homeless Management Information System* (Monterey/San Benito Counties' HMIS) *Project*. The Project Overview provides the main objectives, direction and benefits of the Monterey/San Benito Counties' HMIS Project. Governing principles establish the values that are the basis for all policy statements and subsequent decisions.

Operating procedures will provide specific policies and steps necessary to control the operational environment and enforce compliance in the areas of:

- ✓ Project Participation
- ✓ User Authorization
- ✓ Collection of Client Data
- ✓ Release of Client Data
- ✓ Server Security and Availability
- ✓ Workstation Security
- ✓ Training
- ✓ Technical Support

Other obligations and agreements will discuss external relationships required for the continuation of this project. Forms control provides information on obtaining forms, filing and record keeping.

2. PROJECT OVERVIEW

The long-term vision of HMIS is to enhance Partner Agencies' collaboration, service delivery and data collection capabilities. Accurate information will put the collaborative in a better position to request funding from various sources and help better plan for future needs. The purpose of the Monterey and San Benito Counties' HMIS is to be an integrated network of homeless and other services providers that use a central database to collect, track and report uniform information on client needs and services. This system will not only meet federal requirements, but also enhance service planning and delivery. The fundamental goal of the *Monterey/San Benito Counties' HMIS Project* is to document the demographics of homelessness in Monterey and San Benito Counties according to the HUD HMIS standards. It is then the goal of the project to identify patterns in the utilization of assistance, and document the effectiveness of the services for the client. This will be accomplished through analysis of data that is gathered from actual experiences of homeless persons, the service providers who assist them in shelters, and other homeless assistance programs throughout the counties. Data that is gathered via intake interviews and program participation will be used to complete HUD annual progress reports. This data may also be analyzed to provide unduplicated counts and anonymous data to policy makers, service providers, advocates, and consumer representatives.

The project utilizes a web-enabled application residing on a central server to facilitate data collection by homeless service organizations across the two counties. Access to the central server is limited to agencies formally participating in the project including only authorized staff members that have met the necessary training and security requirements.

The *Monterey/San Benito Counties' HMIS Project* is staffed and advised by the Coalition of Homeless Services Providers (CHSP). CHSP's Executive Officer is the authorizing agent for all agreements made between Partner Agencies and CHSP. CHSP staff is responsible for coordination, training and user access. CHSP staff will also provide for technical assistance to users of the system throughout the two counties.

The Monterey/San Benito Counties' HMIS Planning and Oversight Committee, comprised of representatives from Partner Agencies, and CTA is responsible for oversight and guidance of the *Monterey/San Benito Counties' HMIS Project*. This group is committed to balancing the interests and needs of all stakeholders involved: homeless men, women, and children; service providers; and policy makers.

Potential benefits for homeless men, women, children and case managers:

Service coordination can be improved when information is shared, with written client consent, among case management staff within one agency or with staff in other agencies who are serving the same clients.

Potential benefits for agencies and program managers:

Aggregated information can be used to develop a more complete understanding of clients' needs and outcomes, and then used to advocate for additional resources, complete grant applications, conduct evaluations of program services, and report to funding agencies, such as HUD. Aggregated information can be used to develop a more complete understanding of clients' needs and outcomes, and then used to advocate for additional resources, complete grant applications, conduct evaluations of program services, and report to funding agencies, such as HUD.

Potential benefits for the community-wide Continuum of Care (CoC) and policy makers:

County-wide involvement in the project provides the capacity to generate HUD annual progress reports for the Continuum of Care (CoC) and allows access to aggregate information, both at the local and regional level, that will assist in identification of gaps in services. In addition, it will assist the completion of other service reports used to inform policy decisions aimed at addressing and ending homelessness at local, state and federal levels.

3. GOVERNING PRINCIPLES

Described below are the overall governing principles upon which all decisions pertaining to the *Monterey/San Benito Counties' HMIS Project* are based:

Participants are expected to read, understand, and adhere to the spirit of these governing principles, even when the *Governance Policies and Procedures* do not provide specific direction.

Confidentiality

The rights and privileges of clients are crucial to the success of HMIS. These policies will ensure clients' privacy without impacting the delivery of services. This is the primary focus of agency programs participating in this project. Policies regarding client data will be founded on the premise that a client owns his/her own personal information and will provide the necessary safeguards to protect client, agency, and policy level interests. Collection, access and disclosure of client data through HMIS will only be permitted by the procedures set forth in this document.

Data Integrity

Client data is the most valuable and sensitive asset of the *Monterey/San Benito Counties' HMIS Project*. These policies will ensure integrity and protect this asset from accidental or intentional unauthorized modification, destruction or disclosure.

System Availability

The availability of a centralized data repository is necessary to achieve the ultimate CoC-wide aggregation of unduplicated homeless statistics. CHSP staff is responsible for ensuring the broadest deployment and availability for homeless service agencies in Monterey and San Benito Counties.

Compliance

Violation of the *Governance Policies and Procedures* set forth in this document will have serious consequences. Any deliberate or unintentional action resulting in a breach of confidentiality or loss of data integrity may result in the withdrawal of system access for the offending entity.

4. ROLES AND RESPONSIBILITIES

Monterey and San Benito Counties' HMIS Planning and Oversight Committee

- Project direction and guidance
- Technology plan
- Selection of system software
- Approval of project forms and documentation
- Project participation and feedback
- Project Funding

Coalition of Homeless Services Providers (CHSP)

CHSP Executive Officer

- Liaison with Department of Housing and Urban Development (HUD) and other state/federal partners.
- Project staffing
- CHSP signatory for Memoranda of Understandings
- Overall responsibility for success of the *Monterey/San Benito Counties' HMIS Project*
- Policies & Procedures compliance
- General responsibility for project rollout

CHSP Staff – assigned HMIS duties (as applicable)

- End user licenses
- Creation of project forms and documentation
- Keeper of signed Memorandums of Understanding
- User administration
 - Add and remove Partner Agency HMIS Administrators
 - Manage user licenses
- Training Coordination for:
 - Curriculum development
 - Training documentation
 - Confidentiality training
 - Application training for HMIS Administrators and end users
 - Outreach/End user support
 - Training timetable
 - Helpdesk

Data Coordinator

Data analyst functions will be performed by HMIS Data Coordinator/contractor/third party, etc. in consultation with the Monterey and San Benito Counties' HMIS Planning and Oversight Committee. Functions include, but are not limited to:

- Adherence to HUD data standards
- HMIS Lead Security Administrator
- Application customization
- Data monitoring
- Data validity
- Aggregate data reporting and extraction
- Assist Partner Agencies with agency-specific data collection and reporting needs (within reason and within constraints of other duties).
- Data for annual US Dept. of HUD Continuum of Care Application Narrative
- Data collection and coordination of annual HUD sheltered count
- Liaison with Community Technology Alliance (CTA), as needed

Community Technology Alliance (CTA)

- Manage the implementation and on-going usage of the HMIS system on behalf of the entire region. Act as a single point of contact between Monterey and San Benito Counties, and the software vendor and hosting service provider.
- Sign and manage the contractual agreement with the HMIS vendor on behalf of the multiple Continuums of Care within the region, procuring the ServicePoint application software and ensuring the provision of appropriate hosting and IT Management services for a single, shared, regional HMIS system.
- Oversee, on behalf of the region, the delivery of IT and application support services by the HMIS vendor, who is responsible for the setup, operations, and on-going maintenance of the HMIS system.
- Work with Continuum of Care HMIS Administration teams to plan and implement the system within their continuums. Ensure Continuum of Care HMIS Administration teams receive appropriate training as required for implementation and ongoing outreach and support.
- Provide technical assistance to the Continuum of Care HMIS Administration teams. Facilitate problem resolution in the event continuums are experiencing difficulties with the software and/or system. Whenever possible, resolve issues which local Continuum of Care HMIS Administration could not adequately resolve.
- Escalate problems to the application software vendor and hosting service provider, when necessary.
- Perform application administration tasks as necessary for the setup and ongoing operations of the system
- Centrally manage the system-wide configuration on behalf of the multiple Continuums of Care, including:
 - Initial application setup and the first level, cross continuum structure within the system.
 - Configuration of standard pick lists provided with the product.
 - Configuration of standard client assessments provided with the product.
 - Procure, allocate and administer user license allocation across the various continuums within the system.
 - Manage user accounts, logins, and passwords for Continuum of Care Administration teams.
 - In coordination with local Continuum of Care HMIS Administration, create and manage agency-specific application configurations, on behalf of individual agencies within the system and including client assessment forms, data fields and/or pick lists.
 - In coordination with local Continuum of Care HMIS Administration, advise on the creation and management of all custom data importation and exportation routines necessary to integrate external data into the HMIS system, and export internal data from within the HMIS system, as required on behalf of individual agencies, Continuums of Care, or other outside policy makers and funders; such as the potential inclusion of HMIS data in a broader regional data warehouse. Audit usage of the application in order to ensure that appropriate standard *Governance Policies and Procedures* are agreed upon, in place and followed.
 - Monitor system usage over time in order to ensure that appropriate capacity planning is in place to proactively plan for future system growth and expansion.

- Follow all established *Monterey and San Benito Counties' HMIS Project* procedures especially, procedures related to the maintenance of confidentiality.

Partner Agency

Partner Agency Executive Director

- Authorizing agent for partner agreement (MOU)
- Designation of HMIS Security Administrator and Technical Administrator
 - Perform background checks on anyone designated as an HMIS Administrator
- Ensuring agency compliance with *Governance Policies & Procedures*
- End user license management
- Agency level HUD reporting
- Create and follow Agency *Client Grievance Policy/Procedure*, as it relates to HMIS

Partner Agency Technical Administrator

- Overseeing agency compliance with the Memorandum of Understanding and all applicable plans, forms, standards and governance documents,
- Detecting and responding to violations of any applicable HMIS plans, forms, standards and governance documents,
- Serving as the primary contact for all communication regarding the HMIS at this agency and forwarding information to all agency End Users as appropriate,
- Ensuring thorough and accurate data collection by agency End Users as specified by HMIS forms and standards,
- Providing first-level End User support,
- Managing End User licenses,
- Ensuring the agency provides and maintains adequate internet connectivity,
- Maintaining agency and program descriptor data in HMIS,
- Configuring provider preferences (assessments, referrals, services, etc.) in HMIS,
- Completing agency-level HUD reporting and/or supporting agency programs with reporting needs,
- Ensuring all users adhere to trainings provided by CTA and/or CHSP
- Performing authorized imports of client data.

Partner Agency Security Officer

- Conducting a thorough quarterly review of internal compliance with all applicable HMIS plans, standards and governance documents,
- Completing the Compliance Certification Checklist and forwarding the Checklist to the HMIS Data Coordinator
- Continually monitoring and maintaining security of all staff workstations used for HMIS data entry,
- Safeguarding client privacy by ensuring End User and agency compliance with confidentiality and security policies,
- Investigating potential breaches of HMIS system security and/or client confidentiality and notifying CHSP of substantiated incidents,
- Developing and implementing procedures for managing new, retired, and compromised local system account credentials,
- Developing and implementing procedures that will prevent unauthorized users from connecting to private agency networks,
- Ensuring all agency End Users complete the HMIS End User Agreement and maintaining documentation of all HMIS End User Agreements,
- Ensuring all agency End Users complete mandatory training and forwarding documentation of training to the HMIS Lead Agency.

Partner Agency Staff

- Safeguard client privacy through compliance with confidentiality policies
- Data collection as specified by CHSP and/or CTA training, workflow charts, and other documentation

Conflict Resolution Process for HMIS

Conflicts, grievances, etc. should be handled at the lowest level possible at every level of the Monterey/San Benito Counties' HMIS. Reasonable efforts should be made and documented if possible and appropriate, to obtain satisfaction by other means, including escalation within an agency and through CHSP.

Client level conflicts will be handled within the Partner Agency using its agency *Client Grievance Policy/Procedure*.

- All Partner Agencies will have a *Client Grievance Policy/Procedure*.
- Partner Agency *Client Grievance Policy/Procedures* are reviewed as they relate to the Monterey/San Benito Counties' HMIS by the HMIS Planning and Oversight Committee and CHSP Executive Officer, for feedback and comments.
Changes to a Partner Agency *Client Grievance Policy/Procedure* will be submitted to the CHSP Executive Officer and HMIS Planning and Oversight Committee in writing within 30 days of the changes for feedback and comments.

Agency level conflicts will be handled through an escalating peer review process:

- The CHSP Executive Officer, and/or HMIS Data Coordinator, and Partner Agency Executive Director, and/or HMIS Agency Administrator will make every attempt to resolve conflicts as they occur. CHSP and/or the Partner Agency may annotate their concerns in writing, as appropriate.
- Unresolved conflicts between the CHSP and a Partner Agency will be noted in writing and forwarded to the CHSP Executive Committee. In the event of an impasse, other members of the board will be notified within 10 working days of the impasse declaration. Either party may declare an impasse.
- The CHSP Executive Committee will review the written grievance at the next scheduled Executive Committee meeting. The Executive Committee will make every attempt to resolve the matter within **30 days** of reviewing the grievance. Resolution of the conflict will be in writing and signed by all relevant parties.
- Unresolved conflicts will be forwarded to the full CHSP Board of Directors for further guidance and action.
- Any recommendation regarding termination of a Partner Agency from the Monterey/San Benito Counties' HMIS will be forwarded to the full CHSP Board of Directors for consideration and possible action.
- All decisions of the CHSP Board of Directors are final.
- Conflicts between or among Partner Agencies may require mediation by the CHSP Executive Officer and/or HMIS Data Coordinator. Resolution of the conflict may be annotated in writing and signed by all relevant parties as appropriate.

Unresolved conflicts between or among Partner Agencies will be noted in writing and forwarded to the CHSP Executive Committee within 10 working days of the date of an impasse. Any party may declare an impasse. The Executive Committee will then follow the same process noted above.

5. OPERATING PROCEDURES

5.1 Project Participation

POLICIES

- Agencies participating in the *Monterey/San Benito Counties' HMIS Project* shall commit to abide by the governing principles of the *Monterey/San Benito Counties' HMIS Project* and adhere to the terms and conditions of this partnership as detailed in the memorandum of understanding.

PROCEDURES

Confirm Participation

- The Partner Agency shall confirm their participation in the *Monterey/San Benito Counties' HMIS Project* by submitting a Memorandum of Understanding (MOU) to the CHSP Executive Officer.
- The CHSP Executive Officer will co-sign the MOU.
- The CHSP Executive Officer will maintain a file of all signed Memorandums of Understanding.
- The CHSP Data Coordinator will update the list of all Partner Agencies and make it available to the project community.

Terminate Participation

Voluntary

1. The Partner Agency shall inform the CHSP Executive Officer in writing of their intention to terminate their agreement to participate in *Monterey/San Benito Counties' HMIS Project*.
2. The CHSP Executive Officer will inform relevant CHSP staff who will update the Participating Agency List.
3. The CHSP Executive Officer will revoke access of the Partner Agency staff to the Monterey/San Benito Counties' HMIS.
4. The CHSP Executive Officer will keep all termination records on file with the associated Memorandums of Understanding.

Lack of Compliance

1. When the CHSP Executive Officer determines that a Partner Agency is in violation of the terms of the partnership, Executive Directors of Partner Agency and CHSP will strive to resolve the compliance issue(s) within **30 days** of the conflict(s).
2. If Executive Directors are unable to resolve the compliance issue(s) within 30 days, the Peer Review Process will be employed to resolve the conflict. If that results in a ruling of termination:
 - The Partner Agency will be notified in writing of the intention to terminate their participation in the *Monterey/San Benito Counties' HMIS Project*
 - The CHSP Executive Officer will revoke access of the Partner Agency staff to the Monterey / San Benito Counties' HMIS
 - The CHSP Executive Officer will keep all termination records on file with the associated memorandums of understanding

Notes:

- All Partner Agency specific information contained in the HMIS system will remain in the HMIS system.
- If HMIS participation is mandated by the agency's funder, CHSP Executive Officer will remind agency, either via email or mail, that terminating their participation will result in notification to the funder. Should the agency choose to move forward with the process, CHSP Executive Officer to notify the funder immediately.

Assign Agency HMIS Security and Technical Administrators

1. The Partner Agency shall designate, in writing, an Agency HMIS Administrator for communications regarding Monterey/San Benito Counties' HMIS and submit this documentation to the CHSP Executive Officer, annually.
2. The CHSP HMIS Data Coordinator will obtain all signatures necessary to execute the *Partner Agency HMIS Administrator Agreement*.
3. The CHSP HMIS Data Coordinator will maintain a file of all submitted documentation.

4. The CHSP HMIS Data Coordinator will maintain a list of all assigned Agency HMIS Administrators and make it available to the CHSP project staff.
5. All forms will be copied to CTA.

Re-Assign Agency HMIS Administrator

1. The Partner Agency may designate new or replacement Agency HMIS Administrators in the same manner as above.

Site Security Assessment

1. Prior to allowing access to the HMIS, the Partner Agency HMIS Administrator and CHSP HMIS Data Coordinator will meet to review and assess the security measures in place to protect client data. This meeting may include, but is not limited to, the Partner Agency Executive Director (or designee), Program Manager / Administrator and the either of the Agency HMIS Administrators with CHSP HMIS Data Coordinator (or designee) to assess agency information security protocols. This review shall in no way reduce the responsibility for agency information security, which is the full and complete responsibility of the agency, its Executive Director, and the Agency HMIS Administrators.
2. Agencies shall have virus protection software on all computers that access HMIS.
3. The Partner Agency Security Officer will use the Compliance Certification Checklist to conduct quarterly security audits of all Partner Agency HMIS End User workstations.
4. The Partner Agency Security Officer will audit remote access by associating User IDs, IP addresses and login date/times with employee time sheets. End Users may not remotely access HMIS from a workstation (ie: personal computer) that is not subject to the Partner Agency Security Officer's regular audits.
5. If areas are identified that require action due to noncompliance with these standards or any element of the Monterey and San Benito Counties HMIS Policies and Procedures, the Partner Agency Security Officer will note these on the Compliance Certification Checklist, and the Partner Agency Security Officer and/or HMIS Technical Administrator will work to resolve the action item(s) **within one month**.
6. Any Compliance Certification Checklist that includes 1 or more findings of noncompliance and/or action items will not be considered valid until all action items have been resolved. The Checklist findings, action items, and resolution summary must be reviewed and signed by the Partner Agency Executive Director or other empowered officer prior to being forwarded to the HMIS Data Coordinator.

Annual Security Audits

1. The CHSP Data Coordinator will schedule the annual security audit in advance with the Partner Agency Security Officer.
2. The CHSP Data Coordinator will use the Compliance Certification Checklist to conduct security audits.
3. The CHSP Data Coordinator must randomly audit at least 10% of the workstations for each HMIS Partner Agency. In the event that an agency has more than 1 program site, at least 1 workstation per program site must be audited.
4. Each compliance check for each computer should be noted in the compliance Checklist.
5. If areas are identified that require action due to noncompliance with these standards or any element of the Monterey and San Benito Counties HMIS Policies and Procedures, the HMIS Data Coordinator will note these on the Compliance Certification Checklist, and the Partner Agency Security Officer and/or Technical Administrator will work to resolve the action item(s) within one month.
6. Any Compliance Certification Checklist that includes 1 or more findings of noncompliance and/or action items will not be considered valid until all action items have been resolved and the Checklist findings, action items, and resolution summary has been reviewed and signed by the Partner Agency Executive Director or other empowered officer and forwarded to the HMIS Data Coordinator.

User authentication. HMIS workstations and server shall be secured with, at a minimum, a user authentication system consisting of a username and a password. Passwords shall be at least eight characters long and meet industry standard complexity requirements, including, but not limited to, the use of at least one of each of the following kinds of characters in the passwords: Upper and lower-case letters, and numbers and symbols. Passwords shall not be, or include, the username, the HMIS name, or the HMIS vendor's name. In addition, passwords should not consist entirely of any word found in the common dictionary or any of the above spelled backwards. The use of default passwords on initial entry into the HMIS application is allowed so long as the application requires that the default password be changed on first use. Written information specifically pertaining to user access (e.g., username and password) shall not be stored or displayed in any publicly accessible location.

5.2 User Authorization and Passwords

POLICIES

- Agency Staff participating in the *Monterey/San Benito Counties' HMIS Project* shall commit to abide by the governing principles of the Monterey/San Benito Counties' HMIS Project and adhere to the terms and conditions of the *Partner Agency User Agreement*.
- The Partner Agency HMIS Administrator must only request user access to HMIS for those staff members that require access to perform their job duties.
- All users must have their own unique user ID and should never use or allow use of a user ID that is not assigned to them. [See *Partner Agency User Agreement*]
- Temporary passwords will be communicated via email to the owner of the User ID.
- User specified passwords should never be shared and should never be communicated in any format.
- New User IDs must require password change on first use.
- Passwords must consist of 8 to 16 characters and must contain a combination of letters and numbers (no special characters, alpha and numeric only). The password must contain at least two numbers. [Required by software.] According to the HUD Data Specification Draft:
- Passwords must be changed every 45 calendar days. If they are not changed within that time period, they will expire and the user will be locked out of the system.
- For Partner Agency HMIS Administrators, passwords may only be reset by the CHSP HMIS Data Coordinator or by CTA.
- For Agency Users (not including Partner Agency HMIS Administrator), passwords should be reset by the Partner Agency HMIS Administrator, but in some cases may be reset by the CHSP HMIS Data Coordinator or by CTA, if a case is filed.
- Three consecutive unsuccessful attempts to login will disable the User ID until the account is reactivated by an administrator.
- Personal devices are not permitted to access HMIS
- A public key infrastructure (PKI) supports the distribution and identification of public encryption keys, enabling users and computers to both securely exchange data over networks such as the Internet and verify the identity of the other party.
- Users who have not attended HMIS New User training in more than one year have to go through training again before activating their license when transitioning to a new agency.

PROCEDURES

Workstation Security Assessment

1. Prior to requesting user access for any staff member, the Partner Agency HMIS Administrator will assess the operational security of the user's workspace.
2. Partner Agency HMIS Administrator will ensure that all agency users realize they can access HMIS only through secure workstations and are prohibited from using public and personal workstations (libraries, cafes, etc)
3. Partner Agency HMIS Administrator will confirm that workstation has virus protection software installed and that a full-system scan has been performed on a weekly basis.

4. PKIs are distributed annually, via email, from CTA and/or CHSP. Agency Administrators will retrieve the PKI password from CHSP by opening a case and will assist their end users with installing the new PKI on their workstations.

Request New User ID

When a Partner Agency identifies a staff member that requires access to the Monterey/San Benito Counties' HMIS Project, the Partner Agency HMIS Administrator, or Executive Director must:

1. Have the new user watch the “New User Training Presentation” found at <http://www.chspmontereycounty.org/hmis-training-documents/>
2. Visit the CHSP Training Site at <http://www.chspmontereycounty.org/hmis-trainings/> to:
 - a. Complete the Confidentiality Video, Survey and End User Agreement.
 - b. Register for New User training
3. New Users will receive their logins and temporary passwords at the New User Training.

User Access after Termination of Employment

After a user exits employment from an agency, the Agency Admin (Technical) or Executive Director must:

1. Reset the user's password to prevent the user from accessing HMIS.
2. Request deletion of the user's account in HMIS within 7 days of termination by opening a case at <http://ctagroup.org/monterey-san-benito-hmis/mosbe-help/>.

Compliance Failure

If a user breaches the User Agreement, violates the Governance Policies & Procedures, or breaches confidentiality or security, the Agency Administrators (Technical or Security) must:

1. Inform CHSP immediately of the breach, in writing, disclosing the nature of the breach, the user(s) involved, and any clients who may be affected
2. Change the password of the user(s) involved
3. Open a case to have the user de-activated in HMIS

User Clean-up

1. During the first week of each month, the HMIS Data Coordinator will run the *User Contact Information* report in HMIS to view which users have not logged-in within the past 90 days.
2. The HMIS Data Coordinator will then forward the list to dedicated Agency Admins for clarification of the user's status with their agency.
3. The Agency Admin will have 10 working days to report back to the Data Coordinator.
4. Any inactive users who have not been accounted for will be removed permanently from HMIS.

Reset Password

1. When a User forgets their password or has reason to believe that someone else has gained access to their password, they must immediately notify either of their Partner Agency HMIS Administrators.
2. The Partner Agency HMIS Administrator will reset the User's password and notify the User of their new temporary password.

5.3. Collection and Entry of Client Data

POLICIES

- Client data will be gathered according to the policies, procedures and confidentiality rules of each individual program.

- Client data may only be entered into the HMIS with client's authorization to do so.
- Client data will only be shared with Partner Agencies if the client consents by signing the client consent form, and that form is filed on record.
- Client data will be entered into the HMIS in a timely manner.
 - Client identification should be completed during the intake process or as soon as possible following intake and within **48 hours or two business days**.
 - Service records should be entered on the day services began or as soon as possible within the next **48 hours or two business days**.
 - Required assessments should be entered as soon as possible following the intake process and within **48 hours or two business days**.
- All client data entered into the HMIS will be kept as accurate and as current as possible.
- Hardcopy and electronic files will continue to be maintained according to individual program requirements in accordance with the HUD Data Standards.
- No data may be imported without the client's authorization.
- Any authorized data imports will be the responsibility of the participating agency.
- Partner Agencies are responsible for the accuracy, integrity, and security of all data input by said Agency.
- Partner agencies must adhere to workflows provided by CHSP and/CTA. Changes to workflows must be submitted in writing to the CHSP Data Coordinator and approved by CTA.

PROCEDURES

- Refer to User Manual and/or Training Materials for specific data entry guidelines.

5.4. Release and Disclosure of Client Data Policies

POLICIES

- Client-specific data from the HMIS system may be shared with partner agencies only when the sharing agency has secured a valid Release of Information Form (ROI) from that client authorizing such sharing, and only during such time that release of information is valid (before its expiration). Other non- HMIS inter-agency agreements do not cover the sharing of HMIS data.
- Sharing of client data may be limited by program specific confidentiality rules.
- No client-specific data will be released or shared outside of the partner agencies unless the client gives specific written permission or unless withholding that information would be illegal. Please see release of information.
- Services may **NOT** be denied based on the client's refusal to sign the form or declines to state any information.
- Release of information must constitute **INFORMED** consent. The burden rests with the intake counselor to inform the client before asking for consent. As part of informed consent, the relevant portions of these *Governance Policies and Procedures*, as well as privacy language found in the final HUD Data Standards, should be posted near the intake location and/or be available at the intake location, along with Agency's relevant *Governance Policies & Procedures* and a list of agencies participating in *Monterey/San Benito Counties' HMIS Project*.
- All approved notices are found on the CHSP website.
- Client shall be given print out of all HMIS data relating to them upon written request and within 10 working days from the time the written request is received. Written requests will be date/time stamped immediately upon receipt.
- A report of data sharing events, including dates, agencies, persons, and other details, must be made available to the client upon request within 10 working days from the time the written request is received. Written requests will be date/time stamped immediately upon receipt.

- A log of all external releases or disclosures must be maintained for seven years and made available to the client upon written request within 10 working days from the time the written request is received. Written requests will be date/time stamped immediately upon receipt.
- Aggregate data that does not contain any client specific identifying data may be shared with internal and external agents without specific permission. This policy should be made clear to clients as part of the informed consent procedure.
- Each Agency Executive Director is responsible for their agency's internal compliance with the HUD Data Standards.
- ROI's expire after three (3) years, unless Partner Agencies' have internal policies that conflict with that timeline.

PROCEDURES

Types of consent are as follows:

- A. Consent to the entry of basic and relevant information into the Homeless Management Information System (HMIS), during the time frame in which the ROI is active, and shared between partner agencies.
 - a. The ROI permits visibility of the client's activity during which the ROI is active. After the ROI expires the client's information will still be visible. Information entered into HMIS after the ROI expires is against policy.
- B. Consent to entry of basic and relevant information into HMIS, during the time frame in which the ROI is active, but not shared between Partner Agencies.
 - a. If the client already exists in HMIS, only the specific program Entry will be locked down to all users outside of the receiving agency.
 - b. If the client did not already exist in HMIS, the entire client profile will be locked down to all users outside of the receiving agency.
- C. Completely refuse to sign the ROI. (In this case, the agency has the following options)
 - i. Ask the client to provide their own alias and enter the client's information into HMIS (with the exception of their social security number and birthday.) The agency should keep record of the client's alias in the client's folder. Many clients have street names and may choose to use that name. *This is the most desirable option as the client is likely to remember this alias and use it at other agencies, reducing the possibility of double entry.*
 - ii. The agency may their own unique name (or alias) and enter the client's information into HMIS (with the exception of their social security number and birthday.) The agency should keep record of the client's alias in the client's folder.
 - iii. Opt out on entering the client's information into HMIS completely, while remembering to manually include the client in all reporting (HIC/PIT, ESG, PATH, etc.)

5.5. Workstation Security

POLICIES

- Partner Agency HMIS Administrator is responsible for taking the necessary actions for preventing the degradation of the whole system resulting from viruses, intrusion, or other factors under the agency's control.
- Partner Agency HMIS Administrator is responsible for preventing inadvertent release of confidential client-specific information. Such release may come from physical, electronic or even visual access to the workstation, thus steps should be taken to prevent these modes of inappropriate access (i.e. don't let someone read over your shoulder; lock your screen).

- Recommended Internet Connection: At minimum, DSL
- Recommended Browser: Latest release of Internet Explorer, Chrome, Firefox or Opera
- Definition and communication of all procedures to all agency users for achieving proper agency workstation configuration and for protecting their access by all agency users to the wider system are the responsibility of the Partner Agency HMIS Administrator.
- Workstations should be password protected and locked when not in use

PROCEDURES

- At a minimum, any workstation accessing the HMIS shall have anti-virus software with current virus definitions (24 hours) and frequent full-system scans (weekly).

5.6. Training

POLICIES

- Agency Executive Director shall obtain the commitment of Agency HMIS Administrator and designated staff persons to attend training(s) as specified in the *Memorandum of Understanding* (MOU) between Partner Agency and CHSP.
- Changes to the Data Standards requires a mandatory user training. Users who do not attend will be temporarily locked out of HMIS until trained.

PROCEDURES

Start-up Training

CHSP will provide or coordinate training in the following areas prior to Partner Agency using the Monterey/San Benito Counties' HMIS:

- Partner Agency HMIS Administrator Training
- New User Training

Agency HMIS Administrator Training

Training will be done in a group setting, where possible, to achieve the most efficient use of time and sharing of information between agencies. Training will include:

- HMIS Policies and Procedures
- New user set-up procedures
- End user training
- Running package reports
- Client Rights
- Technical and Security Administrator Duties
- Password Resets
- Data Quality

On-going Training

CHSP and/or CTA will provide regular training for the CoC End Users on a monthly basis. The areas covered will be:

- Confidentiality

- Data Quality
- Workflows
- Data Standards changes
- System upgrades

Additional training classes may be scheduled, as needed, under the guidance of the CHSP and HMIS Planning and Oversight Committee.

5.7. Compliance

POLICIES

- Compliance with these *Governance Policies and Procedures* is mandatory for participation in the Monterey/San Benito Counties' HMIS system.
- Using the ServicePoint software, all changes to client data are recorded and will be periodically and randomly audited for compliance by CHSP staff and CTA.

PROCEDURES

- See Project Participation and User Authorization sections for procedures to be taken for lack of compliance.

5.8. Technical Support

POLICIES

- Support requests include problem reporting, requests for enhancements (features), or other general technical support.
- Users shall submit support requests to their Partner Agency HMIS Administrator or file a case.
- Users shall not, under any circumstances, submit requests to software vendor or directly to Community Technology Alliance (CTA).
- Users shall not submit requests directly to CHSP via email or telephone.
- CHSP will only provide support for issues specific to the *Monterey/San Benito Counties' HMIS Project* software and systems.
- If an agency requires emergency support, the Partner Agency Executive Director must contact the CHSP Executive Director directly.

Note: If the Support Request is deemed by the CHSP Executive Officer to be an agency-specific customization, (Agency-specific customizations include but are not limited to new assessments, new data fields, and new picklists), resolution of the request may be prioritized accordingly. CHSP reserves the right to charge on an hourly basis for these changes if/when the workload for such agency-specific customizations becomes burdensome.

PROCEDURES

1. User attempts to resolve issue with their Agency Admin.
2. If issue cannot be resolved with Admin, user to open a case at <http://ctagroup.org/monterey-san-benito-hmis/mosbe-help/>
 - a. User must complete all fields of the case form to ensure timely response and include examples of clients who are affected by the issue, if applicable.

3. CHSP to accept/acknowledge receipt of the case **within two business days.**
4. If HMIS Data Coordinator is:
 - a. able to resolve the case, case will be resolved within the following timeline, based on levels of difficulty and time consumption:
 - i. Low level cases- (*i.e. Password changes, PKI requests, etc.*) 1 business day
 - ii. Medium level cases- (*i.e. deactivating programs, data quality assistance, etc.*) 1-5 business days.
 - iii. High level cases- tbd
 - b. unable to resolve the issue, case will be escalated to CTA Program Manager or Program Director **within two business days** of accepting the case.
 - i. Medium level cases- (*i.e. deactivating programs, data quality assistance, etc.*) 1-5 business days.
 - ii. High level cases- tbd

5.9. Changes to this and other Documents

POLICIES

- The Monterey and San Benito Counties' HMIS Planning and Oversight Committee will guide the recommendations regarding compilation and amendment of these *Governance Policies and Procedures*.
- The *Governance Policies and Procedures* must be reviewed updated every three years.
- Interim changes will be pre-approved by the Monterey and San Benito Counties' HMIS Planning and Oversight Committee and will be added as an addendum until the next updating cycle of this document.
- Implementation of any updated *Governance Policies and Procedures* should be followed by a new executed MOU.

PROCEDURES

Changes to Governance Policies & Procedures

1. Proposed changes may originate from any participant in the *Monterey/San Benito Counties' HMIS Project*.
2. When proposed changes originate within a Partner Agency, they must be reviewed by the Partner Agency Executive Director, and then submitted by the Partner Agency Executive Director to the CHSP Executive Director for review and discussion.
3. CHSP staff will maintain a list of proposed changes.
4. The list of proposed changes will be discussed by the HMIS Planning and Oversight Committee, subject to line item excision and modification. This discussion may occur either at a meeting of the group, or via email or conference call, according to the discretion and direction of the group.
5. Results of said discussion will be communicated, along with the recommended amendment to the *Governance Policies and Procedures*.
6. Partner Agencies' Executive Directors shall acknowledge receipt and acceptance of the revised *Governance Policies and Procedures* within 10 working days of delivery of the amended *Governance Policies and Procedures* by signing and returning this document to the CHSP Executive Officer.
7. Partner Agency Executive Director shall also ensure circulation of the revised document within their agency and compliance with the revised *Governance Policies and Procedures*.

6. OTHER OBLIGATIONS AND AGREEMENTS

The previous U.S. Department of HUD grant for the *Monterey/San Benito Counties' HMIS Project* was sacrificed to save a program providing services in CA-506, as approved by the CHSP Board of Directors in 2014. Therefore, participating agencies are required to fund HMIS, based on a percentage of their total amount of funding that mandates participation in HMIS, with a minimum of \$2,500 and a ceiling of \$15,000. The percentage may change at the discretion of the Monterey and San Benito Counties' HMIS Planning and Oversight Committee.

- Agencies will receive five (5) user licenses, one Admin license and one reporting license.
- Extra licenses may be purchased at the current market rate.
- The assessment process will start in the fourth quarter of CHSP's fiscal year. (FY is July-June)

7. FORMS CONTROL

All forms required by these procedures are available from the CHSP HMIS Data Coordinator and/or the CHSP website: www.chspmontereycounty.org/hmis.

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Acknowledgement

IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT: All parties will demonstrate a commitment to work together and support each other to achieve project goals. Your agency agrees to provide a representative to the HMIS Oversight Committee, for the purpose of ensuring HMIS policy and procedures that is both consistent with federal and state requirements, and with the local needs of the Continuum.

The Governance Policy and Procedures will be renewed on an annual basis to confirm that the document continues to be relevant and appropriate. This form documents the mutual understanding between all parties of HMIS related roles, responsibilities, relationships, and authorities between the parties hereto.

By signing below, I agree to the HMIS Policies and Procedures Governance document and understand that this document supersedes previous versions.

Executive Director Printed Name

Agency

Signature

Date



Housing Authority of the County of Monterey

ADMINISTRATIVE PLAN

FOR THE

HOUSING CHOICE VOUCHER PROGRAM

Product # 301-002

January 1, 2005

Revision Date	Revision Date
September 1, 2005	August 1, 2010
May 1, 2006	May 1, 2011
December 1, 2006	April 1, 2012
July 1, 2007	April 1, 2013
August 1, 2008	May 1, 2014
November 1, 2008	October 1, 2014
October 1, 2009	March 23, 2015

Approved by the HA Board of Commissioners: March 23, 2015

Submitted to HUD: April 15, 2015

The HACM administers the following types of targeted funding:

Shelter Plus Care Program

Family Unification Program

VASH

HACM Policy

Participants that have utilized the VASH, Family Unification or Shelter Plus Care Programs for a three year term and that no longer require supportive services are eligible to transition to the regular HCV Program (with availability) provided they meet all other eligibility requirements. Verification from the supportive services provider stating that supportive services are no longer needed is required.

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

Set- Aside Homeless Program

The Set-Aside Homeless Program will allow homeless eligible families to be referred by Monterey County Continuum of Care agencies who are exiting transitional housing, emergency shelters or who meet the HUD definition of homeless. Referring agencies must provide one year of case management.



4-III.C. SELECTION METHOD .

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

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

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

HACM Policy

The HACM will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.

Local preferences will be used to select 75% families from the waiting list and the remaining 25% will be selected by date and time.

From all eligible families: Selection shall be made without regard to race, color, creed, religion, sex, national origin, age familial status, or disability.

Each preference will receive an allocation of points. The more preference points an applicant has, the higher the applicant's place on the waiting list.

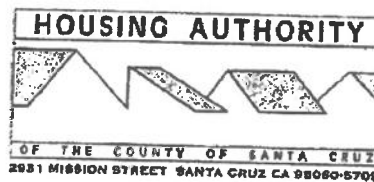
Local Preference with the same points will be ranked by the Ranking Point system and the date and time of application.

- The HACM will offer a preference to families who have had their Section 8 Housing Choice Voucher revoked/suspended due to HUD HAP funding shortfalls within the last 12 months. (50 points)
- Monterey County Resident- County residency preference will be given to an applicant that lives or works in Monterey County at the time of application. (50 points)
- Working Family- A Working family preference will be given to an applicant where the head, spouse or co-head is employed at least 24 hours a week. A preference will also be given if the head, spouse or co-head are active participants in an accredited educational and training programs designed to prepare the individual for the job market. (15 points).
- Elderly or Disabled Person- An elderly preference applies if the head, spouse or co-head is a person who is age 62 or older. A disabled person preference is given if any family member receives Social Security or Supplemental Security benefits or otherwise meets the definition of disabled as defined under Section 223 of the Social Security Act.(15 points)
- United States Veteran's - This preference applies to active US Armed Forces Veterans and their surviving spouses. (10 points)

- **Involuntary Displacement-** An applicant is, or will be, involuntarily displaced if the applicant has vacated or will vacate his/her housing unit as a result of one or more of the following actions: (Maximum 50 points)
 - Displaced by a HUD Program- Includes displacement because of disposition of a public housing or multifamily rental housing project by HUD under Section 203 of the Housing and Community Development Amendments of 1978.
 - Displaced to avoid reprisals- Family members provided information on criminal activities to a law enforcement agency; and, based on a threat assessment, the District Attorney Office recommends relocating the family to avoid or minimize the risk of violence against family members as a reprisal for providing such information.
 - Displaced by government action- Displacement activity carried on by a local code enforcement agency or inhabitability as a result of a disaster such as fire or flood as verified by FEMA, American Red Cross or other disaster assistance agency. Local agency is defined as a public code enforcement agency in Monterey County.
- **Victims of Domestic Violence-** When there is actual or threatened, physical violence directed against the applicant or the applicant's family within the last 12 months by a spouse or other household member who lives in the unit with the family. To qualify for this preference, the abuser must still reside in the unit from which the victim was displaced. The applicant must certify that the abuser will not reside in the unit unless HACM gives written approval. HACM will approve the return of the abuser to the household under certain conditions including only if a counselor, therapist or other knowledgeable professional recommends in writing that the individual be allowed to reside with the family.(10 points)
- **Live -In Place-** Families who are considered to be living in place. Those living in a unit that will be brought under contract where the landlord accepts the HCV Program. Verification required will be a copy of their lease in an appropriate size dwelling unit for the family. HACM will also require utility bills for a three month period verifying their residency in the unit. (15 points)
- **Set-Aside Homeless Preference-** Eligible homeless applicants referred by agencies through the County of Monterey Continuum of Care who are exiting transitional housing programs or emergency shelters with no other permanent housing placement options. Must meet the HUD definition of homeless as defined in the Hearth Act. (50 points)
- **Formerly Homeless-** Formerly homeless families or homeless families actively enrolled in case management, transitional housing, or other self-sufficiency program. (25 points)
- **Revoked/Suspended Voucher-** A preference will be offered to families who have had their Housing Choice Voucher revoked/suspended due to HUD HAP funding shortfalls within the last twelve months. (75 points)

ADMINISTRATIVE PLAN

Section 8 Housing Choice Voucher Program Housing Authority of the County of Santa Cruz



The Administrative Plan contains those policies of the Housing Authority of the County of Santa Cruz that have been adopted by the Board of Commissioners, as required by 24CFR 982.54, governing the establishment and administration of a waiting list, the issuance of Section 8 Housing Choice Vouchers, and overall program administration.

March 2016

Please note that the electronic copy of this document contains hyperlinks to applicable HUD regulations and other references. An electronic copy of this document is available at the following website: <http://www.hacosantacruz.org/agency.htm>. If you cannot access the electronic copy of this document, copies of the referenced links and regulations will be available upon request.

Number of Waiting Lists

The Housing Authority maintains one single waiting list for the Santa Cruz County Housing Choice Voucher Program (including the Moderate Rehabilitation Program, and for the majority of the Project-Based Voucher Program). Additionally, the Housing Authority maintains a separate waiting list for the Cities of Hollister and San Juan Bautista. Please note that all preferences and special programs listed below apply to the Santa Cruz County Housing Choice Voucher Program only.

Project-Based Voucher sites may have separate site based waiting lists, as listed below. The Housing Authority will consider the establishment of additional site-based waiting lists for new Project Based Voucher contracts on a case by case basis.

1. El Centro – El Centro is a Project-Based Voucher complex located at 1110 Pacific Avenue in Santa Cruz. El Centro consists of 44 single room occupancy units for elderly residents. This waiting list has no preferences, and units will be offered, when available, based on date of placement on the waiting list.
2. Resetar Residential Hotel – Resetar is a Project-Based Voucher complex located at 15 West Lake Avenue in Watsonville. There are a total of 53 Project-Based units at Resetar, of which 5 units are set aside for formerly homeless veterans participating in the HUD-VASH program. This waiting list has no preferences, and units will be offered, when available, based on date of placement on the waiting list.

Limited Waiting List Preferences for Designated Groups on the Santa Cruz County Housing Choice Voucher Waiting List

Disabled and Medically Vulnerable Homeless Persons

The Housing Authority has adopted a limited waiting list preference for disabled and medically vulnerable homeless applicants. The Homeless Services Center provides referrals for waiting list applicants who meet all of the following criteria:

1. Disabled as defined by HUD at 24CFR 5.403.
2. Medically vulnerable as defined by a Homeless Action Partnership approved Vulnerability Index. At this time, the Homeless Action Partnership has identified the Homeless Vulnerability Index (used by the 180/180 Campaign) and the VI-SPDAT.
3. Homeless as defined by HUD per the Hearth Act in Federal Register / Vol. 76, No. 233.
4. Have established a case management plan with a provider of housing supportive services within Santa Cruz County.

Currently, a maximum of 120 households may be assisted by this preference program at any given time. A maximum of 15% of new vouchers issued will be dedicated to applicants receiving this preference. All other applicants on the Santa Cruz County Housing Choice Voucher waiting list will be assisted on a first-come, first-served basis.

If there are not enough eligible disabled and medically vulnerable homeless applicants on the Housing Authority's waiting list to reach the maximum of 120 households under this preference program, the Housing Authority may accept referrals for persons eligible for this preference program who are not on the waiting list.

III. Special Programs

Over time, HUD has awarded the Housing Authority with funding for specific voucher types to serve specific populations. In some instances, these special programs offer vouchers to eligible persons from the Housing Choice Voucher (HCV) waiting list. In other instances, vouchers are issued based on referrals from service providers. All special voucher programs are listed and described below. If special program vouchers are project based, the unique eligibility criteria described below will be preserved.

Veterans Assisted Supportive Housing / VASH (286 vouchers)

The Department of Housing and Urban Development (HUD) and the Veterans Administration (VA) have partnered to create a program for homeless veterans that combines HUD Housing Choice Voucher rental assistance with case management and clinical services provided by the Department of Veterans Affairs at its medical centers and in the community. Funding for this program is limited to housing authorities that partner with "eligible Veterans Affairs Medical Centers (VAMCs) or other entities as designated by the VA." Rather than issuing a Notification of Funding Availability for all housing authorities to respond to, HUD has contacted specific housing authorities and invited specific agencies to apply for funding.

The Housing Authority of the County of Santa Cruz has received a total of 286 VASH vouchers. VASH vouchers are not issued based on placement on Housing Authority waiting lists. Instead, referrals for eligible homeless veterans are provided by the Veterans Administration.

Family Unification Program (123 vouchers)

Family Unification vouchers have been made available by HUD for this program. The Family Unification Program vouchers are reserved for families for which lack of adequate housing is a primary factor in the imminent placement of their a child or children in out-of-home care or in the delaying of discharge of a child or children to the family from out-of-home care. To be considered for Family Unification assistance, families can self-identify or will be identified through the County Human Services Department (HSD) and community service providers.

Family Unification vouchers are not issued based on placement on the Housing Choice Voucher waiting list. Instead, HSD provides referrals to the Housing Authority based on comprehensive risk assessment and eligibility determination. HSD will provide written certification to the Housing Authority that a family qualifies as an eligible family. A family will be certified as eligible if it is determined that (1) the children are at imminent risk of placement in out-of-home care or at risk of having their discharge to the family from out-of-home care delayed (2) the lack of adequate housing is a primary factor in the risk of placement or delay of discharge (3) it is anticipated that the housing assistance and supportive services provided by the Family Unification Program will be effective in preventing out-of-home placement or preventing further delay in discharging the child or children from out-of-home care and (4) the family meets all other eligibility requirements for Section 8 assistance.

Responsibilities for administering the Family Unification Program are as follows:

The Housing Authority will be responsible wholly or in part for

1. certifying eligibility;
2. providing orientation in regards to the Section 8 Housing Choice Voucher Program;

FY2016 - Performance Measurement Module (Sys PM)

Summary Report for CA-506 - Salinas/Monterey, San Benito Counties CoC

For each measure enter results in each table from the System Performance Measures report generated out of your CoCs HMIS System. There are seven performance measures. Each measure may have one or more “metrics” used to measure the system performance. Click through each tab above to enter FY2016 data for each measure and associated metrics.

RESUBMITTING FY2015 DATA: If you provided revised FY 2015 data, the original FY2015 submissions will be displayed for reference on each of the following screens, but will not be retained for analysis or review by HUD.

ERRORS AND WARNINGS: If data are uploaded that creates selected fatal errors, the HDX will prevent the CoC from submitting the System Performance Measures report. The CoC will need to review and correct the original HMIS data and generate a new HMIS report for submission.

Some validation checks will result in warnings that require explanation, but will not prevent submission. Users should enter a note of explanation for each validation warning received. To enter a note of explanation, move the cursor over the data entry field and click on the note box. Enter a note of explanation and “save” before closing.

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.

FY2016 - Performance Measurement Module (Sys PM)

	Universe (Persons)			Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Submitted FY2015	Revised FY2015	Current FY	Submitted FY2015	Revised FY2015	Current FY	Difference	Submitted FY2015	Revised FY2015	Current FY	Difference
1.1 Persons in ES and SH	766	768	830	62	62	65	3	46	46	52	6
1.2 Persons in ES, SH, and TH	1389	1392	1484	194	191	199	8	109	109	119	10

b.

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.

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)		
	Previous FY	Current FY	Previous FY	Current FY	Difference	Previous FY	Current FY	Difference
1.1 Persons in ES and SH	-	805	-	104		-	56	
1.2 Persons in ES, SH, and TH	-	1455	-	271		-	142	

FY2016 - 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	
	Revised FY2015	# of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	Revised FY2015	# of Returns	% of Returns	# of Returns	% of Returns
Exit was from SO	5	19	1	1	5%	0	1	5%	1	4	21%	6	32%
Exit was from ES	233	318	20	13	4%	12	7	2%	25	31	10%	51	16%
Exit was from TH	233	268	0	4	1%	2	6	2%	3	14	5%	24	9%
Exit was from SH	0	0	0	0		0	0		0	0		0	
Exit was from PH	16	23	2	0	0%	1	0	0%	0	3	13%	3	13%
TOTAL Returns to Homelessness	487	628	23	18	3%	15	14	2%	29	52	8%	84	13%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

FY2016 - Performance Measurement Module (Sys PM)

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

	2015 PIT Count	Most Recent PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	2959	3022	63
Emergency Shelter Total	374	453	79
Safe Haven Total	0	0	0
Transitional Housing Total	478	462	-16
Total Sheltered Count	852	915	63
Unsheltered Count	2107	2107	0

Metric 3.2 – Change in Annual Counts

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Unduplicated Total sheltered homeless persons	1415	1421	1501	80
Emergency Shelter Total	759	761	832	71
Safe Haven Total	0	0	0	0
Transitional Housing Total	728	732	779	47

FY2016 - 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 FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	94	137	106	-31
Number of adults with increased earned income	6	13	19	6
Percentage of adults who increased earned income	6%	9%	18%	9%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	94	137	106	-31
Number of adults with increased non-employment cash income	3	6	13	7
Percentage of adults who increased non-employment cash income	3%	4%	12%	8%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults (system stayers)	94	137	106	-31
Number of adults with increased total income	9	17	25	8
Percentage of adults who increased total income	10%	12%	24%	12%

FY2016 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	152	151	125	-26
Number of adults who exited with increased earned income	41	39	46	7
Percentage of adults who increased earned income	27%	26%	37%	11%

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

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	152	151	125	-26
Number of adults who exited with increased non-employment cash income	42	41	14	-27
Percentage of adults who increased non-employment cash income	28%	27%	11%	-16%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY2015	Revised FY2015	Current FY	Difference
Universe: Number of adults who exited (system leavers)	152	151	125	-26
Number of adults who exited with increased total income	72	71	56	-15
Percentage of adults who increased total income	47%	47%	45%	-2%

FY2016 - 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 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	998	1001	1091	90
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.	174	152	208	56
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)	824	849	883	34

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1311	1315	1315	0
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.	251	229	270	41
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.)	1060	1086	1045	-41

FY2016 - 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 the FY2016 Resubmission 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 2015	Revised FY2015	Current FY	Difference
Universe: Persons who exit Street Outreach	321	444	352	-92
Of persons above, those who exited to temporary & some institutional destinations	75	76	75	-1
Of the persons above, those who exited to permanent housing destinations	23	27	26	-1
% Successful exits	31%	23%	29%	6%

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

FY2016 - Performance Measurement Module (Sys PM)

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited	1086	1090	1234	144
Of the persons above, those who exited to permanent housing destinations	583	588	615	27
% Successful exits	54%	54%	50%	-4%

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

	Submitted FY 2015	Revised FY2015	Current FY	Difference
Universe: Persons in all PH projects except PH-RRH	161	160	111	-49
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	140	139	103	-36
% Successful exits/retention	87%	87%	93%	6%

FY2016 - SysPM Data Quality

CA-506 - Salinas/Monterey, San Benito Counties CoC

This is a new tab for FY 2016 submissions only. Submission must be performed manually (data cannot be uploaded). Data coverage and quality will allow HUD to better interpret your Sys PM submissions.

Your bed coverage data has been imported from the HIC module. The remainder of the data quality points should be pulled from data quality reports made available by your vendor according to the specifications provided in the HMIS Standard Reporting Terminology Glossary. You may need to run multiple reports into order to get data for each combination of year and project type.

You may enter a note about any field if you wish to provide an explanation about your data quality results. This is not required.

FY2016 - SysPM Data Quality

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016	2012-2013	2013-2014	2014-2015	2015-2016
1. Number of non-DV Beds on HIC	258	247	272	263	544	550	565	515	251	261	376	311			39	317				
2. Number of HMIS Beds	99	101	109	110	495	550	565	445	86	122	137	70			39	68				
3. HMIS Participation Rate from HIC (%)	38.37	40.89	40.07	41.83	90.99	100.00	100.00	86.41	34.26	46.74	36.44	22.51			100.00	21.45				
4. Unduplicated Persons Served (HMIS)	659	655	750	778	670	743	732	781	166	170	165	113	0	10	338	371	0	0	0	0
5. Total Leavers (HMIS)	378	314	449	467	190	362	351	360	25	33	79	36	0	8	169	316	0	0	0	0
6. Destination of Don't Know, Refused, or Missing (HMIS)	144	37	140	184	4	12	2	10	0	2	10	0	0	0	8	19	0	0	0	0
7. Destination Error Rate (%)	38.10	11.78	31.18	39.40	2.11	3.31	0.57	2.78	0.00	6.06	12.66	0.00		0.00	4.73	6.01				



August 15, 2017

Ms. Katherine Thoeni
Executive officer
Coalition of Homeless Services Providers
220 12th Street
Marina, CA 93933

CENTRAL OFFICE:
123 RICO ST.
SALINAS, CA 93907
831-775-5000
831-649-1541
FAX 831-424-9153
TDD 831-754-2951

**Re: Housing Authority of the County of Monterey
Connection to the Continuum of Care (CA506)
Application for Federal Fiscal Year 2017 Continuum of Care Grant**

Dear Katherine:

In response to the NOFA for the Continuum of Care (CoC) funds for fiscal year 2017, the Housing Authority of the County of Monterey (HACM) is happy to support the application for funding for CA-506. The HACM has long been a member of the Coalition of Homeless Services Providers, the Collaborative Applicant for CA-506, and has supported the efforts to end homelessness in our county.

In addition to having one currently funded program under the CoC that serve homeless families (Pueblo Del Mar), the HACM has 199 HUD-VASH vouchers for chronically homeless veterans that we operate in conjunction with the local Veterans Affairs offices. The HACM has also implemented a special homeless set aside of 100 vouchers in its Housing Choice Voucher (HCV) program for homeless persons and families that meet the HEARTH definition of homelessness as long as a service provider will provide housing search assistance and supportive services for a minimum of one year. In both the HUD-VASH and homeless set aside program, the HACM permits those families that no longer need supportive services to transfer into the regular voucher program and thus free up their special voucher for another homeless family or individual.

In the HCV program, the HACM has preferences for formerly homeless or homeless families who are actively enrolled in transitional housing, case management or other self-sufficiency programs. The HCV program has a preference for veterans or their spouses as well as a preference for victims of domestic violence.

The HACM continues to support the Continuum of Care by serving as a member of the Leadership Council for the 10 Year Plan to End Homelessness for Monterey and San Benito Counties (CA-506). The HACM also actively participates in the planning and implementation of the Coordinated Assessment and Referral Program for our CoC as well as the Housing Pipeline Committee of the 10 Year Plan to End Homelessness.



*Mission Statement:
To provide, administer, and encourage quality affordable housing and related services
to eligible residents of Monterey County.*



Should you need any further information, please contact me at (831) 775-5022.

Sincerely,

HOUSING AUTHORITY OF THE
COUNTY OF MONTEREY

A handwritten signature in black ink, reading "Jean L. Goebel". The signature is written in a cursive style with a large initial "J" and a long, sweeping underline.

Jean L. Goebel
Executive Director

4-III.C. SELECTION METHOD

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

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

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

HACM Policy

The HACM will offer a preference to any family that has been terminated from its HCV program due to insufficient program funding.

Local preferences will be used to select 75% families from the waiting list and the remaining 25% will be selected by date and time.

From all eligible families: Selection shall be made without regard to race, color, creed, religion, sex, national origin, age familial status, or disability.

Each preference will receive an allocation of points. The more preference points an applicant has, the higher the applicant's place on the waiting list.

Local Preference with the same points will be ranked by the Ranking Point system and the date and time of application.

- The HACM will offer a preference to families who have had their Section 8 Housing Choice Voucher revoked/suspended due to HUD HAP funding shortfalls within the last 12 months. (50 points)
- Monterey County Resident- County residency preference will be given to an applicant that lives or works in Monterey County at the time of application. (50 points)
- Working Family- A Working family preference will be given to an applicant where the head, spouse or co-head is employed at least 24 hours a week. A preference will also be given if the head, spouse or co-head are active participants in an accredited educational and training programs designed to prepare the individual for the job market. (15 points).
- Elderly or Disabled Person- An elderly preference applies if the head, spouse or co-head is a person who is age 62 or older. A disabled person preference is given if any family member receives Social Security or Supplemental Security benefits or otherwise meets the definition of disabled as defined under Section 223 of the Social Security Act.(15 points)
- United States Veteran's - This preference applies to active US Armed Forces Veterans and their surviving spouses. (10 points)

- 24 CFR 982.203
- **Involuntary Displacement-** An applicant is, or will be, involuntarily displaced if the applicant has vacated or will vacate his/her housing unit as a result of one or more of the following actions: (Maximum 50 points)

- **Displaced by a HUD Program-** Includes displacement because of disposition of a public housing or multifamily rental housing project by HUD under Section 203 of the Housing and Community Development Amendments of 1978.

- **Displaced to avoid reprisals-** Family members provided information on criminal activities to a law enforcement agency; and, based on a threat assessment, the District Attorney Office recommends relocating the family to avoid or minimize the risk of violence against family members as a reprisal for providing such information.

- **Displaced by government action-** Displacement activity carried on by a local code enforcement agency or uninhabitability as a result of a disaster such as fire or flood as verified by FEMA, American Red Cross or other disaster assistance agency. Local agency is defined as a public code enforcement agency in Monterey County.

- **Victims of Domestic Violence-** When there is actual or threatened, physical violence directed against the applicant or the applicant's family within the last 12 months by a spouse or other household member who lives in the unit with the family. To qualify for this preference, the abuser must still reside in the unit from which the victim was displaced. The applicant must certify that the abuser will not reside in the unit unless HACM gives written approval. HACM will approve the return of the abuser to the household under certain conditions including only if a counselor, therapist or other knowledgeable professional recommends in writing that the individual be allowed to reside with the family. (10 points)

- **Live -In Place-** Families who are considered to be living in place. Those living in a unit that will be brought under contract where the landlord accepts the HCV Program. Verification required will be a copy of their lease in an appropriate size dwelling unit for the family. HACM will also require utility bills for a three month period verifying their residency in the unit. (15 points)

- **Set-Aside Homeless Preference-** Eligible homeless applicants referred by agencies through the County of Monterey Continuum of Care who are exiting transitional housing programs or emergency shelters with no other permanent housing placement options. Must meet the HUD definition of homeless as defined in the Hearth Act. (50 points)

- **Formerly Homeless-** Formerly homeless families or homeless families actively enrolled in case management, transitional housing, or other self-sufficiency program. (25 points)

- **Revoked/Suspended Voucher-** A preference will be offered to families who have had their Housing Choice Voucher revoked/suspended due to HUD HAP funding shortfalls within the last twelve months. (75 points)