

1A. Continuum of Care (CoC) Identification

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

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

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

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

1A-3. CoC Designation: CA

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

1B. Coordination and Engagement–Inclusive Structure and Participation

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1B-1.	Inclusive Structure and Participation–Participation in Coordinated Entry.	
	NOFO Sections V.B.1.a.(1), V.B.1.e., V.B.1f., and V.B.1.p.	
	In the chart below for the period from May 1, 2022 to April 30, 2023:	
	1. select yes or no in the chart below if the entity listed participates in CoC meetings, voted—including selecting CoC Board members, and participated in your CoC’s coordinated entry system; or	
	2. select Nonexistent if the organization does not exist in your CoC’s geographic area:	

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

16.	Organizations led by and serving Black, Brown, Indigenous and other People of Color	Yes	Yes	Yes
17.	Organizations led by and serving LGBTQ+ persons	Yes	Yes	Yes
18.	Organizations led by and serving people with disabilities	Yes	Yes	Yes
19.	Other homeless subpopulation advocates	Yes	Yes	Yes
20.	Public Housing Authorities	Yes	Yes	Yes
21.	School Administrators/Homeless Liaisons	Yes	Yes	Yes
22.	Street Outreach Team(s)	Yes	Yes	Yes
23.	Substance Abuse Advocates	Yes	Yes	Yes
24.	Substance Abuse Service Organizations	Yes	Yes	Yes
25.	Agencies Serving Survivors of Human Trafficking	Yes	Yes	Yes
26.	Victim Service Providers	Yes	Yes	Yes
27.	Domestic Violence Advocates	Yes	Yes	Yes
28.	Other Victim Service Organizations	Yes	Yes	Yes
29.	State Domestic Violence Coalition	Yes	No	Yes
30.	State Sexual Assault Coalition	No	No	Yes
31.	Youth Advocates	Yes	Yes	Yes
32.	Youth Homeless Organizations	Yes	Yes	Yes
33.	Youth Service Providers	Yes	Yes	Yes
	Other: (limit 50 characters)			
34.	3 Veterans Agencies	Yes	Yes	Yes
35.	Legal Services	Yes	Yes	Yes

1B-2.	Open Invitation for New Members.	
	NOFO Section V.B.1.a.(2)	

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

(limit 2,500 characters)

1.Membership is open to any person or organization who supports the mission, policies, and goals of the CoC. Membership information and the application are posted in two areas on the CoC website. Members may join at any time, but the CoC held a special membership drive to coincide with our annual meeting in February. The meeting and membership drive were promoted at regional meetings (CoC, homeless coalitions and committees) and invites were emailed to members and other partners, asking them to share invites with their respective lists. Members and staff are encouraged to invite new individuals, organizations, and agencies who want to work collaboratively with the CoC on preventing and ending homelessness in our region.

2.Membership information is located on the CoC and Coordinated Access, Referral, Entry & Stabilization (CARES) websites, emailed (upon request or through targeted outreach), and promoted during the annual drive (email, handouts, website home page). Accommodation for participation can be requested online or by asking staff. Since COVID all meetings are held via Zoom (only or hybrid) and recorded, decreasing obstacles for participation by increasing on-demand language and accessibility options (i.e., captioning, transcripts, translation, customizable fonts). If requested, the CoC staff can employ local translators and coordinate sign language video options). Physical meeting locations are handicap accessible.

3.The White Earth Tribe (WET) has a designated voting and a designated advisory seat on the CoC board. Through the CoCs Advancing Equity Together planning, outreach to community organizations who specifically serve persons who identify as BIPOC or LGBTQ+ resulted in membership from two agencies who provide LGBTQ+ advocacy and service in 2022. The CoC has three disability advocacy organizations and many disability service organizations as members, two of which were added as a result of targeted outreach to integrate state and Medicare funded disability housing and support services into our homeless response system (CARES coordinated entry). Our newest member is the Afro American Development Association who was just funded in July to be a new outreach provider in the CoC.

1B-3.	CoC's Strategy to Solicit/Consider Opinions on Preventing and Ending Homelessness.	
	NOFO Section V.B.1.a.(3)	

Describe in the field below how your CoC:	
1.	solicited and considered opinions from a broad array of organizations and individuals that have knowledge of homelessness, or an interest in preventing and ending homelessness;
2.	communicated information during public meetings or other forums your CoC uses to solicit public information;
3.	ensured effective communication and access for persons with disabilities, including the availability of accessible electronic formats; and
4.	took into consideration information gathered in public meetings or forums to address improvements or new approaches to preventing and ending homelessness.

(limit 2,500 characters)

1. Multi-level engagement from numerous stakeholders, including persons with lived experience of homelessness (LE) is used to help achieve the CoC goal of making homelessness rare, brief, and one-time. All CoC meetings are held online (exclusively or hybrid) including the CoC board, Homeless to Housed Task Force (HTH is our full membership + other partners), coordinated entry, LE and Youth Advisory Boards (LEAB & YAB), and committees (Local Homeless Committee (LHC), Advancing Equity Together (AET)). Targeted feedback is solicited at and between meetings via surveys and online tools (Survey Monkey, Zoom polls/white boards, and Mentimeter) which allows for anonymous input. At quarterly HTH meetings input was sought on CBDG, equity, performance, goals, and authentic LE engagement. HTH meetings have representation from a broad array of stakeholders (homeless providers, committee reps, persons w/LE, and mainstream partners). Together these partners helped develop our CoC System Performance (SPM) goals via our multi-level CoC structure designed to foster convergent communication, develop leadership, accommodate regional differences, and increase authentic engagement from people with LE. Our bi-annual needs and satisfaction survey in February had 112 responses from people with LE and 19 responses from agencies. In May, 44 partners responded to our Housing Prioritization Tool (HPT) survey sharing input one-year after starting this new assessment tool.

2. Compiled input and subsequent actions were shared with the respective groups via email, posted on the CoC website, and at meetings. Occasionally requiring follow-up input. SPM goals and bi-annual survey feedback were initially presented as raw data, then draft plans, then approved documents.

3. LEAB and YAB meetings were in person at accessible locations, but all other input was gathered online using tools mentioned above. Closed captioning, transcripts and translation features were available.

4. Our AET plan is derived only from BIPOC LE input. All CoC and CARES policies and form updates are vetted by our LE committees. Bi-annual survey input led to both design and training changes at the CoC and program level. Our HPT was created by a committee with targeted representatives (geography, program type, race, population/sub-population, race), sent to the various CoC committees for feedback including all LE committees, with all LE input integrated. LEAB and YABs are now engaged in finalizing updates to the HPT.

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

(limit 2,500 characters)

On 7/14 the local competition soliciting new projects was published on the CoC website and announced via an email to the CoC listserv (members+).

Announcements were made at regional open meetings on 7/25, 7/26, & 8/16.

The posting included links to the competition webpage with an overview, timeline, policies, Scorecard, and anticipated funding.

1. The competition was open to any organization who met threshold criteria, including agencies who had not received CoC funds. Prior to the competition, the CoC Coordinator attended local homeless committees and made follow-up contacts to solicit bonus projects from new and current organizations. Two new agencies applied and were ranked.

2. Interested agencies needed to submit their Intent to Apply and pass eligibility and deadline thresholds to proceed. All Applicants were invited to a Lab and received Application Packages with submission documents (Scorecard, Application Overview with CoC/HUD priorities, competition calendar, ranking and reallocation policies, and competition links (e-snaps, CoC & HUD). New applicants were required to submit completed packages (Scorecard & attachments of supporting documents) by 8/24 via email. New and Renewal applicants needed to submit their completed applications in esnaps and via PDF by 8/25. Renewal project scorecards, Housing First Assessment, and supporting documents were reviewed in June by the Performance Evaluation Cmte. and used in ranking with updated data.

3. All projects submitting required documents by the deadline were scored. The Ranking Cmte. was limited to non-applicants and included 2 persons w/ lived experience and diverse regional, racial, and service representatives. The committee reviewed all submitted documents including the scorecard with objective criteria and self-determined numerical score. The committee verified or made adjustment to the score based on review of documents and allowable adjustments in the approved ranking policies (need, improvement plan). The committee provided a recommend rank and tiering to the CoC, as well as three alternative ranking options. The CoC discussed, voted on and approved the recommended option. While some projects were required to edit their applications or budget, no projects were rejected.

4. Notice and materials were in electronic format via email and on the website with a notice of how to request accommodations. This announcement was also made at various meetings and the NOFO lab. No requests were made.

1C. Coordination and Engagement

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

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

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

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

(limit 2,500 characters)

1.MN's Dept. of Human Services Office of Economic Opportunity (OEO) is the ESG recipient for the balance of state and issued the 2023 bi-annual Consolidated Application for state and ESG homeless funds. A sub-group of the CoC Performance Evaluation cmte. reviewed and scored all regional applications, afterwards meeting with DHS-OEO staff to discuss funding recommendations based on design and CoC goals and data. All ESG sub-recipients are CoC members and represented on CoC board and cmte's. OEO and subrecipients contributed to the CoC establishment of Written Standards. Three ESG sub-recipients host local homeless committees. The CoC promoted ESG funding opportunities and encouraged applicants to align with CoC goals in determining requests.

2.Data performance was reviewed during the HMIS Quarterly Data Quality (QDQ) process with CoC, HMIS, and OEO staff collaboratively acknowledging high performers and responding to improve underperforming projects. The CoC annually reviews ESG sub-recipient performance and communicates concerns to OEO staff, collaboratively working on improvement plans. In 2022, the CoC participated in a cohort with the HUD Field Office, our HMIS Lead, and a project who received both ESG and CoC funds. The cohort was intended to support improved compliance, outcomes tracking, and set-up.

3.CoC and OEO staff participate in MN Heading Home Alliance meetings where homeless and COVID planning are discussed. The CoC receives input from local ESG subrecipients at CoC meetings and through surveys and relays this at state meetings or directly to staff. PIT and HIC data are shared with state staff, including the MN Consolidated Plan (ConPlan) agencies, including OEO.

4.Local information such as market housing trends, rental, and transportation barriers was shared with ConPlan agencies, through public hearings, written comments, and via CoC meetings in which state staff attended. State interagency council and ConPlan representatives attended our 2/23 CoC membership mtg. to collect input on the next ConPlan and promote the statewide racial justice plan. Our MN Interagency Council representative also promoted survey and feedback session opportunities at meetings. The CoC Coordinator meets with the City of Moorhead CDBG representative on a quarterly basis to review data (PIT, HIC, SPMs, coordinated entry) and discuss emerging trends, current needs, CoC goals and priorities. This staff also serves on our Advancing Equity Together Advisory Cmte.

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

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

1.	Conducted mandatory training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
2.	Conducted optional training for all CoC- and ESG-funded service providers to ensure families are not separated.	Yes
3.	Worked with ESG recipient(s) to adopt uniform anti-discrimination policies for all subrecipients.	Yes
4.	Worked with ESG recipient(s) to identify both CoC- and ESG-funded facilities within your CoC's geographic area that might be out of compliance and took steps to work directly with those facilities to bring them into compliance.	Yes
5.	Sought assistance from HUD by submitting questions or requesting technical assistance to resolve noncompliance by service providers.	Yes

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

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

1.	Youth Education Provider	Yes
2.	State Education Agency (SEA)	Yes
3.	Local Education Agency (LEA)	Yes
4.	School Districts	Yes

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

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

(limit 2,500 characters)

The CoC prioritized ending youth and family homelessness and recognizes that partnering with educational entities is essential to achieving this goal. Schools are one vital partner. Five formal partnerships support stronger collaboration with schools. 1) A SEA MOU outlines roles of CoCs and MDE in our collaborative efforts to ensure that students & their families are informed of their rights under McKinney Vento and have access to resources they need to be stably housed through improved communication, data, education, training, and referrals. 2) CoC Membership Agreement: School liaisons are CoC members and participate in CoC planning at the CoC level and as members of our homeless coalitions/committees. This participation was vital in the planning of the plan to end youth homelessness. The Moorhead Public School liaison represented the schools on the steering committee. 3) The regional Homework Starts with Home (HWSWH) MOU: HWSWH provides rental assistance and support services to families with school age children to stabilize them in housing and increase success in school (stay enrolled, increase attendance, increase grades). Twenty school districts, ten counties, four homeless providers, eight community partners, fourteen housing partners, and the CoC are signatures on the agreement and meet quarterly, along with program participants/former participants meet to review outcomes and identify areas to strengthen the program. Meetings have been held in conjunction with CoC meetings to increase alignment with goals to end youth and family homelessness. (i.e. The school districts identify and refer homeless youth to HWSWH and Coordinated Entry and provide funding for transporting students. School liaisons work with homeless program staff to assure students enroll them in school, provide tutoring, obtain required educational and health records. The HRA provides vouchers. Homeless providers provide support services. All meet regularly.) 4) The CoC has developed a sample MOU to help local coalitions seek MOUs with early childhood and public schools to outline partner roles and responsibilities. Ideally, these MOU's would be with the entire CoC but we recognize that some agencies, SEA's, LEA's, and early childhood providers need individual agreements.; and 5) The Moorhead Schools are a signed CARES partners to serve as Access, Outreach, and Assessment sites for homeless students and their families. They also agree to provide monthly data to the FM CARES data commit

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

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

(limit 2,500 characters)

CoC Policy states, “the educational and service needs of families with minor children will be fully assessed with expediency upon entry to the program. School-aged youth will be enrolled in school immediately (target is 3 days or less), working collaboratively with the designated school homeless liaison in the Local Educational Agency (LEA) to ensure that all educational assessments are completed. To the extent feasible, students in homeless situations should be kept in their school of origin (defined as the school the student attended when permanently housed or the school in which the student was last enrolled), unless it is against the parent’s or guardian’s wishes. Students in homeless situations must have access to the educational and other services they need to ensure that they have an opportunity to meet the same challenging state student academic achievement standards to which all students are held. Appropriate referrals will be made in the community to address the individual needs of all the children and other family members. The CoC staff and board shall strive to establish an MOU with all early education and public or private elementary and secondary schools in the region to support this policy.” To support utilization and compliance with this policy the CoC provides an annual training, has a written MOU with the SEA, two MOUs with local school districts, and supports projects entering into MOU’s or formal agreements with their local school districts and early childhood partners, many of which do. Three of our four homeless coalition host agencies are Community Action Agencies, and all also operate Head Start programs, working to support participants of homeless programs and assure access to their early childhood programs (priorities, busing, supplies). Our Coordinated Access, Referral, and Entry System (CARES) are used to identify students (youth and accompanied kids) and connect them to school liaisons (MN Dept. of Education provides the CoC with a list annually). The MN funded Homework Starts with Home program has formal agreements and processes between 20 school districts, homeless agencies, faith partners, counties, PHAs, and the CoC to collaboratively work to support enrollment and stabilize attendance in schools with the help of vouchers, coordination, and support services.

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

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

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

9.	Tribal Home Visiting Program	No	No
	Other (limit 150 characters)		
10.			

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

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

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

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

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

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

(limit 2,500 characters)

The CoC has three Victim Services Providers (VSPs) in our region. Two, Someplace Safe and Lakes Crisis, are members of the CoC and make referrals to our regional coordinated entry system. The third, Dove, is a tribal program on the White Earth Reservation. While Dove is not a signed member, the White Earth Tribe is. A fourth VSP, the YWCA of Cass-Clay, is located in the border city of Fargo, ND. Although in separate states and CoCs, Fargo is part of what we call the Fargo-Moorhead (FM) Area, which is only separated by a river. The F-M Area has cross-border centralized coordinated access and assessment. The YWCA is the only VSP shelter, VSP transitional housing provider, and only coordinated entry access site for survivors in the F-M area.

- All four VSPs are on our Homeless to Housed (HTH) Task Force (our full CoC membership + partners). As such, they are invited to provide input on surveys and attend CoC meetings where they provide information on system policies, goals, forms, outcomes, and more. Someplace Safe, the YWCA, and Lakes Crisis participate in CoC committees and attended HTH Task Force meetings in which they contributed to the development of annual CoC goals and System Performance targets. In the design and one year survey of our new Assessment tool, first implemented in March 2022, the CoC sought targeted feedback from all four local VSPs, Violence Free MN (VFM), and the MN Office of Justice (OJP). The YWCA served on the tool planning committee representing VSPs. Feedback from VSPs and state VS programs was incorporated in the design of the tool and is now being reviewed in the updates following the 1-year survey.

- The YWCA developed and provided one of the required trainings on our online training site addressing the unique needs of victims that incorporates trauma informed care, making appropriate referrals, awareness of the unique needs of survivors, and client centered care. This and other applicable trainings (Violence Against Women Action (VAWA), Safe Harbor, Trauma Informed Care) are required for all homeless provider staff including ESG and CoC funded providers. The Performance Evaluation Committee annually reviews all ESG and CoC funded projects, including looking at program policies, forms and other documents (outreach, intake, PR materials, etc.), assessing for compliance with CoC policies and core principals including housing first, client centric and trauma informed care.

1C-5b.	Coordinated Annual Training on Best Practices to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC coordinates to provide training for:	
1.	project staff that addresses best practices (e.g., trauma-informed, victim-centered) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually); and	
2.	Coordinated Entry staff that addresses best practices (e.g., trauma informed care) on safety and planning protocols in serving survivors of domestic violence and indicate the frequency of the training in your response (e.g., monthly, semi-annually).	

(limit 2,500 characters)

The CoC online training site is used to provide optional and required (when starting a position or annually) on-demand training to all CoC member agencies. The site tracks attendance and completion. Some courses have post testing. Training is used in partnership with CoC policies (Housing First, VAWA) to support compliance (federal and CoC) and the use of best practices. The CoC also provides an online course on understanding trauma and working with survivors. The VAWA forms and policies are listed on the CoC website. The CoC requires an annual VAWA refresher training to be completed by October 1st of each year. This year's training included VAWA reauthorization information, including the expanded Category 4 homeless definition.

1. The YWCA developed and provided one of the required courses on our CoC training site addressing the unique needs of victims that incorporates TIC, referrals, awareness, and client centered care. Other required courses for ESG and CoC program staff that specifically address safety and best practices include: VAWA, Core Principles to End Homelessness, Housing First Focus, Safety Planning, Intro to Trauma Informed Care, Principles to Practice Housing First Series, Trauma Informed Care, HUD Equal Access & Gender Identify Rule, Fair Housing and Discrimination, and Professional Ethics and Boundaries. Optional courses on the site include Sex Trafficking in MN and MN Safe Harbor. The CoC requires all ESG and CoC funded projects to comply with Housing First and VAWA standards and policies. The CoC reviews ESG and CoC projects for compliance annually and provides technical assistance to underperforming projects. Assistance may include edits to policies, additional training, updates to forms, or similar.

2. CoC coordinated entry policies include inclusion of client choice, client centered training/practices, Housing First, VAWA (survivors rights, basic protections, compliance, forms, policies), and trauma informed care practices and protocols. Partners sign a partnership agreement agreeing to be trained and follow CARES policies and protocols. Compliance review is ongoing and reviewed annually as part of annual ESG and CoC project evaluations. All new Access and Assessment sites must also have an onboarding meeting with the CARES Coordinator to review core policies and best practices.

1C-5c.	Implemented Safety Planning, Confidentiality Protocols in Your CoC's Coordinated Entry to Address the Needs of Domestic Violence, Dating Violence, Sexual Assault, and Stalking Survivors.	
	NOFO Section V.B.1.e.	
	Describe in the field below how your CoC's coordinated entry includes:	
1.	safety planning protocols; and	
2.	confidentiality protocols.	

(limit 2,500 characters)

CARES is the name of CoC coordinated entry system. CARES stands for Coordinated Assessment, Referral, Evaluation, and Stabilization system. CARES policies, training, and tools were developed and are reviewed annually with input from regional victim services providers.

1. Safety planning protocols are integrated into CARES in various ways.
 - a. Assessment of immediate safety is the first question on the CARES access and assessment tools. If safety is in question, the tool prompts staff to offer a referral to law enforcement or a victim service provider. Assessing safety and trauma informed/victim centered care while interviewing is part of the CARES training for all Access and Assessment staff.
 - b. An alternative secure prioritization list with no identifying information is hosted outside of HMIS to assure victims have access to housing and services without compromising safety. Only the list manager and CoC Coordinator have access to this list.
 - c. CoC required training incorporates the importance of empowering victims to be at the center of decision making, data privacy, and data safety.
 - d. Client choice questions are incorporated into Access and Assessment tools, including need for staffed and locked entry.
 - e. A Safety Planning form is part of the CoCs housing stability tool kit to be used prior to moving in. Utilizing this form is referenced in the general move-in training.
 - f. The VAWA emergency transfer form and policy are required and all housing and ESG and CoC funded service staff are required to be trained on VAWA. All projects have instituted Emergency Transfer procedures and integration of VAWA policies is reviewed annually by the Performance Evaluation Committee.
2. As described above, the CoC hosts a parallel priority list to assure the safety of survivors and comply with VAWA. Agencies enter data via a webform and only CARES staff have access to the priority list. All CARES agencies sign a Data Sharing Agreement and staff take required to take courses on data privacy, security, and confidentiality. Training incorporates confidentiality when conducting assessments, in referrals, and in case consultations to assure safety and respect privacy. Names on the CARES priority list and DV priority list are not shared when making a referral or in case conferencing. Only HMIS IDs or other eligibility information and priority criteria. Names and contact information are shared once the housing provider is willing to make an offer for an open unit.

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

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

(limit 2,500 characters)

Our CoC operates an alternative prioritization list, but VSPs have chosen to utilize partner agencies to conduct assessments, so most data are entered into HMIS, unless a client declines due to concern for their safety. In October, our new CoC funded DV coordinated entry position will begin to train VSP staff to assess survivors, manage our alternative prioritization list, and collect quarterly surveys from VSPs. So, until then HMIS is our primary data source to identify the number of survivors and their characteristics. The CoC identified 1,089 survivors that need housing and services, including 796 survivors in current projects. This is a count of unique adults and heads of household (the clients to whom the question applies) active in SSO-CE, shelter, prevention, PH, SSO, outreach, or TH projects in CoC from 7/1/22-6/30/23 who reported having experienced domestic violence. The CoC also looked at the number of unique adults and heads of household in coordinated entry from 7/1/22-6/30/23 who reported having experienced domestic violence. The CoC also collected de-identified aggregate data during the PIT and in a survey of VSPs.

2. The CoC looks at aggregate HMIS CE data monthly to identify trends in need. Annually, HMIS data is analyzed for trends (# of total survivors or in a population) and disparities (if survivors are disproportionately having negative exits or returning to homelessness). PIT and HIC data are also looked at in our annual comparison for trends. The CoC rarely collects or utilizes VSP data, other than the PIT and HIC, as we are not confident data is de-duplicated and compilation is time consuming. The alternative database sample size is under 5 so neither statistically valid nor safe to use alone. The CoC does not have a single comparable database for all VSPs in our region. Violence Free MN (VFM), the state VSP network, received funding to begin assessing what a data solution could look like, which was delayed due to staff turnover. MN Coordinators continue to work with VFM on increasing VSP engagement in the CoC, including communicating the benefits and need for improved data collection and reporting and providing support on multi-webinar series on working with CoCs. MN's HMIS help desk now provides support to VSPs on HUD data elements. The CoC worked with MN HMIS to collect data from de-identified aggregate data from VSPs for the 2023 PIT and HIC.

** **

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

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

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

(limit 2,500 characters)

1.The CoC requires that all housing, ESG and CoC funded projects be trained on VAWA annually and when starting their position. This training includes the CoCs emergency transfer policy and forms. Agencies are required to notify all clients (regardless of sex, gender, sexual orientation, or known victim status) of the policy and how to request an Emergency Transfer. It is recommended that agencies have the notice embedded early into the intake process and posted. ESG and CoC funded Housing Providers are monitored for compliance annually including review of agencies policies, handouts, and forms. All VAWA forms, including the Emergency Transfer Policy, are located on the CoC website on the VAWA page.

2.To request an emergency transfer, the tenant shall notify the housing program or CARES staff and submit a written request for a transfer to the program. Housing programs are required to provide reasonable accommodations to this policy for individuals with disabilities, assisting as needed to help tenants complete the request. The tenant’s written request for an emergency transfer should include either: A statement expressing that the tenant reasonably believes that there is a threat of imminent harm from further violence if the tenant were to remain in the same dwelling unit assisted under HP’s program; OR a statement that the tenant was a sexual assault victim and that the sexual assault occurred on the premises during the 90-calendar-day period preceding the tenant’s request for an emergency transfer.

3.The housing provider is responsible for notifying CARES staff of an internal transfer or requesting prioritization for a transfer to another existing program. Transfers are accommodated based on availability.

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

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

(limit 2,500 characters)

1. The CoC maintains a secure alternative Coordinated Entry priority list for Victim Services providers, youth under age 18, or those wishing to not share their data in HMIS. Assessors submit a webform with deidentifying client information. Only the CoC priority list manager(s) (PLM) and CoC Coordinator have access to the alternative priority list. When there is a housing opening, the PLM looks at both priority lists (HMIS and alternative) to select households for a referral. All transitional housing, rapid rehousing, dual component, long-term homeless, permanent supportive housing and other permanent housing programs dedicated to homeless are filled through this process.

2. Our CoC identified a challenge when our VSPs did not have trained designated Assessors or Access navigators. Partner homeless providers regularly outreach to VSPs for these roles. We know this is not always client centric or trauma informed as it can cause delays in access and often requires engaging with two or more additional service providers. Therefore, our CoC applied for a domestic violence Coordinated Entry Specialist and Access Specialist last year and fortunately received it. The Access Specialist will work on training and supporting VSP staff on using the CoC Housing Crisis Tool (diversion (creative/strengths-based problem solving), prevention and shelter screening/prioritization, comprehensive mainstream and community services assessment, and linkage to services, homeless and mainstream). Staff will start in November.

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1.CoC structure & planning are designed to assure authentic engagement from persons with lived experience (LE) of homelessness, including survivors. 45.27% of all households served experienced violence, with 31.79% fleeing.

- STRUCTURE:** The CoC currently has 3 persons with LE on the board, 2 are survivors, 1 fleeing. Two serve on our Performance Evaluation & Ranking Cmtes. At least 2 other board members are survivors. We collect victim status of those served because it is required & fleeing status to assess safety but do not ask for other board or cmte. participants because it is unnecessary & we do not wish to retraumatize. Status was shared in other ways. The CoC structure also includes 6 LE advisory cmte., 1 specific to youth, & 3 to equity. Our 4 regional homeless cmtes. have LE participants. Cmtes. meet monthly to quarterly. All CoC partners, including LE members, sign a member agreement to support safe, ethical, quality, & respectful engagement. The CoC free online training site provides valuable onboarding to new members offering courses on system design, definitions, policies, core beliefs, & more. LE members receive a stipend to show value to their time commitment.
- PLANNING:** The CoC also gathered input from persons with LE via online tools (Mentimeter, GPolls, white boards), at open meetings, & surveys (bi-annual, equity, tool feedback, annual goals). These surveys & tools allow for anonymity. Input gathered was integrated into our annual CoC plan, equity planning, CoC tools & policies. LE cmtes. review all tools & policies prior to finalization. VSP agencies were specifically asked to review/comment on tools & policies.

2.We recognize that each person’s experience of homelessness is unique, & one person’s experience. While there are many common challenges that all people who become homeless face, including trauma, some challenges are enhanced for survivors, like safety, privacy, & confidentiality concerns. A proposed update to our tool splits a barrier question on safety into 2 to emphasis what a barrier safety is. Safety & client choice & control are integrated at various levels into our policies & forms. Training on VAWA forms, confidentiality, data privacy, & trauma informed care are required for all homeless providers. Alternative prioritization lists & phone access are used to assure clients safety. Aggregating data collection for VSPs during the PIT & when reporting is used to protect survivors.

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

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

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

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

(limit 2,500 characters)

1. The CoC coordinated entry (CARES) policies and Governance Charter, including CoC anti-discrimination policies, are reviewed and updated annually at our annual membership meeting. Input is sought at least 30 days prior to the meeting and recommended updates may come from staff, the board, members, partner agencies, or committees (including regional homeless committee and lived experience (LE) committees). Two LGBTQIA+ providers attended our annual meeting. No major changes to the antidiscrimination policies were recommended, but the Advancing Equity Together (AET) Steering Committee (reps from the CoC board, staff, AET chair, and LE workgroups) recommended enhanced training and compliance (from recommendations reviewed and prioritized from LE workgroup and focus groups). The AET LE Advisory groups are working on SMART goals that will further equity.
2. The required CoC anti-discrimination courses (Fair Housing & Discrimination, Equal Access, VAWA, Disability Awareness & Sensitivity, 10 Fair Housing Mistakes) include policy recommendations and requirements. The CoC Coordinator has provided technical assistance, including examples of other policies and procedures, to projects that are new or were identified as non-compliant or underperforming. Refresher VAWA and Equal Access Rule courses are required for ESG and CoC projects each September.
3. As part of the annual ESG and CoC project review, the CoC Performance Evaluation Committee reviews agency policies and assesses projects on whether they integrated CoC policies clearly and completely. The committee provides follow-up requirements and recommendations based on their review. Anti-discrimination policy compliance is part of this review.
4. When deficiencies are identified, projects are either asked or required to update policies, depending on severity of finding (i.e., an agency was asked to update because their policy was too vague, while another agency was required because they did not include required language). The CoC has a goal of taking this review beyond ESG and CoC projects in 2023 and is seeking funding for staff time for the review, as well as for technical assistance and training to assure compliance.

1C-7.	Public Housing Agencies within Your CoC's Geographic Area—New Admissions—General/Limited Preference—Moving On Strategy.	
	NOFO Section V.B.1.g.	

You must upload the PHA Homeless Preference\PHA Moving On Preference attachment(s) to the 4B. Attachments Screen.

Enter information in the chart below for the two largest PHAs highlighted in gray on the current CoC-PHA Crosswalk Report or the two PHAs your CoC has a working relationship with—if there is only one PHA in your CoC's geographic area, provide information on the one:

Public Housing Agency Name	Enter the Percent of New Admissions into Public Housing and Housing Choice Voucher Program During FY 2022 who were experiencing homelessness at entry	Does the PHA have a General or Limited Homeless Preference?	Does the PHA have a Preference for current PSH program participants no longer needing intensive supportive services, e.g., Moving On?
Clay County Housing & Redevelopment Authority (HRA)	100%	Yes-HCV	Yes
Douglas County HRA	89%	Yes-HCV	No

1C-7a.	Written Policies on Homeless Admission Preferences with PHAs.	
	NOFO Section V.B.1.g.	
	Describe in the field below:	
	1. steps your CoC has taken, with the two largest PHAs within your CoC's geographic area or the two PHAs your CoC has working relationships with, to adopt a homeless admission preference—if your CoC only has one PHA within its geographic area, you may respond for the one; or	
	2. state that your CoC has not worked with the PHAs in its geographic area to adopt a homeless admission preference.	

(limit 2,500 characters)

1. Four PHAs are members of the CoC. Two (Clay County HRA and Moorhead Public Housing) have staff on the CoC Board (one as Collaborative Applicant and one as the immediate past chair). Both have established homeless admission preferences and have helped educate and encourage other PHA's in the region to establish preferences. Douglas County HRA has an MOU with a housing provider to use a PHA twin home for emergency/bridge housing and a preference for MN Bridges program (bridge housing for persons with a mental health disability in a housing crisis). Both Douglas and Clay HRA's have MOUs for filling EHV through Coordinated Entry. The CoC has encouraged both a homeless preference and move on preference via emails and phone calls to our regions other PHAs. Clay County HRA sent an email encouraging participation and offering support to other PHAs who wish to establish policies. In our February 2021 CoC membership meeting, the CoC hosted a training on homeless and move on preferences, with a presentation from Michele Smith, Minneapolis Field Office Director.

2. N/A

1C-7b.	Moving On Strategy with Affordable Housing Providers.	
	Not Scored—For Information Only	
	Select yes or no in the chart below to indicate affordable housing providers in your CoC's jurisdiction that your recipients use to move program participants to other subsidized housing:	

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

	Other (limit 150 characters)	
5.		

1C-7c.	Include Units from PHA Administered Programs in Your CoC's Coordinated Entry.	
	NOFO Section V.B.1.g.	

In the chart below, indicate if your CoC includes units from the following PHA programs in your CoC's coordinated entry process:

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

1C-7d.	Submitting CoC and PHA Joint Applications for Funding for People Experiencing Homelessness.	
	NOFO Section V.B.1.g.	

1.	Did your CoC coordinate with a PHA(s) to submit a competitive joint application(s) for funding or jointly implement a competitive project serving individuals or families experiencing homelessness (e.g., applications for mainstream vouchers, Family Unification Program (FUP), other programs)?	Yes
		Program Funding Source
2.	Enter the type of competitive project your CoC coordinated with a PHA(s) to submit a joint application for or jointly implement.	Housing Stability Vouchers, Foster Youth Initiative, MN Homework Starts with Home Vouchers

1C-7e.	Coordinating with PHA(s) to Apply for or Implement HCV Dedicated to Homelessness Including Emergency Housing Voucher (EHV).	
	NOFO Section V.B.1.g.	

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

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

PHA
Clay County Housi...
Douglas County HRA

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

Name of PHA: Clay County Housing and Redevelopment Authority.

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

Name of PHA: Douglas County HRA

1D. Coordination and Engagement Cont'd

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

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

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

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

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

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

1.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition.	5
2.	Enter the total number of new and renewal CoC Program-funded PSH, RRH, SSO non-coordinated entry, Safe Haven, and Transitional Housing projects your CoC is applying for in FY 2023 CoC Program Competition that have adopted the Housing First approach.	5
3.	This number is a calculation of the percentage of new and renewal PSH, RRH, SSO non-Coordinated Entry, Safe Haven, and Transitional Housing projects the CoC has ranked in its CoC Priority Listing in the FY 2023 CoC Program Competition that reported that they are lowering barriers to entry and prioritizing rapid placement and stabilization to permanent housing.	100%

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

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

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

(limit 2,500 characters)

The CoC is committed to assuring every project is aware, understands and is compliant with Housing First (HF) principals and evaluates this in a variety of ways.

1. Renewal project compliance was checked in five ways during the competition. First, verification that program staff completed required HF courses. Second, verification and review of agencies HF assessment. A new HF assessment tool (attached) was completed by renewal projects in June. Third, the CoC added a retention survey after we saw an increase in returns to homelessness in our second and third quarter reports. Fourth, denials for coordinated entry referrals were reviewed. Last, but not least, projects submit all agency and program policies and forms for review. The review assesses whether the following core principles of HF are included: client choice, low-barrier access, individualized support, harm reduction, and linkage to community. New projects were also evaluated on HF in the following manner. First, the CoC reviewed the submitted project application and project description in the threshold assessment notes for incorporation of HF principals (client choice, low-barrier access, individualized supports, harm reduction, and linkage to the community). Second, applicants provided a sample policy from another program they currently implement or a brief outline of a policy framework they intend to use if no similar program policies exist. Third, they certify they will use the HF approach.

2. Projects are assessed on incorporation of the following HF principles: client choice, low-barrier access, individualized support, harm reduction, and linkage to community supports. In policy review the committee looks not only for inclusion of all these supports, but any language or policies that contradict them.

3. The CoC renewal projects were reviewed in June prior to the competition. Projects completed a Housing First Assessment and retention survey. Their scores, along with their e-snaps applications and scorecards were used as part of the competition. Projects were asked to make edits to policies or provide additional forms/documents as needed. The CoC only reviews policies annually, but will respond at any time to complaints, providing follow-up guidance, technical support, training, or enter into a retention plan as needed or requested. The CoC will work with newly funded projects to help ensure they incorporate CoC policies into agency policies, procedures, and forms.

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

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

4.	how your CoC tailored its street outreach to persons experiencing homelessness who are least likely to request assistance.
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(limit 2,500 characters)

1. Currently our region has youth outreach (YO), veteran’s outreach (VO), substance abuse (SA), & disability outreach (DO) targeted at persons with a mental illness, with 2 new positions added this year, 1 dedicated to working at the schools. Staff conduct planned outreach to known locations (identified by persons with lived experience (LE), exploration, or community input), conduct sweeps, offer phone access, & respond to notifications from others (businesses, faith community, currently/formerly homeless, law enforcement, service providers). Outreach staff participate in local homeless committees, attend coordinated entry mtgs. including case consults, & conduct in-reach to shelters, jails, libraries, detox, homeless health, & on-site meal programs. Most outreach staff provide basic needs items. All conduct coordinated entry assessments & refer to homeless, community, & mainstream programs. Outreach staff are trained assessors & enter data into HMIS. If safety is a concern staff connect with mobile mental health, detox, domestic violence, safe harbor or law enforcement. When outreach staff find people that do not fit their target population, they will triage at coordinated entry meetings or make appropriate referrals for follow-up. In the bordering community of Fargo-Moorhead, outreach staff hold a monthly meeting to triage & coordinate services & address any arising issues (i.e., a PHA had unsheltered individuals sleeping in their hallways so outreach staff coordinated to provide 24-7 support & try & identify & connect with all persons hanging at the PHA via photos presented to them by the PHA security camera.)

2. Coverage is 100% of the 10-county geography including urban & rural areas.

3. In metro areas, outreach is provided at least 2-3 times weekly, with in-reach & follow-up on alternating days. In rural areas, outreach is provided in response to notifications & at targeted times, with frequency dependent on program location. During the PIT, trained volunteers, outreach is done in a single 24-hour period.

4. Staff are trained on topics like creative engagement, harm reduction, safety, client centered care, trauma informed care, & housing first to assure more positive outcomes when engaging a population who can be apprehensive. When not physically going to key locations to find households, staff communicate with other community partners & people with LE to assure they are proactively identifying & following up with persons who are homeless.

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

Select yes or no in the chart below to indicate strategies your CoC implemented to ensure homelessness is not criminalized and to reverse existing criminalization policies in your CoC's geographic area:
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	Your CoC's Strategies	Ensure Homelessness is not Criminalized	Reverse Existing Criminalization Policies
1.	Engaged/educated local policymakers	Yes	Yes
2.	Engaged/educated law enforcement	Yes	Yes
3.	Engaged/educated local business leaders	Yes	Yes

4. Implemented community wide plans	No	No
5. Other:(limit 500 characters)		

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

		HIC Longitudinal HMIS Data	2022	2023
	Enter the total number of RRH beds available to serve all populations as reported in the HIC or the number of households served per longitudinal HMIS data, e.g., APR.	Longitudinal HMIS Data	127	127

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

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

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

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

Describe in the field below how your CoC:

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

(limit 2,500 characters)

1. Standardized tools & training are used to link people to mainstream & community services. Our Housing Crisis Access Tool (HCAT) assesses for the following service categories: housing, safety, food, healthcare (dental, chemical, mental, physical), transportation, veterans, financial, legal, education, employment, advocacy, support, identification, childcare/family, & other. Individuals are asked to identify the services they have, have tried, & want. This allows clients to identify needs beyond what they initially sought services for & to identify obstacles to accessing services. Clients then prioritize their needs. Next, assessors suggest services that may be of benefit & identify specific programs that fit the client's priorities. The final step is to identify assistance is wanted or needed to connect with those services. An Access Receipt with local agency details is used during this process. Mainstream benefits training is required for all ESG, CoC, & CARES providers. An updated training was sent out in September. CoC programs reassess mainstream referral needs at enrollment with the help of online tools available via a link on the CoC website (MNHelp, Bridges-To-Benefits & The Disability HUD). Housing Stability & Housing Stabilization Services (MN Medical Assist. programs) screening is integrated into our CARES tools, with an online centralized referral link (self or agency).

2. Healthcare organizations (Public Health, one hospital, SA and MH programs) are CoC members and engage in planning at the local and regional level to help identify & support coordination & integration of services. Our largest shelter in the region has an MOU with a local hospital for onsite nursing. Since COVID, physical, mental health, and substance abuse have been more central conversations due to increased awareness, resources, partnerships, & client needs. The CoC added a ranking question on health collaboration to our CoC review of ESG & CoC projects this year. Our region has full-service coverage for enrollment assistance for health coverage (both public & private insurers) through our community action agencies.

3. CoC providers (outreach, shelter, housing, support service) are encouraged to take the SOAR Works training which is available through a link on the CoC website. The MN Department of Veterans Affairs has partnered with MN DHS & the SSA to provide Veterans with expanded access to Social Security Income & Social Security Disability Insurance benefits.

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

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

(limit 2,500 characters)

Despite HUD CV1 shelter funding ending which provided vouchers for shelter, the CoC saw an increase of six non-congregate 'voucher' and 'other' shelter beds as reported on the 2023 HIC (31 in 2023 compared to 25 in 2022). Since then, one program has added one master lease unit for emergency shelter. Two additional shelter programs are currently constructing additional non-congregate spaces. Launch Pad 4 and 5 are single unit emergency shelter operated by West Central MN Communities Action in partnership with Alexandria HRA. These new side-by-side townhome developments are slated to open in December. Churches United for the Homeless' Micah's Mission shelter will be completing a \$4.02 million dollar renovation in November, adding eight family rooms to allow families who were sleeping in a community spaces to have private rooms and adding additional designated family bathrooms. All located in the lower-level separate from other communal sleeping, social, and eating spaces and next to a new family case manager. In September, there were two regional applications for the MN Dept. of Human Services \$98 million capital Emergency Shelter RFP. Churches United is seeking funding to build a separate shelter for couples and youth which would have individual bedrooms and social spaces for couples. They requested funding to build 13 rooms for couples, 3 for youth, and 3 medical respite rooms. MAHUBE-OTWA Community Action is seeking funding to purchase and renovate an apartment for Veterans who are homeless.

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

(limit 2,500 characters)

1.The CoC Health and Safety Policy was developed based on guidance from the MN Department of Health (MDH) and information in the HUD Infectious Disease Toolkit. The policy requires agencies to develop a crisis communication plan, integrate policies for the prevention and mitigation of infectious and communicable diseases (including linkage to vaccines, sanitation, testing, PPE use, isolation, and quarantine). The MDH Highly Impacted Settings team has developed sample policies and procedures that homeless programs can use related to testing, reporting, mitigation, and access to therapeutics. MDH has provided on demand support to agencies in development and implementation of policies.

2.MDH began working more closely with CoCs and homeless service providers as part of the COVID-19 response and those partnerships have been extended to address other infectious diseases and outbreaks (e.g., HIV, syphilis, tuberculosis, hepatitis, Monkeypox, and flea and tick-borne diseases) via their permanent infectious disease unit which provides resources for homeless, correctional and higher education settings. In addition to policy development and implementation support, homeless service providers can access free supplies (COVID-19 tests, PPE, and supplies for on-sight isolation and quarantine) and request vaccine clinics. Our local public health agencies also support free on-site testing and vaccination clinics at homeless settings. MHD also provides vaccine incentives and has a Trusted Messenger Program educating and compensating people with lived experience of homelessness to help educate on infectious diseases and promote vaccines.

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

(limit 2,500 characters)

1.The MN Dept. of Health (MDH) provides an array of supplies, educational materials, sample policies, programs (Trusted Messenger program trains persons with lived experience to educate other persons on value of vaccinations), funding (grants to promote the health of people experiencing homelessness), and knowledgeable staff to support planning and to help prevent and mitigate infectious diseases. The CoC shares these resources and opportunities with homeless providers via forwarding emails, posting links and information on our CoC website, and through announcements at meetings (membership, board, and local homeless committee). The CoC also promotes a quarterly webinar series hosted by MDH on public health and homelessness (i.e., March focused on harm reduction and homelessness, June focused on syphilis and homelessness). MDH also maintains a GovDelivery listserv to share infectious disease information with homeless service providers & other congregate settings. MDH held meetings with subgroups (e.g., outreach workers, youth shelters) to offer guidance on planning for and preventing the spread of infectious diseases and addressing specific concerns of providers.

2.The CoC helps support communication between local providers and public health agencies at the state, county, and city level. Information is collected from providers on local health concerns and shared with public health providers. MDH and public health staff are also on the CoCs Homeless to Housed Task Force listserv (full membership+) and attend quarterly HTH meetings and local homeless committee meetings. When things emerge (such as MPOX, COVID-19 outbreaks), MDH works with the MN Interagency Council on Homelessness and CoCs to support and communicate with homeless providers. MDH now has a permanent team in the emerging infectious disease unit who provides guidance & resources for CoCs and homeless programs. Each fall the CoC has vaccine clinics on the agenda to support planning and allow for sharing of information and best practices. The MDH and public health vaccine clinics are promoted. One example of facilitated communication happened in the fall of 2022 our region’s largest shelter noted that there was an issue coordinating onsite vaccines. Free transportation to a nearby vaccine clinic in ND was offered (a couple miles away), but a vulnerable resident was not willing to be transported. Resolution involved conversations between the CoC, public health, MDH, the clinic, and the agency.

1D-9.	Centralized or Coordinated Entry System–Assessment Process.	
	NOFO Section V.B.1.p.	

Describe in the field below how your CoC’s coordinated entry system:	
1.	covers 100 percent of your CoC’s geographic area;
2.	uses a standardized assessment process; and
3.	is updated regularly using feedback received from participating projects and households that participated in coordinated entry.

(limit 2,500 characters)

1. CARES (our coordinated entry system) covers 100% of our CoC geography. While protocols based on geography are allowed, common policies, tools, and a single HMIS prioritization list are used. Clay Co./Moorhead, bordering North Dakota, uses an additional secure database (Podio) for emergency shelter and prevention prioritization to support client centric, coordinated services for people in a housing crisis. Fargo, ND & Moorhead (FM area) have 6 shelters and 4 prevention programs that participate, using 211 as the central access point.

2. The CARES process starts with a Housing Crisis Tool (HCT) administered by Access Navigators or outreach staff. The FM area uses 211 for the initial safety and mainstream resources screening sections, prior to forwarding to an Access Navigator. The navigator utilizes strengths-based guided resolution, making referrals and providing follow-up support to linkage to mainstream and next step homeless services as needed. The HCT strives to divert households when possible, also screening for shelter and prevention services and referring to Assessors for a Homeless Prioritization Assessment (HPT). Trained assessors administer the HPT and enter data into HMIS or the alternative database. Housing agencies use a webform to notify the Priority List Managers (PLM) of openings. Using HMIS and the alternative database, the PLM fills referral requests at Regional Prioritization/Case Consult and Veterans Registry meetings (held every 2 weeks) and between meetings via email referrals to housing agencies.

3. CARES policies require an annual review of all CARES policies and forms with input from all CARES partners (Access, Assessment, Auxiliary, and Housing) and persons with lived experience (LE). The development of the new HPT took over a year and included multiple opportunities for input. The initial workgroup was made of representatives from various programs (outreach, shelter, housing, support services, advocacy, VSP) and sub-populations (DV, youth, LGBTQ+, veterans, chronic, singles, families, veterans) to assure broad feedback. LE workgroups were engaged early on and prior to final approval. All suggested changes from the LE groups were incorporated into the new tool. The CoC is currently in the process of getting input from LE committees on updates that arose from our 1-year survey of the tool.

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

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

(limit 2,500 characters)

1. People can present at or call a Community Action Program (CAP) to complete a Housing Crisis (HCT) or Housing Prioritization Tool (HPT). In Clay County, initial access is via 211 (either themselves or assisted if they are at an agency). One call to any of the 6 FM shelters can lead to being placed on the central priority list if a triage identifies shelter is needed. All auxiliary partners are trained on how to make rapid and appropriate referrals. Some who served underrepresented or specific sub-populations (veterans, youth, victims, disabled, LGBTQ+) are trained Assessors. Translation services are available as needed. In July, 10 MN Housing Stabilization Services (HSS is a MN Medical Assistance) began using Podio for central access, linking ineligible persons to CARES.

2. CARES prioritization (shelter, prevention, & housing) is designed to first serve those who are least likely to resolve their housing crisis on their own due to personal or societal barriers. Questions strive to identify both key barriers and strengths and were vetted by persons with LE, our HMIS lead, funders, and direct service staff representing various subpopulations and programs. Within the range for the housing types (TH, RRH, OPH, PSH), the highest score on the HPT is selected in this order: Category 1 (unsheltered followed by other Category 1), Category 4 (fleeing with no safe place is prioritized first), Category 3 (youth programs), Category 2, and then Other (persons unsafely or unstably doubled up but not meeting Category 4-note this is for youth and state funded programs only). For PH, chronic homeless households are prioritized first. Additional prioritization criteria are used when scores are tied.

3. The HPT incorporates client choice and housing selection questions. Staff are trained on the importance of these questions. Stabilization staff support those with the highest barriers in seeking and securing housing and up to 1-year after entering housing. CARES policies set timelines for Assessments (7-10 days to allow for self-resolution but can be done sooner at the discretion of the Assessor if a person is literally unsheltered and no safe, viable options), PLMs (2 days to make referrals), housing providers (5 days to make offer).

4. Progressive engagement and targeted data collection are used so questions are not repeated or unnecessarily asked (need to know only). Questions were vetted for 4th grade level and staff are trained on motivational interviewing.

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

Describe in the field below how your CoC through its centralized or coordinated entry:

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

(limit 2,500 characters)

1.The CoC policies, affirmative marketing strategy, & training are designed to prevent discrimination in our system. Coordinated Entry forms intentionally do not ask sex or familial status. CoC policies prevent discrimination based on race, religion, disability, national origin, sex, marital status, familial status, age, sexual orientation, and gender identity. As part of the annual review of CoC & ESG programs the CoC asks to look at agency policies & marketing to assure programs are not only anti-discriminatory, but inviting to all populations (translation services, program materials, signage, accessibility, etc.). A few years ago, the CoC worked with the True Colors United to conduct training & assessments to assure programs are safe & welcoming for persons who identify as LGBTQ+. Their message of ‘Creating a space where everyone feels welcome can be difficult, especially since everyone has different needs.’ applied to all populations. The CoC & local homeless committees work to outreach & engage community organizations serving underserved or marginalized populations encouraging them to be at the planning table to support a system that serves all.

2.The CoC requires all new program staff to take our Safe, Fair, & Equal Access Course. Classes include Fair Housing & Discrimination, HUD’s Equal Access & Gender Identify Rules Webinar, Top 10 Fair Housing Mistakes for Landlords, MN Safe Harbor, Disability Awareness & Sensitivity Training, & VAWA. Each year all ESG & CoC program staff must also do a refresher VAWA & HUD’s Equal Access class. As part of the annual ESG & CoC evaluation, agencies are assessed on integration of safe, fair & equal access policies, including informing participants of their rights & remedies, including their rights to appeal program termination. The CoC acts as the last resort after internal appeals processes have been completed.

3.The CoC has two lawyers on our board who serve as a reference when fair housing or equal access is in question. Legal Services of Northwest MN provides free guidance & has challenged agencies when the CoC, a client, or other homeless provider has concerns about legalities related to policies or actions. The CoCs first goal is to support those in a housing crisis & the second goal is to provide support to agencies to help them become compliant. The CoC has also sought help & guidance from the MN Department of Human Services on rights & services related to persons with disabilities.

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

1.	Has your CoC conducted a racial disparities assessment in the last 3 years?	Yes
2.	Enter the date your CoC conducted its latest assessment for racial disparities.	05/04/2023

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

Describe in the field below:

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

(limit 2,500 characters)

1. The CoC conducted equity analyses in 2019, 2020, & 2021. Only partial analysis was done in '22 (Returns) & May of '23 (SPM). In '19-21, the CoC used census data, the HUD Racial Equity tool, MN Housing County Profiles, & HMIS reports (Monitoring, Core & Equity). In '22, HMIS Returns & APRs were used. In '23, HMIS SPM, returns, & Core reports were used. The CoC also looks at HMIS CE reports on a monthly basis looking at race, ethnicity, disability, chronic homeless, & domestic violence status.

2. Each analysis found that disparities exist for persons of color within the West Central region. 2021 data showed that the greatest disparity occurs in who becomes homeless. Persons of color only represent about 5% of the population but 52% of those experiencing homelessness. Whites were over-represented on the priority list at 58% & in permanent housing at 59% compared to the 48% who experienced homelessness & 49% in shelter. Whites at 39% & Native Americans (NA) at 36% had the highest returns to homelessness. According to the '21 MN Housing Partnership WC Regional Profile, cost burden is higher for BIPOC renters at 52% than White renters at 44% in greater MN. The MN COVID rent assistance program reflected this as 67% of applicants for funds were persons of color. In the '22 Returns analysis, the data set includes 1,849 exits from the homelessness & 340 returns, with 82% of people who enter not returning to homelessness (33% returned who exited non-permanent destinations while 6% returned who exited to permanent destinations). 69% of all returns came from adult only households. The largest rate of return by race was NAs at 22%, followed by Blacks at 20%, Multiple Races at 19% & Whites at 17%. NAs were the only racial group that had a higher rate of non-permanent exits at 19% compared to permanent exits at 14%, & the highest rate of return for PH at 16%. Homeless prevention had the smallest rate of return to the system & was also the least racially diverse. In the '23, Multiple Races returned at 14%, but were represented at only 8.82%, while Blacks returned at 20% vs. 12.48% representation. NAs rate of return was 16% vs. a 16.47% representation, & Whites had 50% returns vs. 64.89% representation. For exits, NA's had a notably lower rate of exits to PH at 10% vs. 16.47% representation, while Blacks had a similar rate at 13% vs. 12.48% in system, & whites & multi races higher, with Whites at 69% vs. 64.89% & Multiple Races at 8% vs. 5.82%.

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

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

1.	The CoC's board and decisionmaking bodies are representative of the population served in the CoC.	No
2.	The CoC has identified steps it will take to help the CoC board and decisionmaking bodies better reflect the population served in the CoC.	Yes
3.	The CoC is expanding outreach in geographic areas with higher concentrations of underrepresented groups.	Yes
4.	The CoC has communication, such as flyers, websites, or other materials, inclusive of underrepresented groups.	Yes

5.	The CoC is training staff working in the homeless services sector to better understand racism and the intersection of racism and homelessness.	Yes
6.	The CoC is establishing professional development opportunities to identify and invest in emerging leaders of different races and ethnicities in the homelessness sector.	Yes
7.	The CoC has staff, committees, or other resources charged with analyzing and addressing racial disparities related to homelessness.	Yes
8.	The CoC is educating organizations, stakeholders, boards of directors for local and national nonprofit organizations working on homelessness on the topic of creating greater racial and ethnic diversity.	No
9.	The CoC reviewed coordinated entry processes to understand their impact on people of different races and ethnicities experiencing homelessness.	Yes
10.	The CoC is collecting data to better understand the pattern of program use for people of different races and ethnicities in its homeless services system.	Yes
11.	The CoC is conducting additional research to understand the scope and needs of different races or ethnicities experiencing homelessness.	Yes
Other:(limit 500 characters)		
12.	The CoC has engaged TA to work with our Advancing Equity Together committees.	Yes

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

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

(limit 2,500 characters)

First, the CoC will be doing further data analysis with the help of a grad student. Data points to be analyzed were identified by the CoC Performance Evaluation Committee and CoC Advancing Equity Together (AET) Committees. The AET is a multi-level structure with the goal of advancing (to move forward in a dedicated and purposeful way) equity (to assure our system is fair and impartial) together (as part of CoC planning, but in collaboration with regional partners). Center to AET planning is lived experience (LE). Input sought from focus groups and surveys conducted from January-July of 2022 identified system gaps, needs, and desired solutions. All participants were BIPOC with LE. Participants reviewed existing data, as did the leadership team who compiled the LE input into 9 key system gaps and 6 strategies. The leadership team consisted of two LE representatives, the CoC Coordinator, the AET chair and Board chair. The strategies identified are: 1. Project enhanced equity related education, 2. Increase transparency throughout system, 3. Add more staff/leadership roles for persons w/ LE, 4. Enhance system access to better help people resolve their housing crisis through natural and community resources, not just homeless resources, 5. Implement enhanced and formalized supports to help people stabilize in housing and transition off services successfully, 6. Create access to affordable housing. These 6 strategies were brought to the CoC board for adoption. The BIPOC AET chair moved last fall so the AET work was on hold until a new chair was secured in January. After onboarding, the new AET and CoC Coordinator updated data and the 6 strategies to sub-regional LE committees. Currently there are three AET regional committees, comprised of persons with LE who are primarily BIPOC. The AET are working on prioritizing and identifying SMART Goals to for the strategies. Simultaneously, the AET Chair and CoC Coordinator worked with TA to form and hosted two AET Advisory Panel meetings. The Advisory Panel is designed to advance AET work through engagement with other partners and systems not currently engaged in homeless planning. Regional leaders were selected for their expertise and ability to influence and impact change (legislator, consultant, Human Relations, CEO of Diversity program). Each identified how they could support our AET work (policy, education, advocacy, awareness). While the work is slower than expected, we have prioritized authentic LE engagement.

1D-10d.	Tracked Progress on Preventing or Eliminating Disparities.	
	NOFO Section V.B.1.q.	
	Describe in the field below:	
1.	the measures your CoC has in place to track progress on preventing or eliminating disparities in the provision or outcomes of homeless assistance; and	
2.	the tools your CoC uses.	

(limit 2,500 characters)

1.The CoC continues to look at coordinated entry data and will have our second quarter analysis in October. Thanks to a new HMIS System Performance Report, the CoC began this month to look at SPM data on a quarterly basis, but analysis of that data is limited due to staff resources. Thankfully, with the help of a graduate student, starting this fall the CoC will be able to conduct analysis on the data points the CoC Performance Evaluation and Advancing Equity Together (AET) committees identified (returns beyond 2 years, negative exits by projects, detailed look at negative exits (to identify common characteristics, discrimination, or ineffective services (level or model), data on impact level of support services/staffing patterns, further analysis of priority list compared to entries, and analysis of negative exits by entry details). Additionally, the CoC will proceed with the development of SMART goals from our AET strategies. These will be developed and tracked by the AET lived experience (LE) committees and reviewed by the Board.

2.The CoC will primarily utilize HMIS data (program APRs, Core report, coordinated entry reports, Returns reports, System Performance reports) for all data analysis, but will also utilize LE surveys as we begin implementing our system strategies. The implementation of system strategies should result in more equitable outcomes, reduced homelessness, and a feeling that the system is more equitable to those we serve. As one AET member stated, “if we are making the system better for persons of color, the system will be better for everyone, and it should show”.

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

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

(limit 2,500 characters)

The CoC structure is designed to engage people with lived experience (LE) in a broad and authentic ways. Out of 11 voting seats on the CoC board, 2 are designated for persons with LE, 1 adult and 1 youth. Seats are filled through open solicitation prior to or at the annual meeting. Currently, one of two appointed seats is also filled by a person with recent LE and another seat is filled by a member with LE that is not recent. The CoC has two lived experience members on the Performance and Ranking Committee, one of whom is current chair. Members with LE are compensated \$30/hour for their time at board meetings or committee meetings or in the case of the Performance Evaluation and Ranking Committees, reviewing project materials prior to the meeting. The CoC structure also includes local homeless committees (LHC). There are three LHCs are part of the CoC structure each with an appointed representative to the board. One LHC has a person with LE as chair, another as chair-elect. The LHCs are each tasked with hosting LE Advisory Boards (LEAB) and encouraged to also host a Youth Advisory Board (YAB), although currently there is only one YAB operating in our region. The LEAB and YAB meetings occur every other month to quarterly. LE participants are compensated for their time. The CoC brings all policies and forms to the LEABs and YAB for review and edits prior to taking to the HTH for approval. To date, all input from the LEABs has been integrated into policy and tool edits. The CoC also gathers input from persons with LE through surveys and focus groups. Our bi-annual system-wide needs and satisfaction survey had 112 responses from people with LE. Regional homeless committees and programs utilize input from these surveys for funding strategies and program design changes. Surveys and focus groups were also used in the development of our annual CoC plan, plan to end youth homelessness, unsheltered plan and rural homeless plan, and Advancing Equity Together (AET) strategies. In 2021, the CoC added an AET structure that now has three AET LE advisory committees that meet quarterly and are compensated for their time. These committees are responsible for developing SMART goals for our six identified strategies. Our May membership meeting was on engaging persons with LE. We had a panel discussion (4 LE and 2 agencies rocking LE engagement), discussed benefits of engagement, and identified goals to increase engagement at the CoC and project level.

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

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

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

	Level of Active Participation	Number of People with Lived Experience Within the Last 7 Years or Current Program Participant	Number of People with Lived Experience Coming from Unsheltered Situations
1.	Included in the decisionmaking processes related to addressing homelessness.	112	112
2.	Participate on CoC committees, subcommittees, or workgroups.	21	21
3.	Included in the development or revision of your CoC's local competition rating factors.	3	3
4.	Included in the development or revision of your CoC's coordinated entry process.	21	21

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

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

(limit 2,500 characters)

For the past three years our CoC has focused on increasing authentic engagement at all levels for persons with LE (LE), including increasing leadership and staffing roles for persons who have had experience like those who they serve.

At the CoC level, the CoC hosted a panel and small group discussion on how to increase leadership and staffing positions filled by persons with LE. The CoC training site provides core system and best practices courses (coordinated entry, Trauma Informed Care, Homeless Definitions, Mainstream Services, Housing First, etc.) which are open to all members and persons with LE who participate on our CoC committees and board. 23% of the staff and 25% of the board of the CoC Collaborative Applicant are persons with LE. One leadership session at our upcoming regional homeless conference is on successfully hiring, training, supporting, and retaining persons with LE.

At the agency level, our largest shelter has three LE participants in a shelter to work pilot program providing on the job training and testing to see that benefits are not affected. Two agencies have worked with the SNAP Employment and Training program to fill staff roles. The Fargo-Moorhead Coalition just had a person with LE complete an AmeriCorps Vista role and now the person is moving on to an internship at another agency. Four other agencies have people with LE serving on their boards. One agency has a Youthbuild program. Two agencies have workforce programs that provide professional training opportunities (welding, CNA).

LE members have also been able to attend our local and state coalition conferences at no charge. Both provide a variety of opportunities for networking, professional development, education, advocacy, and awareness. CoC annual and AET goals call for additional LE training, including development of a LE Academy that would provide individuals with the skills and training to take on paid positions at agencies. The ideal is that the quality of training, paired with the knowledge that persons with LE have valuable experience equivalent to a formal education, would lead to additional agencies hiring persons LE to fill various staff roles in their homeless programs. At most, agencies would waive degree requirements for graduates of the LE academy and at least fill positions that can be mentored.

1D-11c.	Routinely Gathering Feedback and Addressing Challenges of Individuals with Lived Experience of Homelessness.	
	NOFO Section V.B.1.r.	

Describe in the field below:

1.	how your CoC routinely gathers feedback from people experiencing homelessness;	
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2.	how your CoC routinely gathers feedback from people who have received assistance through the CoC or ESG Programs; and
3.	the steps your CoC has taken to address challenges raised by people with lived experience of homelessness.

(limit 2,500 characters)

1. The CoC gathers input from people with lived experience (LE) in a variety of manners. First, our CoC structure provides opportunities for consistent and ongoing feedback by having two designated lived experience seats on our board. Board meetings are held monthly and members have equal votes and provide valuable insight and perspective. Second, the CoC has three designated LE advisory boards (LEABs and YAB) and three Advancing Equity LE Advisory Committees in our region. Third, two LE members also serve on our Ranking and Performance Evaluation Committees. Finally, the CoC gathers input from persons with LE in CoC board, Homeless to Housed Task Force and committee meetings, and through surveys and focus groups. The CoC brings all policies and forms to the LEABs and YAB for review and edits prior to taking to the HTH for approval.

2. In addition to the methods above, the CoC conducts a bi-annual system-wide needs and satisfaction survey, resulting in 112 responses from people with LE, 57 who received assistance from the programs in the past year and 65 who were currently requesting services.

3. To date, all input from the LEABs has been integrated into policy and tool edits. One example is in the development of our new prioritization tool in 2022. When the draft tool was presented at the three LEABs, substantial wording changes, adding of one question, and added scripting were implemented as a result of input. The CoC and local homeless committees who host/co-host these meetings use these meetings to seek feedback on program and CoC policies, forms, and system design. Input has also led to funding decisions, particularly input received from LE members on our Ranking and Performance Evaluation committees. Regional homeless committees and programs utilized input from the bi-annual system survey for funding strategies and program design changes. Surveys and focus groups were also used in the development of our annual CoC plan, plan to end youth homelessness, unsheltered plan and rural homeless plan, and Advancing Equity Together (AET) strategies. In 2021, the CoC added an Advancing Equity Together committee responsible for developing SMART goals for our six identified strategies.

1D-12.	Increasing Affordable Housing Supply.	
	NOFO Section V.B.1.t.	

Describe in the field below at least 2 steps your CoC has taken in the past 12 months to engage city, county, or state governments that represent your CoC's geographic area regarding the following:

1.	reforming zoning and land use policies to permit more housing development; and
2.	reducing regulatory barriers to housing development.

(limit 2,500 characters)

The CoC Coordinator met quarterly with City of Moorhead CBDG staff and served on a regional Housing Needs Study Review Committee conducted by a national public policy firm to create an actionable housing strategy that guides community housing development. The committee was comprised of government staff (city and county planners, state housing finance) and community representatives (economic development, chamber of commerce, Home Builders' Association, CoC, realtors association, developers association). Planning has involved community surveys, focus groups, and one-to-one interviews. Rezoning and adjusted land use policies to support the development of new affordable and multi-family units was a high priority in the plan. The plan identified constrained housing supply leads to increased land costs, which in turn increases the cost to build housing and limits affordability. The local government policies were found to limit developable land (e.g. polices that limit the number of units that can be built, minimum lot sizes, extensive development review processes). The plan was presented in a special joint powers meeting on June 29th. It goes to the Metro Council of Governments Policy Board on September 21st.

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

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

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

1E-1.	Web Posting of Your CoC’s Local Competition Deadline–Advance Public Notice. NOFO Section V.B.2.a. and 2.g. You must upload the Web Posting of Local Competition Deadline attachment to the 4B. Attachments Screen.	
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1.	Enter your CoC’s local competition submission deadline date for New Project applicants to submit their project applications to your CoC—meaning the date your CoC published the deadline.	08/25/2023
2.	Enter the date your CoC published the deadline for Renewal Project applicants to submit their project applications to your CoC’s local competition—meaning the date your CoC published the deadline.	08/25/2023

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

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

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

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

1.	What were the maximum number of points available for the renewal project form(s)?	105
2.	How many renewal projects did your CoC submit?	7
3.	What renewal project type did most applicants use?	SSO

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

Describe in the field below:

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

(limit 2,500 characters)

1.The Performance Evaluation (PE) Cmte. reviewed all CoC funded projects, including permanent housing (PH) projects from 5/23-6/23 using a 105-pt. scale scorecard w/5-categories (CoC & HUD Policies & Priorities, Project Performance, Equability, Design, and Administrative Capacity). Scores were determined by objective criteria and required supporting documentation (e.g., project APR, audit, Housing First (HF) Assessment, and policies). To identify how PH projects successfully housed participants, we specifically looked at APR performance (retention of PH, exit status, and returns to homelessness), a supplemental retention survey (assessing efforts made to prevent negative exits), and coordinated entry data (outcomes of referrals-assessing any negative outcomes).

2.CoC policies establish timeline requirements for all CARES steps (e.g., staff have a set number of days to enter data, make offers, complete referral, etc.). The CoC reviewed agencies’ policies and protocols related to assuring low barrier access and to compliance on timeline (i.e., eligibility criteria, entry processes, data entry policies, support provided for housing search, etc.). The CoC also looked at project performance in rapidly connecting to housing (using CARES data to see if housing occurred in less than 30 days) and successful referrals (to understand if support was provided to assure utilization of vouchers offered).

3.The CoC had two questions on the Scorecard with score criteria for considering severity of need. The first is Subsection 1.9 Targets highest need, awarding maximum points to PH projects who served 100% dedicated or dedicated plus households). The second was Subsection 2.11 Acuity Adjustment had a max of 3 pts. for serving 75%+ with chronic homeless status and households with multiple conditions at move-in as reported on the ARP. Severity of need is also considered in scoring of sub-section 2.7-2.9 income questions, totaling 12 pts, provide lower performance thresholds for permanent supportive housing (40%) projects than RRH (80%) projects.

4.The scoring rubric, retention survey, and HF assessment were collectively used when trying to identify if lower performance standards were a result of program design, approach, or due to severity of clients served, recognizing that good policies and service do not always result in positive outcomes for those with extremely high barriers despite the best efforts. The CoC asked projects to explain any underperformance.

1E-3.	Advancing Racial Equity through Participation of Over-Represented Populations in the Local Competition Review and Ranking Process.	
	NOFO Section V.B.2.e.	
	Describe in the field below:	
1.	how your CoC used the input from persons of different races and ethnicities, particularly those over-represented in the local homelessness population, to determine the rating factors used to review project applications;	
2.	how your CoC included persons of different races and ethnicities, particularly those over-represented in the local homelessness population in the review, selection, and ranking process; and	
3.	how your CoC rated and ranked projects based on the degree to which their project has identified any barriers to participation (e.g., lack of outreach) faced by persons of different races and ethnicities, particularly those over-represented in the local homelessness population, and has taken or will take steps to eliminate the identified barriers.	

(limit 2,500 characters)

1. Indigenous and Blacks represent only 2% of the regional population (American Community Survey or ACS), but 26% (Indigenous) and 19% (Blacks) of those in our homeless response system (HMIS). Multi-Races represent 3% of the population and 11% of our system.

The Performance Evaluation (PE) Committee reviewed the current CoC Rating, Ranking and Reallocation Policies and Scorecard Rating tool in April and made recommendations for updates. There is one person who is Black and one Indigenous member on the committee. Draft updates were emailed to the CoC listserv prior to the May quarterly Homeless to Housed (HTH) membership meeting for review by the membership. Policies were discussed and voted on with no edits. The HTH listserv includes the entire CoC membership plus other regional partners and persons with lived experience, so also includes overrepresented populations. At our May meeting we had 2 people who were Black, 2 indigenous, and 2 multiracial. Unfortunately, we did not bring the tool and policies to our 3 Advancing Equity Together (AET) lived experience advisory committees ahead of the vote, but have now integrated this into next year's process this.

2. The CoC invited volunteers to join the Ranking Committee at our May HTH meeting and in a follow-up email. The PE Committee had 8 members and the Ranking Committee had 6 members. Both PE members listed above participated in the process, although one only participated in the review and scoring of new projects due to a conflict of interest. Two people with lived experience also participated on the PE and Ranking Committee. 33% of our Ranking Committee represent over-represented populations.

3. Section 4: Equitability, of the Scorecard for new and renewal projects was 9.5% of the entire eligible points and had five criteria 3.1-3.5. Projects were scored on the awareness, outreach, policies, training, leadership, and planning related to improving equity. Applicants needed to report on diversity, anti-discrimination and equal access trainings staff attended, share their anti-discrimination policy, identify the % of BIPOC or LGBTQ+ staff who are staff or leaders in their agency, share their equity plan, and provide materials or a description of materials used to support equal access (translation, outreach to people of color and indigenous, LGBTQ+, signage, accessibility).

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

(limit 2,500 characters)

1.From 2006-2015 our CoC reallocated over 75% of our CoC funding to support compliance, improve project outcomes, and meet regional needs. CoC policies state that reallocation can be used to create new, evidence- informed projects by eliminating projects that are underperforming, underutilized, unneeded, or are more appropriately funded from other sources. The CoC Board, Performance Evaluation Committee, Ranking Committee, and CoC Staff may identify projects to be considered for reallocation if the project fits one of the above criteria. Underperforming projects are asked to create a project improvement plan. If a project is uninterested or is unresponsive to an improvement plan, it is targeted for reallocation. The CoC will notify the project in person and in writing and offer to help form a transition plan. The transition plan helps assure compliance with other funding commitments and reduces the likelihood that anyone will become homeless as a result of reallocation. Projects may also choose to offer all or a portion of their renewal funding for reallocation during the CoC Competition on the Intent to Apply form.

2.One underperforming project was identified in this competition, but the Ranking Committee determined that the project was needed, and that the agency had already taken steps to improve performance in the future, including dismissing a staff and establishing agency and program policies and practices to prevent issues that led to underperformance in the past. Steps taken include setting up organizational checks and balances for reporting and drawdowns so it is not the responsibility of one staff, and establishing back-up plans for extended staff absences (access to passwords for web portals, online meetings, and emails).

3.No projects warranted reallocation.

4.All project applicants were determined to be needed, perform at a quality level, and capable of improving performance outcomes in areas of underperformance. The two projects below performance thresholds were either able to identify a quality improvement plan or show that outcomes were unrelated to project design or performance. The CoC worked individually with projects to identify performance improvement steps related to the deficient goals (i.e., editing policies, forms or process). While the CoC will reallocate funds if necessary, the CoC values first attempting to strengthen existing projects through training and technical assistance.

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

	Did your CoC cumulatively reallocate at least 20 percent of its ARD between FY 2018 and FY 2023?	No
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1E-5.	Projects Rejected/Reduced–Notification Outside of e-snaps.	
	NOFO Section V.B.2.g.	
	You must upload the Notification of Projects Rejected-Reduced attachment to the 4B. Attachments Screen.	

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

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

	Enter the date your CoC notified project applicants that their project applications were accepted and ranked on the New and Renewal Priority Listings in writing, outside of e-snaps. If you notified applicants on various dates, enter the latest date of any notification. For example, if you notified applicants on 06/26/2023, 06/27/2023, and 06/28/2023, then you must enter 06/28/2023.	09/08/2023
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1E-5b.	Local Competition Selection Results for All Projects.	
	NOFO Section V.B.2.g.	
	You must upload the Local Competition Selection Results attachment to the 4B. Attachments Screen.	

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

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

You must upload the Notification of CoC-Approved Consolidated Application attachment to the 4B. Attachments Screen.

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

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

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

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

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

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

	Enter the date your CoC submitted its 2023 HIC data into HDX.	04/28/2023
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2A-4.	Comparable Database for DV Providers—CoC and HMIS Lead Supporting Data Collection and Data Submission by Victim Service Providers.	
	NOFO Section V.B.3.b.	

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

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

(limit 2,500 characters)

1. This last year, the Institute for Community Alliances (ICA), Minnesota's HMIS Lead, began providing helpdesk support to Victim Service Providers (VSP)s. Support includes working with VSPs to understand data standard requirements and identify how best to collect them in their respective data bases, as well as trying to troubleshoot issues with reporting that data to HUD. The CoC has also been working with Violence Free MN (VFMN is the state VSP provider network) to provide education and increase awareness among VSPs of the CoC, including compliance with universal data elements reported in comparable databases. VFMN is developing a series of webinars that CoCs have provided information and edits for. Additionally, the CoCs co-hosted a webinar with the MN Field Office on CoC funding, including a high-level overview of the comparable database requirement.
2. Our CoC does not have a CoC funded project that is required to utilize a comparable database. There is one project requesting funding in this grant round that is aware of the requirement and can provide some, but not all, data required at this time, but is working towards compliance.
3. Yes, our CoC's HMIS is compliant with FY2022 HMIS Data Standards.

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

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

Project Type	Total Year-Round Beds in 2023 HIC	Total Year-Round Beds in HIC Operated by Victim Service Providers	Total Year-Round Beds in HMIS	HMIS Year-Round Bed Coverage Rate
1. Emergency Shelter (ES) beds	106	18	80	90.91%
2. Safe Haven (SH) beds	0	0	0	
3. Transitional Housing (TH) beds	73	0	73	100.00%
4. Rapid Re-Housing (RRH) beds	78	0	78	100.00%
5. Permanent Supportive Housing (PSH) beds	566	0	508	89.75%
6. Other Permanent Housing (OPH) beds	137	0	85	62.04%

2A-5a.	Partial Credit for Bed Coverage Rates at or Below 84.99 for Any Project Type in Question 2A-5.	
	NOFO Section V.B.3.c.	

For each project type with a bed coverage rate that is at or below 84.99 percent in question 2A-5, describe:

1. steps your CoC will take over the next 12 months to increase the bed coverage rate to at least 85 percent for that project type; and
2. how your CoC will implement the steps described to increase bed coverage to at least 85 percent.

(limit 2,500 characters)

1. The CoC had a bed coverage rate of 62% for Other Permanent Housing. The CoC is working to increase this to over 85% by working with the Clay County HRA and the Fargo Veterans Administration to add VASH and Emergency Housing Vouchers in HMIS.

2. The CoC and ICA, our HMIS Lead Agency, have met with the Fargo VA to answer questions and address concerns related to the challenge that VASH vouchers are administered by the Fargo VA, but utilized in MN so assuring that data is not duplicated is essential. The VA is in the ND HMIS and is now willing to enter in MN HMIS. We anticipate this to occur after October 1, 2023, the new federal funding year. The CoC has met with the Clay County HRA and they currently are not interested in entering Emergency Housing Voucher (EHV) data into HMIS as it is not a requirement. Our next step will be to set up a meeting with ICA, our HMIS Lead, and the Clay County HRA, a recipient of VASH and EHV vouchers.

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

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

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

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

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

	Enter the date your CoC conducted its 2023 PIT count.	01/25/2023
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2B-2.	PIT Count Data–HDX Submission Date.	
	NOFO Section V.B.4.a	

	Enter the date your CoC submitted its 2023 PIT count data in HDX.	04/28/2023
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2B-3.	PIT Count–Effectively Counting Youth in Your CoC’s Most Recent Unsheltered PIT Count.	
	NOFO Section V.B.4.b.	

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

(limit 2,500 characters)

- 1.The CoC utilized Count Leads to support an organized and complete count across the 10-county CoC region. The CoC provided a Count Packet and hosted planning meetings with Leads starting in November and ending in February. Monthly meetings were held in November and February, bi-monthly in December, and weekly in January. Two meetings and a section of the Count Packet were specifically focused on engaging youth and youth serving organizations. One meeting was specific to engaging people with lived experience. The Packet included an overview of the PIT and HIC, a list of identified partners to engage, sample letters to send to partners (i.e., schools, shelters, and interview sites), a calendar, definitions, training information, the interview tools, and promotional materials (i.e., signs, postcards, and business cards). Leads engaged local experts that serve youth (i.e., school staff/liaisons, youth outreach staff, and homeless providers that serve youth), as well as other homeless and community partners (shelters, victim services programs, veterans, support service providers, faith partners, law enforcement, counties, detox, and hospitals). In the Fargo-Moorhead area, a separate unsheltered PIT committee was formed to organize outreach efforts (staffing, maps, times, teams, training, giveaways) and interview sites (recruitment, activities, staffing, giveaways). Two homeless youth providers hosted events on the night of the count with giveaways and food.
- 2.Youth who were homeless and with lived experience of homelessness helped identify outreach and site-based counts (e.g., where youth may be staying, best times for the count, ideas for events) and spread awareness (e.g., handing out PIT flyers to friends or classmates).
- 3.One youth program has staff with lived experience of homelessness that were engaged in planning and conducting the count. No youth who were currently homeless conducted the count.

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

(limit 2,500 characters)

- 1.The only change was updating tools and reports to reflect the HUD 2022 Data Standards Changes.
- 2.Aside from data standards, data collected for the sheltered count was uniform with last year’s so had no affect. While not a methodology change, our yearlong statewide effort to improve data quality (via a Quarterly Data Quality monitoring (QDQ) process), now in its third year resulted in cleaner and more accurate data for the PIT, lessening data corrections and clean-up post PIT.
- 3.Changes to our PIT results were not a result of changes in methodology.
- 4.N/A

2C. System Performance

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

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

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

(limit 2,500 characters)

1.The CoC access/diversion tool is used to divert when possible and triage for prevention assistance. Initial factors for the tool came were modeled after the evidence-based MN prevention tool. Factors were supported by a survey of the pilot which found only 2.7% of those denied assistance became homeless. Minor updates were made based on recent data of those returning and reviewed by persons with lived experience.

2.The CoC strategies to reduce the number of 1st time homeless by 10% are:

- Expand Podio Access workspace to entire region and implement the Rural HMIS grant (to upload Podio data to HMIS) by 3/1/24 to support progressive data collection, benefiting clients and staff, and to improved analysis of outcomes and equity.
- Support at least a 25% increase in prevention funding in pending MN Housing round 2 RFP.
- Support increase in use of RentHelpMN Housing Stability Services (ERA2) to provide rent, utilities to persons with disabilities via streamlined referrals.
- Add 5 new Access Navigators to increase use of diversion using strengths-based guided resolution, prioritization of shelter and prevention, and referrals and follow-up to support mainstream linkage. (3 AMPACT staff starting 6/24 + 2 funded by MN Local Homeless Prevention Aid by 12/23). Support quality tracking of homeless students to maximize aid available in '25 for more staff.
- Enhance Access Navigator training, support, and standardized job descriptions to increase more rapid and successful resolution of housing crisis. The new Access Specialist will have an approved standardized job description and new CARES (coordinated entry) Access Course online by 1/1/24, to coincide with the move to our new online training site. Access Specialist will host monthly meetings with navigators to provide support, track outcome data, address issues, and reinforce utilization of policies and best practices.
- Officially launch Centralized Housing Stabilizations Services (HSS) to increase ease and use of the Medicaid funded program and link ineligible households to CARES to prevent worsening of their situation. Verify users, create promotional materials, update webpage, and host CoC training on HSS referral process by 12/23.
- Add two new supportive employment & training programs by 12/24. (DEED grant for training/employment for people exiting jail & prison.
- Recruit a developer to apply for MN tax credit new build in Becker or Clay in '24 round.

3.CARES Access Navigator

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

Was your CoC's Number of First Time Homeless [metric 5.2] affected by the number of persons seeking short-term shelter or housing assistance displaced due to:
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1.	natural disasters?	No
2.	having recently arrived in your CoCs' geographic area?	No

2C-2.	Length of Time Homeless—CoC's Strategy to Reduce.	
	NOFO Section V.B.5.c.	
	In the field below:	
1.	describe your CoC's strategy to reduce the length of time individuals and persons in families remain homeless;	
2.	describe how your CoC identifies and houses individuals and persons in families with the longest lengths of time homeless; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC's strategy to reduce the length of time individuals and families remain homeless.	

(limit 2,500 characters)

1.The CoC strategy to reduce length of time homeless (LOT) by 2% is to:

- Redefine coordinated entry (CARES) staffing roles to support more rapid and accurate referrals, expand byname and case consult mtgs, and support improved compliance and data. Update Specialist job description and integrate new DV and Access positions by 11/23.
- Add one youth + one equity outreach staff by 12/24. Formalize monthly outreach meetings to support improved coverage, reducing lost/delayed referrals, and better reaching those least likely to seek and follow-up with services.
- Increase assistance with housing search & acquisition. CoC training will go live by 12/1. Integration role into all shelter CM and outreach roles.
- Add 5 new Access Navigators to increase use of diversion using strengths-based guided resolution, prioritization of shelter and prevention, and referrals and follow-up to support mainstream linkage. (3 AMPACT staff starting 6/24 + 2 funded by MN Local Homeless Prevention Aid by 12/23). Support quality tracking of homeless students to maximize aid available in '25 for more staff.
- Enhance Access Navigator training, support, and standardized job descriptions to increase more rapid and successful resolution of housing crisis. The new Access Specialist will have an approved standardized job description and new CARES Access course online by 1/24, to coincide with the move to our new online training site. Access Specialist will host monthly meetings with navigators to provide support, track outcome data, address issues, and reinforce utilization of policies and best practices.
- Support increase in RentHelpMN Housing Stability Services (ERA2) to provide rent, utilities to persons with disabilities via streamlined referrals.
- Officially launch Centralized Housing Stabilizations Services (HSS) to increase ease and use of the Medicaid funded program and link ineligible households to CARES to prevent worsening of their situation. Verify users, create promotional materials, update webpage, and host CoC training on HSS referral process by 12/23.

2.The CoC utilizes Podio and HMIS to identify and track LOT. The HMIS Core report tracks LOT in ES and TH programs related to exit destination and household type allowing for identification of trends or issues related to a specific program or household type. The NOFO tool has a tab showing LOT by project. System Performance LOT will be reviewed quarterly starting in '24.

3.CARES Leadership

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

(limit 2,500 characters)

1.The CoC will increase exits to permanent destinations from shelter by 5% and other destinations by 2% through the following strategies:

- Add 1 Family Case Manager at Michah’s Mission shelter to allow for more support for families while at shelter and up to 3 months after exit. Staff to be in place by 1/24.
- Increase number of master lease apartments for emergency shelter in rural counties to allow longer stays (than motel vouchers) at the same rate, allowing time for securing stable housing, mainstream supports, and increased income. Launch Pad twin homes targeted for 12/23. Ongoing as additional resources are secured.
- The CoC will launch Housing Stabilization Services (HSS) in Podio database with webform and link to centralize access, making it more client centric (menu of providers and services), increase usage of Medicaid program, and linking households denied to coordinated entry to help them get stably housing.
- Progressively launch additional housing stability courses and tools after moving to our new CoC training site in 12/23. Provide trainings like housing search and landlord engagement.
- Develop Lived Experience Academy to train people with LE to provide mentor and staff roles by 1/25.
- Add 3 AmeriCorps Vistas to help with housing documents and housing search.
- Prepare for rapid lease up and move in for the three new affordable housing units with dedicated homeless beds opening in 11/23, 12/23, & 12/24. Assure CE referrals are placed early.

2.The CoC will increase exits to permanent destinations from shelter by 5% through the following strategies:

- Increase use of HSS via launch of online centralized process in order to increase individuals with disabilities access to additional stabilization support services for as long as needed.
- Progressively launch additional housing stability courses and tools after moving to our new CoC training site in 12/23.
- Develop Lived Experience Academy to train people with LE to provide mentor and staff roles.
- Increase availability support services tied to housing vouchers to support improved stability for persons with severity of needs. In this grant round, Clay County HRA will amend grant to increase support services and right staffing pattern.
- Recruit two housing developers to apply for MN Tax Credit projects in the MN Housing Spring RFP.
- Help facilitate a health and/or housing MOU with each RRH and PSH program on our HIC by 7/1/24.

3.CARES Leadership Team

2C-4.	Returns to Homelessness—CoC’s Strategy to Reduce Rate.	
	NOFO Section V.B.5.e.	
	In the field below:	
1.	describe your CoC’s strategy to identify individuals and families who return to homelessness;	
2.	describe your CoC’s strategy to reduce the rate of additional returns to homelessness; and	
3.	provide the name of the organization or position title that is responsible for overseeing your CoC’s strategy to reduce the rate individuals and persons in families return to homelessness.	

(limit 2,500 characters)

1.The Performance Evaluation committee looks at HMIS Returns annually but will increase to quarterly in '24. Data was analyzed by project and subpopulations to look for deficiencies and disparities, following up with poor performers. A graduate student will be looking at returns on a client level to identify if there are common characteristics and to identify if a single project type or provider is causing disparities.

2.The CoC’s strategy to reduce the rate of returns by 2% is:

- Require providers to implement a written retention policy/practices by 1/24, including tracking of retention activities and adopt use of Case Consult worksheet for all households prior to termination if immediate safety is not a concern.

- Launch Medicaid funded Housing Stabilization Services (HSS) in Podio by 12/23 to support increase housing transition, sustaining, and consultation services for individuals with disabilities to increase long-term stability.

- Progressively launch additional housing stability courses and tools in Stability Toolkit after move to new CoC training site in 12/23. Open site to mainstream and community partners.

- Develop Lived Experience Academy to train people with LE to provide mentorship and support staff roles by 1/25

- Partner with Legal Services of NW to institute a streamline referral process for partners identifying potential violations of fair housing by 3/24.

- Examine and support lower staffing ratios to assure individuals have access to support staff as needed and requested. Expand use of MN Housing Stabilization and Housing Support Services programs for those with disabilities.

- Recruit two housing developers to apply for MN Tax Credit projects in the MN Housing Spring RFP – one in Clay County and one in Becker County.

- Help assure each homeless program (TH, RRH, TH-RRH, PSH, and OPH) has at least one healthcare MOU by 7/1/24.

- Update mainstream definitions training by 3/24.

3.Performance Evaluation Committee

2C-5.	Increasing Employment Cash Income–CoC’s Strategy.	
	NOFO Section V.B.5.f.	

In the field below:	
1.	describe your CoC’s strategy to access employment cash sources;
2.	describe how your CoC works with mainstream employment organizations to help individuals and families experiencing homelessness increase their employment cash income; and
3.	provide the organization name or position title that is responsible for overseeing your CoC’s strategy to increase income from employment.

(limit 2,500 characters)

- 1.1.The CoC’s strategy to increase earned income is by 1% is to:
- Promote and grow supportive employment programs. The CoC will support and share funding opportunities to expand and add programs, promote/share training calendars for existing employment programs. Ongoing.
 - Work with Clay County Jail and CAPLP to implement a new MN Dept. of Employment and Economic Development program in 10/24.
 - Expand use of formalized agreements with employment, education, and training programs, providing sample agreements and facilitating discussions in order to have each homeless program have at least one agreement with an employment, training or education program in place by 10/24. Integrate review of agreements into annual ESG and CoC project review by 3/1/24.
 - Add Advancing Earned Income course to online training site by 7/24. Require all housing programs to complete course by 9/24.
 - Develop plan to create lived experience mentor role and training by 12/24 with implementation by 3/25.

2.Our coordinated entry tools help identify individuals employment and income goals and utilize referral receipts and staff support to link households to local CareerForce Centers (formerly workforce) and other education or training programs/services. CarreerForce Center staff are members of the CoC and local homeless committees so know homeless program staff by name which supports coordination. Two homeless providers have employment and training programs within their organizations with preferences for participants. Agencies coordinate with a local Second Chance career fair each Spring. The CoC promotes (on our website and through our mainstream services training) the free MN Disabilities 101 website which has a comprehensive information and training on employment and disabilities for both persons seeking employment and program staff, including calculators to see how work affects benefits, laws on rights to accommodations, finding a job, links to training programs, interest inventories, testimonials, and videos.

3.Housing Stability Committee

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

(limit 2,500 characters)

- 1.The CoC's strategy to increase non-employment cash income is to:
- Challenge each homeless program to have at least one SOAR trained staff by 3/24.
 - Require all Access Navigators to take the new required Homeless Access Course online by 3/1/24. Classes will include how to use the Housing Crisis Tool to link to community and mainstream resources and how to use motivational interviewing skills to help individuals identify and prioritize goals for housing stability, including increased income.
 - Update the mainstream resources class, requiring all ESG and CoC staff to take the 2024 class between 8/1/24 and 10/1/24.
 - Continue to monitor CoC and ESG projects for linkage to mainstream benefits and provide technical assistance to underperformers.
 - Add new class to mainstream benefits training on addressing barriers to enrollment (ID's, transportation, understanding/completing forms, system interaction challenges, stigmas) and supporting continued enrollment as long as eligibility continues.
 - Seek \$1,000 in funding for general fund to address financial barriers to enrollment like ID's, documentation and transportation.
 - Promote use of MN Vault where individuals with disabilities can safely store and share their ID's and other documentation.
 - Support awareness that all community action agencies can enroll for health and county benefits to make services more client centric.
- 2.CoC Performance Evaluation Committee

3A. Coordination with Housing and Healthcare

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

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

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

	Is your CoC applying for a new PH-PSH or PH-RRH project that uses housing subsidies or subsidized housing units which are not funded through the CoC or ESG Programs to help individuals and families experiencing homelessness?	Yes
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3A-2.	New PH-PSH/PH-RRH Project–Leveraging Healthcare Resources.	
	NOFO Section V.B.6.b.	
	You must upload the Healthcare Formal Agreements attachment to the 4B. Attachments Screen.	

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

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

Project Name	Project Type	Rank Number	Leverage Type
Silver Linings Ap...	PH-PSH	8	Both

3A-3. List of Projects.

1. What is the name of the new project? Silver Linings Apartments

2. Enter the Unique Entity Identifier (UEI): RML9Z7L6Q8E5

3. Select the new project type: PH-PSH

4. Enter the rank number of the project on your CoC's Priority Listing: 8

5. Select the type of leverage: Both

3B. New Projects With Rehabilitation/New Construction Costs

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

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

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

Is your CoC requesting funding for any new project application requesting \$200,000 or more in funding for housing rehabilitation or new construction?	No
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3B-2.	Rehabilitation/New Construction Costs–New Projects.	
	NOFO Section V.B.1.s.	

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

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

(limit 2,500 characters)

N/A

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

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

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

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

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

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

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

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

(limit 2,500 characters)

N/A

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

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

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

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

Did your CoC submit one or more new project applications for DV Bonus Funding?	Yes
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4A-1a.	DV Bonus Project Types.	
	NOFO Section I.B.3.I.	

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

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

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

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

1.	Enter the number of survivors that need housing or services:	1,572
2.	Enter the number of survivors your CoC is currently serving:	818
3.	Unmet Need:	754

4A-3a.	How Your CoC Calculated Local Need for New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.	
	NOFO Section I.B.3.I.(1)(c)	

Describe in the field below:	
1.	how your CoC calculated the number of DV survivors needing housing or services in question 4A-3 element 1 and element 2; and
2.	the data source (e.g., comparable databases, other administrative data, external data source, HMIS for non-DV projects); or
3.	if your CoC is unable to meet the needs of all survivors please explain in your response all barriers to meeting those needs.

(limit 2,500 characters)

1.Data used is a combination of HMIS & VSP data. Element 1 is 1,089 HMIS + 483 VSP=1,572. Element 2 is 796 HMIS + 22 VSP=818. Element 1 HMIS data was calculated by taking the count of unique adults & heads of household (the clients to whom the question applies) active in CE, ES, HP, PH, SSO, SO, or TH projects in the West Central CoC from 7/1/2022 - 6/30/2023 who reported having experienced domestic violence. Element 1 Victim Service Provider (VSP) is the number of survivors in VSP projects in the West Central CoC from 7/1/2022 - 6/30/2023 who reported having experienced domestic violence. Element 2 HMIS data is a count of unique adults & heads of household in CE in West Central CoC from 7/1/2022 - 6/30/2023 who reported having experienced domestic violence & Element 2 VSP data is the current number of unique adults & heads of households in VSP programs from 6/30/2023-7/1/2023.

2.The source of this data is HMIS for non-DV projects & an aggregate supplemental survey for VSPs.

3.HMIS data from 7/1/2022 to 6/30/2023 shows that 41% of leavers in our system experienced DV, with 15% of those coming from situations where they were fleeing. HMIS data also shows that only 46% of DV leavers & 42% of those fleeing exit to permanent destinations compared to 50% of all leavers. Our VSP survey for the same period found that VSP shelters turned away 216 unduplicated households. Note the unduplicated number is per program not across our system since we do not have a single alternative database for VSPs. VSPs shelters don't track outcomes for leavers so we do not have that data. Our new coordinated entry DV Specialist, who begins in October, will work with VSPs on improved tracking & adding more survivors to our alternative priority list. Only 5 households were added to our alternative priority list this year & all were referred to housing. While imminent safety is a priority, survivor households often do not score as high on our assessment tool as other households, particularly those without children as they are competing with Chronic & long-term homeless households. While we have proposed adding additional criteria to our assessment tool to account for the unique vulnerabilities of survivors, additional dedicated programs for survivors are needed so their chronicity & length of time homeless is often less than non-survivors, partly due to the characteristics of the population & partly due to the challenge tracking episodes & disabilities without trained staff.

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

Use the list feature icon to enter information on each unique project applicant applying for New PH-RRH and Joint TH and PH-RRH Component DV Bonus projects—only enter project applicant information once, regardless of how many DV Bonus projects that applicant is applying for.

Applicant Name
Someplace Safe

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

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

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

1.	Applicant Name	Someplace Safe
2.	Project Name	Someplace Safe Emergency Housing Project for Homeless Survivors of Domestic Violence
3.	Project Rank on the Priority Listing	9
4.	Unique Entity Identifier (UEI)	611959826
5.	Amount Requested	\$76,563
6.	Rate of Housing Placement of DV Survivors–Percentage	74%
7.	Rate of Housing Retention of DV Survivors–Percentage	9%

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

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

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

(limit 1,500 characters)

1.Data on the 43 adults served with motel vouchers from 7/1/22-6/30/23 was used as our new rapid rehousing program just started. Calculations are assumptions based on the number of referrals to housing programs and outcome data from the housing agencies receiving referrals. To calculate 4A-3b-Rate of Placement, we divided 32 positive placements (adults exiting to positive destinations from homeless programs (25), with a PHA voucher (1), and assumed to safe mainstream housing or family (6)) by the total number of adults served (43), giving us 74.41%. To calculate 4A-3b rate of retention, we used HMIS data dividing the number who returned to homelessness (3) from those who entered as fleeing and exited into permanent housing (32).

2.Yes, the rate does account for exits to safe destinations although it is assumed for 6 of the adults.

3.Someplace Safe uses Apricot and an internal spreadsheet to track referrals. HMIS data was used to calculate returns and placement data for 25 households who were served in homeless programs. The provider has agreed to work with the new CoC DV coordinated entry specialist to improved tracking of outcomes and to work with the CoC, Violence Free MN, and our HMIS Lead to assure an alternative data base is set up, that data entry policies are in place, and staff are trained to assure compliance and data quality if funded.

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

Describe in the field below how the project applicant:	
1.	ensured DV survivors experiencing homelessness were quickly moved into safe affordable housing;
2.	prioritized survivors—you must address the process the project applicant used, e.g., Coordinated Entry, prioritization list, CoC’s emergency transfer plan, etc.;
3.	determined which supportive services survivors needed;
4.	connected survivors to supportive services; and
5.	moved clients from assisted housing to housing they could sustain—address housing stability after the housing subsidy ends.

(limit 2,500 characters)

1. At initial contact advocates meet survivors to assess their needs using a trauma-informed and victim-centered approach. Completion time varies to assure survivors first feel safe, have basic needs met, and are not re-traumatized. Survivors who identify a need for housing assistance are immediately offered help filling out public housing applications, connected to a coordinated entry assessor, and provided help with housing search or other related supports.
2. Currently, advocates make referrals to other homeless providers who conduct coordinated entry assessments for survivors who are interested. If funded in this competition, Someplace Safe will assure there is at least one staff trained to conduct assessments and follow all CoC polices including use of the emergency transfer plan. We have supported survivors in requesting plans.
3. Tools and processes used help determine survivor needs, offer services, and empower survivors to create short and long-term goals to help them reach their housing, health, income and other goals. Advocates help identify and address barriers that often hinder survivors' ability to begin recovery like financial, education/training, transportation, health, legal, addiction, mental health, childcare, and lack of healthy support systems.
4. Advocates help survivors overcome these barriers by providing both on-site services and referrals or hands-on connections to a large network of mainstream and community partners based on survivors self-identified needs including employment, education, advocacy, health/mental health/substance, childcare, TANF, and more. Someplace on-site services include; 24-hour crisis line, civil legal advocacy, criminal justice advocacy (protection orders, restitution, reparations, accompaniment, tracking, court advocacy, etc.), hospital/medical advocacy, Parenting Time center (safe neutral visitation, transfer), support and empowerment groups, access to Someplace Safe Thrif Store (vouchers for clothing, furniture, household), referrals, and guidance and assistance accessing needed resources (security and protection, food, clothing, household items, personal care items, SSI, SSD, Veteran's Services, job training, etc.).
5. Someplace Safe has not provided this service previously, but has the knowledge, willingness, and related experience to support this activity if funded including supporting financial stability, connecting to public housing, assuring safety, and obtaining other community services.

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

(limit 2,500 characters)

1. Someplace Safe has strict policies to assure the safety, privacy, and confidentiality of survivors, including prohibiting sharing of any information without the survivor’s written permission. If permission is granted, it is within limited parameters set by the survivor and is time sensitive. Private meeting rooms are used for enhanced privacy.
2. Trained staff use client-led, trauma-informed, victim-centered models during the intake and while doing risk assessments and screenings. Tools and training help assure survivors can lead in identifying self-defined needs and goals concerning housing. If a survivor identifies a desire to obtain support with their housing goals and does not need support services, staff will support them with public housing applications and funds to help with application fees, with past due utilities, or deposits (utility or rent). Funds come from Someplace Safe, county emergency funds, or our local community action our new Alexandria fund (can help for up to 3-months of rental assistance for 15 households). Survivors needing additional support are referred to a coordinated entry assessment.
3. Client data are maintained in a secure database with access limited to trained staff who are directly working with the survivor. Protocols on staff, visitor, and survivor cell phones, tables, and computers exist to prevent tracking conversations or disclosure of locations.
4. An internal training committee assures all staff receive baseline training on laws and agencies policies to protect survivor safety, data privacy, and confidentiality. Additionally, advocates attended over 200 hours of external training (webinars, online courses, trainings hosted by other organizations) last year.
5. All Someplace Safe facilities have controlled entrances with cameras and panic buttons which are linked to emergency services. Someplace Safe does not operate any congregate or scattered site housing but does not disclose the address of any survivors housing without consent.

4A-3d.1.	Applicant Experience in Evaluating Their Ability to Ensure DV Survivor Safety for Applicants Requesting New PH-RRH and Joint TH and PH-RRH Component DV Bonus Projects.
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NOFO Section I.B.3.I.(1)(d)

Describe in the field below how the project has evaluated its ability to ensure the safety of DV survivors the project served in the project, including any areas identified for improvement during the course of the proposed project.

(limit 2,500 characters)

Someplace Safe has a long history of providing safe, victim-centered, trauma informed care services to DV survivors and values the input of survivors and community partners to help continually improve the quality of services provided. Someplace Safe has an online client survey so any survivor served by our many services can share their evaluation confidentially and honestly. The survey asks the type and location of service received, whether survivors felt safer, more informed, understood, and supported, and whether services were accessible, whether they received the services they wanted and needed, what was most helpful, were they treated with respect, and how they would improve or add services (if given \$100,000 how should Someplace Safe spend it). Data gathered from the survey is used by the board, leadership and staff to make improvements to existing programs and services and identify additional services that should be provided. Survivors can also fill out paper surveys. Similarly, the proposed project will be evaluated utilizing feedback from survivors using the program, as well as data from Apricot data software. Someplace Safe will also participate in the Bi-Annual CoC Survey which gathers information from those seeking services, those served in the past year, and community partners. Someplace Safe will work with the Institute for Community Alliances, Minnesota’s HMIS Lead Agency, Violence Free Minnesota, and the Continuum of Care to assure our new program is set up in Apricot to meet the required comparable database requirements. Apricot is able protect confidentiality and comply with VAWA and VOCA standards. Clients will be also be asked whether they feel safer after program entry.

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

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

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

(limit 5,000 characters)

1. Someplace Safe provides trauma-informed, survivor-directed services. All services and goals are chosen by the survivor in the assessment process and in conversation with the staff. If a survivor identifies that they want housing assistance the staff will guide the survivor in understanding what options are available to them and getting connected to those options, whether it be public, homeless, or mainstream housing, and assisting them obtain the resources, services and skills necessary to achieve their goals.

2. Someplace Safe’s service philosophy is centered around meeting survivor’s self-defined needs. Survivors are informed and empowered to make decisions regarding services they want and need. Services are self-directed by survivors, not staff. If a survivor would like to utilize a program and qualifies for it, the staff would assist in making this occur.

3. Staff are trained to provide services with a trauma-informed approach, being mindful of how trauma can impact each client’s experiences, victimization, and ongoing services and case management. Training includes helping make survivors aware of how trauma can impact their reactions and decision making.

4. Someplace Safe operates from a strengths-based perspective, taking personal strengths and agency strengths into account with not only direct services, but also agency and staff development. Staff use the Strength Finder philosophy, implementing these strategies when working with survivors. Survivors are guided and encouraged to explore their personal strengths, interests and potential through in the assessment process and in follow-up meetings.

5. Services are available and offered to individuals of all gender identities and sexual orientations. All direct service staff are trained in Safe Zone in efforts to ensure safer, more welcoming, and inclusive environments for members of the LGBTQ community, with signage indicating this at all service locations. Guidelines for working with the LGBTQ population are included in the agency’s ‘Cultural Competency Practices’, and staff receive ongoing training in best practices for service provision as well as strategies for making outside, appropriate referrals. The agency also partners with OutFront Minnesota on training and agency assessment. Someplace Safe prohibits discrimination in agency policy and practices. Someplace Safe Board of Directors and staff have LGBTQ representation. Someplace Safe policy is to provide equal opportunity to all persons, to prohibit discrimination because of race, color, economic status, religion, familial status, parenthood, national origin, place of residence, political affiliation, disability, marital status, status with regard to public assistance, social status, gender, sexual orientation, age, or physical ability in all aspects of its direct service staff policies, programs, practices, or operations. Agency policies state that language assistance services (interpretation and translation) be posted and offered, reasonable accommodations be made, and that survivors should receive effective, understandable, and respectful care in a manner compatible with their culture and beliefs and preferred language as quickly as possible.

6. Someplace Safe offers an Empowerment Group at all advocacy locations and via Zoom. Empowerment is strength’s based and provides an opportunity for further socialization, peer-support, and connections. If survivors identify a desire to connect to other community or faith groups, staff will assist with making referrals and connections if needed.

7. Someplace Safe offers Nurturing Parents curriculum through the agency’s Parenting Time Centers. The Nurturing Parenting Program is a trauma-informed, family-based program designed for the prevention and treatment of child abuse and neglect. Through the Nurturing Parenting curriculum, certified Parent Coaches work with parents to help them learn positive and caring

nurturing skills. The program is competency-based. Each referred parent will complete an assessment at the time of implementing this as part of their supervised parenting time services. Throughout parent’s participation in this program there are competencies designed to measure when parents have acquired a new understanding and demonstrate new skills that represent nurturing parenting strategies and practices. Participation in this program requires compliance of the participant to arrive for scheduled parenting times and follow Parenting Time Center policies. The agency will offer referrals to childcare assistance programs. Someplace Safe will provide direct client assistant to assist with childcare may be provided during support groups.

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

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

(limit 5,000 characters)

Someplace Safe services are each unique to the survivors self-identified needs and goals. While Someplace Safe does not provide permanent housing an example of how services were provide to connect a survivor who identified housing assistance as a need included: 1) provided information on housing assistance available to the survivor and the process in which to apply for assistance, 2) helped to fill out public housing forms, 3) referred the survivor to West Central Minnesota Communities Action for motel voucher, so they could be assessed in Coordinated Entry for transitional or rapid-rehousing, SNAPs application, and to apply for assistance with utility and deposit assistance, 4) provided information on how to search for housing (where to look, what to say on a call, how to fill out the form with gaps in housing history due to living with offender), 5) helped with following up with West Central Minnesota Communities Action, Douglas County Social Services, and Douglas County Housing, 6) helped fill out paperwork once they received a housing offer, 7) discussed employment search, 8) helped plan for a move (obtained a voucher for furniture and household supplies and provided limited financial assistance for supplies)

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

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

- | | |
|----|--|
| 1. | prioritize placement and stabilization in permanent housing consistent with the program participants’ wishes and stated needs; |
| 2. | establish and maintaining an environment of agency and mutual respect, e.g., the project does not use punitive interventions, ensures program participant staff interactions are based on equality and minimize power differentials; |
| 3. | provide program participants access to information on trauma, e.g., training staff on providing program participants with information on the effects of trauma; |
| 4. | emphasize program participants’ strengths—for example, strength-based coaching, questionnaires and assessment tools include strength-based measures, case plans work towards survivor-defined goals and aspirations; |

	5. center on cultural responsiveness and inclusivity, e.g., training on equal access, cultural competence, nondiscrimination, language access, improving services to be culturally responsive, accessible, and trauma-informed;
	6. provide a variety of opportunities for connection for program participants, e.g., groups, mentorships, peer-to-peer, spiritual needs; and
	7. offer support for survivor parenting, e.g., trauma-informed parenting classes, childcare, connections to legal services.

(limit 5,000 characters)

1. After Someplace Safe receives a referral from the CoC and eligibility is confirmed, a staff will meet with the survivor to inform them of program requirements and complete an intake and assessment of needs to identify survivor-guided goals and review the desired location and amenities of housing using existing information already gained to not re-traumatize. The staff will assist the survivor in locating and securing rental housing and on the self-identified housing stability goals.

2. Someplace Safe will deliver services consistent with the service philosophy centered around supporting survivor's self-defined needs. Survivors will be informed and empowered to make decisions regarding their own services even if they are not what staff feel are best. Staff will respectfully identify services or offer support, but will not shame, force or coerce survivors into aligning with their suggested services. Staff will work with local partners and multidisciplinary teams to ensure that all systems respond in a trauma-informed, survivor-focused manner despite what they feel is deemed best for the individuals. Services will be self-directed by survivors.

3. Staff will be trained to provide services in a trauma-informed approach, being mindful of how trauma can impact each survivors' experiences, victimization, and ongoing services and case management. Staff will help make survivors aware of how trauma can impact their reactions and decision making and provide resources to help them identify potential triggers, heal, and develop coping skills.

4. Someplace Safe will use a strengths-based approach, taking personal strengths and agency strengths into account with not only direct services, but also agency and staff development. Staff will use the Strength Finder philosophy, implementing these strategies when working with survivors. Survivors will be guided and encouraged to explore their personal strengths, interests and potential through the assessment process and in follow-up meetings.

5. Services will be available and offered to individuals of all gender identities and sexual orientations. All direct service staff will be trained in Safe Zone in efforts to ensure safer, more welcoming, and inclusive environments for members of the LGBTQ community, with signage indicating this at all service locations. Staff will receive training on and abide by agency anti-discrimination and 'Cultural Competency Practices'. The agency will continue to partner with OutFront Minnesota on training and agency assessment. Someplace Safe policy is to provide equal opportunity to all persons, to prohibit discrimination because of race, color, economic status, religion, familial status, parenthood, national origin, place of residence, political affiliation, disability, marital status, status with regard to public assistance, social status, gender, sexual orientation, age, or physical ability in all aspects of its direct service staff policies, programs, practices, or operations. Someplace Safe Board of Directors and staff will strive to have representation from overrepresented populations like persons who identify as LGBTQ. Agency policies state that language assistance services (interpretation and translation) be posted and offered, reasonable accommodations be made, and that survivors should receive effective, understandable, and respective care in a manner compatible with their culture and beliefs and preferred language as quickly as possible.

6. Someplace Safe will offer Empowerment Group at all advocacy locations and via Zoom. Staff will encourage connections with community groups and involvement in community activities to support a feeling of belonging and healthy support network. If survivors want to connect to other community or faith groups, staff will assist with making referrals and connections if needed.

7. Someplace Safe will offer Nurturing Parents curriculum through the agency's

Parenting Time Centers. The Nurturing Parenting Program is a trauma informed, family-based program designed for the prevention and treatment of child abuse and neglect. Through the Nurturing Parenting curriculum, certified Parent Coaches work with parents to help them learn positive and caring nurturing skills. The program is competency-based. Each referred parent will complete an assessment at the time of implementing this as part of their supervised parenting time services. Throughout parent’s participation in this program there are competencies designed to measure when parents have acquired a new understanding and demonstrate new skills that represent nurturing parenting strategies and practices. Participation in this program requires compliance of the participant to arrive for scheduled parenting times and follow Parenting Time Center policies. The agency will offer referrals to childcare assistance programs. Someplace Safe will provide direct client assistant to assist with childcare payments. Childcare may be provided during support groups.

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

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

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

(limit 2,500 characters)

1. Someplace Safe values the input of survivors to assure we continually improve the quality of services provided. Someplace Safe has an online client survey open to any survivor served in our 9-county area by our many services. Survivors can share their evaluation confidentially and honestly. The survey asks the type and location of service received, whether survivors felt safer, more informed, understood, and supported, and whether services were accessible, whether they received the services they wanted and needed, what was most helpful, were they treated with respect, and how they would improve or add services (if given \$100,000 how should Someplace Safe spend it). Survivors are also provided with paper surveys. Someplace Safe will also promote the West Central Minnesota Continuum of Care’s advisory boards and focus groups for persons with lived experience and participate in the Continuum of Care Bi-Annual Survey. The survey asks those served by programs in the region during the past year how satisfied they were with services and what services were most and least helpful. The survey also interviewed those seeking services during a two-week period what are their greatest needs and what they would do to solve their crisis if that said programs did not exist.

2. Data gathered from the Continuum of Care and Someplace Safe surveys will be used by the board, leadership, and staff to make improvements to existing programs and services and identify additional services that should be provided. Survivors are also involved in the work of Someplace Safe in a variety of ways. This includes volunteering (office work, fundraising, event planning, thrift store work, crisis line, etc.), are employed as advocates and other staff, and serve on the agency’s Board of Directors. Survivors also serve on agency facilitated task force groups, focus groups, and other committees that drive victim-centered services, community outreach, service improvements, ensure best practices, and agency operations.

4B. Attachments Screen For All Application Questions

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

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

Document Type	Required?	Document Description	Date Attached
1C-7. PHA Homeless Preference	No	PHA Homeless Pref...	09/17/2023
1C-7. PHA Moving On Preference	No	PHA Moving On Pre...	09/17/2023
1D-11a. Letter Signed by Working Group	Yes	Letter Signed by ...	09/27/2023
1D-2a. Housing First Evaluation	Yes	Housing First Eva...	09/17/2023
1E-1. Web Posting of Local Competition Deadline	Yes	Web Posting of Lo...	09/17/2023
1E-2. Local Competition Scoring Tool	Yes	Local Competition...	09/17/2023
1E-2a. Scored Forms for One Project	Yes	Scored Forms for ...	09/26/2023
1E-5. Notification of Projects Rejected-Reduced	Yes	Notification of P...	09/17/2023
1E-5a. Notification of Projects Accepted	Yes	Notification of P...	09/17/2023
1E-5b. Local Competition Selection Results	Yes	Local Competition...	09/17/2023
1E-5c. Web Posting—CoC-Approved Consolidated Application	Yes	Web Posting-CoC A...	09/26/2023

1E-5d. Notification of CoC-Approved Consolidated Application	Yes	Notification of C...	09/26/2023
2A-6. HUD's Homeless Data Exchange (HDX) Competition Report	Yes	HDX Competition R...	09/17/2023
3A-1a. Housing Leveraging Commitments	No	Housing Leveragin...	09/22/2023
3A-2a. Healthcare Formal Agreements	No	Healthcare Formal...	09/22/2023
3C-2. Project List for Other Federal Statutes	No		
Other	No		

Attachment Details

Document Description: PHA Homeless Preference - MN-508

Attachment Details

Document Description: PHA Moving On Preference - MN-508

Attachment Details

Document Description: Letter Signed by Working Group

Attachment Details

Document Description: Housing First Evaluation

Attachment Details

Document Description: Web Posting of Local Competition Deadline

Attachment Details

Document Description: Local Competition Scoring Tool

Attachment Details

Document Description: Scored Forms for One Project

Attachment Details

Document Description: Notification of Projects Rejected-Reduced

Attachment Details

Document Description: Notification of Projects Accepted

Attachment Details

Document Description: Local Competition Selection Results

Attachment Details

Document Description: Web Posting-CoC Approved Consolidated
Applicatio-

Attachment Details

Document Description: Notification of CoC-Approved Consolidated Application

Attachment Details

Document Description: HDX Competition Report

Attachment Details

Document Description: Housing Leveraging Commitments

Attachment Details

Document Description: Healthcare Formal Agreements

Attachment Details

Document Description:

Attachment Details

Document Description:

Submission Summary

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

Page	Last Updated
1A. CoC Identification	09/11/2023
1B. Inclusive Structure	09/26/2023
1C. Coordination and Engagement	09/26/2023
1D. Coordination and Engagement Cont'd	09/26/2023
1E. Project Review/Ranking	09/26/2023
2A. HMIS Implementation	09/21/2023
2B. Point-in-Time (PIT) Count	09/27/2023
2C. System Performance	09/27/2023
3A. Coordination with Housing and Healthcare	09/20/2023
3B. Rehabilitation/New Construction Costs	09/20/2023
3C. Serving Homeless Under Other Federal Statutes	09/20/2023

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

PHA Homeless Preference MN-508

Clay County Housing Redevelopment Authority Homeless Preference

4-III.C. SELECTION METHOD

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

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

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

PHA Policy

The PHA will offer a twelve (12) point preference to any family that has been terminated from its HCV program due to insufficient program funding.

The PHA will offer a eleven (11) point preference for households who have applied for, been accepted, and agree to move into a non-subsidized PHA owned or managed unit.

The PHA will offer a ten (10) point preference to any household residing in a PHA current or former project-base Voucher unit who is eligible to receive tenant-based assistance.

The PHA will offer a limited nine (9) point preference to any Becker, Clay, Douglas, Grant, Otter Tail, Pope, Stevens, Traverse, Wadena, or Wilkin County resident who are persons with disabilities age 18-61 (inclusive) who are transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless. The number of preferences is equal to the number of Mainstream Vouchers available at the time households are selected from the waiting list. The number of preferences available will vary from 0-28 households.

I

Institutional or other segregated settings include, but are not limited to: (1) congregate settings populated exclusively or primarily with individuals with disabilities; (2) congregate settings characterized by regimentation in daily activities, lack of privacy or autonomy, policies limiting visitors, or limits on individuals' ability to engage freely in community activities and to manage their own activities of daily living; or (3) settings that provide for daytime activities primarily with other individuals with disabilities.

At serious risk of institutionalization: Includes an individual with a disability who as a result of a public entity's failure to provide community services or its cut to such services will likely cause a decline in health, safety, or welfare that would lead to the individual's eventual placement in an institution. This includes

individuals experiencing lack of access to supportive services for independent living, long waiting lists for or lack of access to housing combined with community based services, individuals currently living under poor housing conditions or homeless with barriers to geographic mobility, and/or currently living alone but requiring supportive services for independent living. A person cannot be considered at serious risk of institutionalization unless the person has a disability. An individual may be designated as at serious risk of institutionalization either by a health and human services agency, by a community-based organization, or by self-identification.

Homeless means:

- (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - (i) An individual or family with a primary nighttime residence that is a public, or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
 - (ii) An individual or family living in a supervised publicly supervised or privately operated shelter providing temporary accommodations (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
 - (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;
- (2) An individual or family who will imminently lose their primary nighttime residence, provided that :
 - (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
 - (ii) No subsequent residence has been identified; and
 - (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain permanent housing;
- (3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
 - (i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U. S. C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17 (b) of the Child Nutrition Act of 1996 (42 U.S.C. 1786 (b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
 - (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 says immediately preceding the date of application for homeless assistance;

- (iii) Have experienced persistent instability as measured by two or more moves or more during the 60 day period immediately preceding the date of applying for homeless assistance; and
 - (iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health, or mental health conditions; substance addiction, histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or
- (4) Any individual or family who:
- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
 - (ii) Has no other residence; and
 - (iii) Lacks the resources or support networks, or other social networks, to obtain other permanent housing.

At risk of becoming homeless means:

- (1) An individual or family who does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the "Homeless" definition in this section; and
- (2) Meets one of the following conditions:
 - (i) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homeless prevention assistance;
 - (ii) Is living in the home of another because of economic hardship;
 - (iii) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance;
 - (iv) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, state, or local government programs for low-income individuals;
 - (v) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
 - (vi) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or

- (vii) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness.

The PHA will offer an eight (8) point preference to families who are a Clay County resident and whose head of household or spouse is 75 years of age or older.

The PHA will offer a seven (7) point preference to any Clay County resident who have completed a Tenant Education Program and are currently receiving time limited rental assistance, but will be terminated from said assistance within 6 months due to reaching the program's time limit or, to families who are currently participating in a permanent supportive housing program in Clay County who, based upon a standardized assessment, are determined to no longer require permanent supportive housing.

The PHA will offer a one (1) point preference to households who live in Clay County, Minnesota, or Cass County, North Dakota, who have attended The Tenant Education Class, and meet one of the following additional preferences:

The PHA will offer a disability preference to disabled persons or families with a disabled member as defined in this plan.

The PHA will offer a victim of domestic violence preference to families that include victims of domestic violence in which the violence happened within 12 months of the date of their application. To qualify for this preference:

Actual or threatened physical violence directed against the applicant or the applicants family by a spouse or other household member who lives in the unit with the family.

The family must have been displaced as a result of fleeing violence in the home they are currently living in a situation where they are being subjected to or victimized by violence in the home.

The applicant must certify that the abuser will not reside with the applicant unless the PHA gives prior written approval.

The PHA will offer a preference to an applicant who is considered a homeless or long-term homeless household.

Homeless is:

- (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - (i) An individual or family with a primary nighttime residence that is a public, or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
 - (ii) An individual or family living in a supervised publicly supervised or privately operated shelter providing temporary accommodations (including congregate shelters, transitional housing, and hotels and

motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or

- (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Minnesota definition of long term homeless is:

an individual, unaccompanied youth or family with children “lacking a permanent place to live, continuously for a year or more or at least four times in the past three years.” Any period of institutionalization (including transitional housing , treatment or incarceration) shall be excluded when determining the length of time the household has been homeless or:

A household who previously met the definition of homeless prior to entering a transitional housing program. These households may choose to maintain their place on the waiting list while completing a transitional housing program.

The PHA will offer a preference to families with minor children in the household.

The PHA will offer a near-elderly or elderly preference for households whose head of household or spouse is age 50 or older.

The applicant must certify that the abuser will not reside with the applicant unless the PHA gives prior written approval.

The PHA will offer a preference to an applicant who is considered a homeless household.

Lack a fixed, regular and adequate nighttime residence; and

Have a primary nighttime residence that is a supervised public, or private shelter providing temporary accommodations (including welfare hotels, congregate shelters and transitional housing), or an institution providing temporary residence for individuals intended to be institutionalized, or a public or private place not ordinarily used as a sleeping accommodation for human beings or:

Meets the Minnesota definition of long term homeless:

A household experiencing long term homeless is an individual, unaccompanied youth or family with children “lacking a permanent place to live, continuously for a year or more or at least four times in the past three years.” Any period of institutionalization (including transitional housing or treatment) or incarceration shall be excluded when determining the length of time the household has been homeless or:

A household who previously met the definition of homeless prior to entering a transitional housing program. These households may choose to maintain their place on the waiting list while completing a transitional housing program.

The PHA will offer a preference to families with minor children in the household.

The PHA will offer a near-elderly or elderly preference for households whose head of household or spouse is age 50 or older.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75% of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30% of the area median income, whichever is higher. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low income families admitted to the program that are “continuously assisted” under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

Moorhead Public Housing Homeless Preference

10.0 TENANT SELECTION AND ASSIGNMENT PLAN

10.1 PREFERENCES

The Moorhead Public Housing Agency will select families based on waiting list preferences followed by the date and time the application was received. Non-disabled individuals who are not homeless will be eligible only after the waiting list preferences has been exhausted. Homeless households will be given the top preference, followed by persons with disabilities.

Homeless Household: Lack a fixed, regular and adequate nighttime residence; and

Have a primary nighttime residence that is a supervised public, or private shelter providing temporary accommodations (including welfare hotels, congregate shelters and transitional housing), or an institution providing temporary residence for individuals intended to be institutionalized, or a public or private place not ordinarily used as a sleeping accommodation for human beings or:

Meets the Minnesota definition of long term homelessness:

A household experiencing long term homeless is an individual, unaccompanied outh or family with children "lacking a permanent place to live, continuously for a year or more or at least four times in the past three years." Any period of institutionalization (including transitional housing or treatment) or incarceration shall be excluded when determining length of time the household member has been homeless or:

A household who previously met the definition of homeless prior to entering a transitional housing program. These households may choose to maintain their place on the waiting list while completing a transitional housing program.

Buildings Designated as Elderly Only Housing: The Sharp View Housing complex has been approved by HUD as being designated for elderly only. In filling vacancies in this development, first priority will be given to elderly families. If there are no elderly families on the list, next priority will be given to the near-elderly who are 50 years of age or older.

Accessible Units: Accessible units will be first offered to families who may benefit from the accessible features. Applicants for these units will be selected utilizing the same preference system as outlined above. If there are no applicants who would benefit from the accessible features, the units will be offered to other applicants in the order that their names come to the top of the waiting list. Such applicants, however, must sign a release form stating they will accept a transfer (at their own expense) if, at a future time, a family requiring an accessible feature applies. Any family required to transfer will be given a 30-day notice.

VERIFICATION OF HOMELESSNESS FORM

Page 1 of 2

(To be filled out only if you are homeless)

A REFERRING OFFICIAL FROM A SHELTER OR SOCIAL SERVICE AGENCY MUST COMPLETE THIS FORM. A POLICE DEPARTMENT OFFICIAL MAY ONLY RESPOND TO ITEMS B or C BELOW.

Note: The person completing this form MUST be serving in an official capacity AND must have direct knowledge of the applicant's current living situation based on a professional relationship with the applicant. Failure to complete this form fully and accurately could result in denial of preference request.

Applicant: _____ **Agency/Provider:** _____

Organization: _____ **Phone:** _____

Please check which of the following describes the applicant's current shelter arrangements:

- A. Lacks a fixed, regular and adequate nighttime residence and is residing in a recognized, supervised shelter, transitional housing program, hotel or welfare hotel providing temporary accommodations for homeless people.

Shelter name: _____ Date Entered: _____

- B. Lacks a fixed, regular and adequate nighttime residence and is residing in a car, on the street, in an abandoned building or other place not meant for human habitation.

Please specify:

- C. Lacks a fixed, regular and adequate nighttime residence and is exiting an institution, (including a hospital, a substance abuse or mental health treatment facility, or jail/prison) where the stay was for 90 days or less and was living in a shelter or place not meant for human habitation immediately before entering that institution.

Please specify:

- D. Lacks a permanent place to live, continuously for one year or more. (Note- exclude any period of institutionalization, including transitional housing or treatment from length of time homeless).

Please specify:

- E. Lacks a permanent place to live at least 4 times in the past 3 years. (Note- exclude any period of institutionalization, including transitional housing or treatment, from length of time homeless).

Please specify:

Homelessness Verification Form (Page 2 of 2)

To be completed by applicant:

I, _____, authorize the release of the above information to the Moorhead Public Housing. I also hereby certify that I have not secured standard, permanent housing to resolve the housing need which I have claimed as a preference for my application. I agree that if my circumstance should change at any time, I will immediately notify the public housing agency *in writing*. I understand the falsification, misrepresentation or concealment of information will be considered grounds for denying admission to MPHA housing programs.

Signature _____ **Date:** _____

Name (Please Print): _____

To be completed by referring official:

I, _____, am serving in an official capacity AND have direct knowledge of the applicant's current living situation based on a professional relationship with the applicant.

Signature _____ **Date:** _____

Name (Please Print): _____

(This form is available translated or in an alternative format upon request.)

**Bridges Waiting List Selection Plan
Effective July 1, 2021**

At the time a Bridges Application is delivered to **the Douglas County Housing & Redevelopment Authority**, the application will be date and time stamped, reviewed, and placed on the waiting list using the following criteria:

Each application will be awarded a score based upon the applicants current housing situation.

Preference number 1 and number 2 will receive the highest score followed by numbers 3 and 4. Preference number 2 must be referred by the local coordinated entry (CE). Preference number 4 will be awarded the lowest score.

A total score will determine placement on the waiting list.

Preference Number 1:

People residing in an institution, segregated setting, or under correctional supervision who will be homeless upon exit. **Score: 4**

Preference Number 2:

People experiencing homelessness who are assessed as High Priority Homeless (HPH) through the Coordinated Entry (CE) system including households of individuals, families with children, or youth (age 18+). **Score: 4**

Preference 3:

People who are experiencing homelessness or at imminent risk of homelessness. **Score: 3**

Preference 4:

Date and time of receiving as application. **Score: 1**

Total Score _____

Moving On Multifamily Preference Clay County Housing and Redevelopment Authority

4-III.C. SELECTION METHOD

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

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

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

PHA Policy

The PHA will offer a twelve (12) point preference to any family that has been terminated from its HCV program due to insufficient program funding.

The PHA will offer a eleven (11) point preference for households who have applied for, been accepted, and agree to move into a non-subsidized PHA owned or managed unit.

The PHA will offer a ten (10) point preference to any household residing in a PHA current or former project-base Voucher unit who is eligible to receive tenant-based assistance.

The PHA will offer a limited nine (9) point preference to any Becker, Clay, Douglas, Grant, Otter Tail, Pope, Stevens, Traverse, Wadena, or Wilkin County resident who are persons with disabilities age 18-61 (inclusive) who are transitioning out of institutional and other segregated settings, at serious risk of institutionalization, homeless, or at risk of becoming homeless. The number of preferences is equal to the number of Mainstream Vouchers available at the time households are selected from the waiting list. The number of preferences available will vary from 0-28 households.

I

Institutional or other segregated settings include, but are not limited to: (1) congregate settings populated exclusively or primarily with individuals with disabilities; (2) congregate settings characterized by regimentation in daily activities, lack of privacy or autonomy, policies limiting visitors, or limits on individuals' ability to engage freely in community activities and to manage their own activities of daily living; or (3) settings that provide for daytime activities primarily with other individuals with disabilities.

At serious risk of institutionalization: Includes an individual with a disability who as a result of a public entity's failure to provide community services or its cut to such services will likely cause a decline in health, safety, or welfare that would lead to the individual's eventual placement in an institution. This includes individuals experiencing lack of access to supportive services for independent

living, long waiting lists for or lack of access to housing combined with community based services, individuals currently living under poor housing conditions or homeless with barriers to geographic mobility, and/or currently living alone but requiring supportive services for independent living. A person cannot be considered at serious risk of institutionalization unless the person has a disability. An individual may be designated as at serious risk of institutionalization either by a health and human services agency, by a community-based organization, or by self-identification.

Homeless means:

- (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - (i) An individual or family with a primary nighttime residence that is a public, or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
 - (ii) An individual or family living in a supervised publicly supervised or privately operated shelter providing temporary accommodations (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
 - (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;
- (2) An individual or family who will imminently lose their primary nighttime residence, provided that :
 - (i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
 - (ii) No subsequent residence has been identified; and
 - (iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain permanent housing;
- (3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
 - (i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U. S. C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17 (b) of the Child Nutrition Act of 1996 (42 U.S.C.

1786 (b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);

- (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
- (iii) Have experienced persistent instability as measured by two or more moves or more during the 60 day period immediately preceding the date of applying for homeless assistance; and
- (iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health, or mental health conditions; substance addiction, histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or

(4) Any individual or family who:

- (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- (ii) Has no other residence; and
- (iii) Lacks the resources or support networks, or other social networks, to obtain other permanent housing.

At risk of becoming homeless means:

(1) An individual or family who does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in paragraph (1) of the "Homeless" definition in this section; and

(2) Meets one of the following conditions:

- (i) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homeless prevention assistance;
- (ii) Is living in the home of another because of economic hardship;
- (iii) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance;

- (iv) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, state, or local government programs for low-income individuals;
- (v) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
- (vi) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
- (vii) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness.

The PHA will offer an eight (8) point preference to families who are a Clay County resident and whose head of household or spouse is 75 years of age or older.

The PHA will offer a seven (7) point preference to any Clay County resident who have completed a Tenant Education Program and are currently receiving time limited rental assistance, but will be terminated from said assistance within 6 months due to reaching the program's time limit or, to families who are currently participating in a permanent supportive housing program in Clay County who, based upon a standardized assessment, are determined to no longer require permanent supportive housing.

The PHA will offer a one (1) point preference to households who live in Clay County, Minnesota, or Cass County, North Dakota, who have attended The Tenant Education Class, and meet one of the following additional preferences:

The PHA will offer a disability preference to disabled persons or families with a disabled member as defined in this plan.

The PHA will offer a victim of domestic violence preference to families that include victims of domestic violence in which the violence happened within 12 months of the date of their application. To qualify for this preference:

Actual or threatened physical violence directed against the applicant or the applicants family by a spouse or other household member who lives in the unit with the family.

The family must have been displaced as a result of fleeing violence in the home they are currently living in a situation where they are being subjected to or victimized by violence in the home.

The applicant must certify that the abuser will not reside with the applicant unless the PHA gives prior written approval.

The PHA will offer a preference to an applicant who is considered a homeless or long-term homeless household.

Homeless is:

- (1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - (i) An individual or family with a primary nighttime residence that is a public, or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
 - (ii) An individual or family living in a supervised publicly supervised or privately operated shelter providing temporary accommodations (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
 - (iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

Minnesota definition of long term homeless is:

an individual, unaccompanied youth or family with children “lacking a permanent place to live, continuously for a year or more or at least four times in the past three years.” Any period of institutionalization (including transitional housing , treatment or incarceration) shall be excluded when determining the length of time the household has been homeless or:

A household who previously met the definition of homeless prior to entering a transitional housing program. These households may choose to maintain their place on the waiting list while completing a transitional housing program.

The PHA will offer a preference to families with minor children in the household.

The PHA will offer a near-elderly or elderly preference for households whose head of household or spouse is age 50 or older.

September 21, 2023

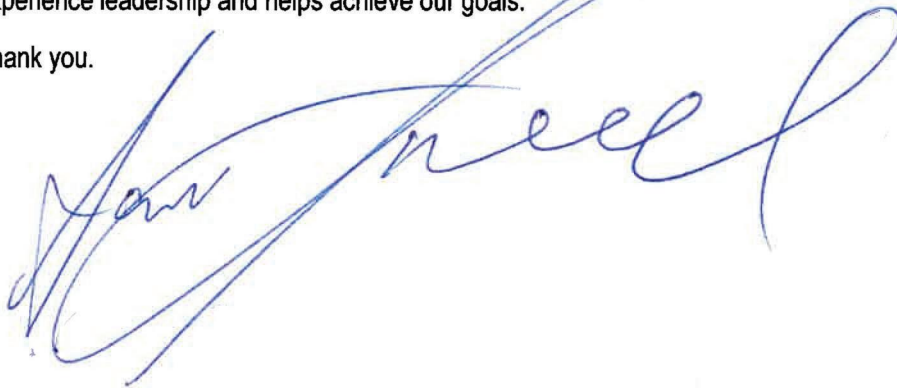
Carla Solem
Coordinator
West Central Minnesota Continuum of Care
116 Center Avenue
Dilworth, MN 56529

Hello,

I am writing this letter to support the West Central Continuum of Care Application to HUD.

I am a member of the Lived Experience Equity Committee and know that more funding is needed to help us achieve the goals in our plan. I support the CoC work and application and hope it provides us with more opportunities for lived experience leadership and helps achieve our goals.

Thank you.

A handwritten signature in blue ink, appearing to read "Dan Neel". The signature is written in a cursive style with a large, sweeping flourish that extends across the width of the text.

September 21, 2023

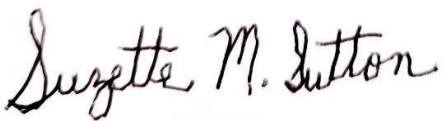
To Whom it May Concern:

My name is Suzette Sutton and I am a member of the CoC Board and have been for the last two years. I support everything we do to try and reduce the Homeless population in our area.

I am also a member of my local consumer advisory board. The CoC comes to our meetings and asks our opinions on many things like forms and policies. We support this request for funding because they are trying to help reduce/end homelessness in our area. They have great plans for how to best use the funds and how to best utilize the funds so they will go further.

We would appreciate your consideration for the CoC application.

Sincerely,

A handwritten signature in black ink that reads "Suzette M. Sutton". The signature is written in a cursive, flowing style.

Suzette M. Sutton

320-304-7093

fryekidsmom@gmail.com

Carla Solem
Continuum of Care Coordinator
West Central Minnesota Continuum of Care
116 Center Avenue
Dilworth, MN 56529

To HUD,

I am one of the lived experience representatives to the CoC Board and am a reviewer of the CoC Application and am in support of the West Central Continuum of Care Application to HUD for the Continuum of Care competition. I also am Co-Chair of the Performance Evaluation Committee. Our committee is responsible for the ranking and scoring of CoC projects. I feel all projects are needed in our region and help support our CoC goals.

I also serve as Chair of the Fargo-Moorhead Advocacy Committee and Chair of the Northwest MN Connect. At the state level I have served as a greater MN representative to the MN Shelter Task Force and am now a Housing Shelter Consultant for the MN Coalition for the Homeless. I also spoke as a lived experience expert on a panel at a CoC membership meeting and have provided my expertise to the CoC and Fargo-Moorhead Coalition on how to establish a training program that provides more leadership opportunities and leads to hiring more people with lived expertise.

Please let me know if you have any questions.

Thank you,

A handwritten signature in dark ink, appearing to read 'Jason Urbanczyk'. The signature is fluid and cursive, with a large loop at the end.

Jason Urbanczyk, Housing Shelter Consultant

Web Posting of Local Competition Deadline – MN-508

Homeless To Housed - West Central MN CoC

homelesstohoused.com

West Central Minnesota Continuum of Care

Homeless To Housed Task Force

Working together to make homelessness, rare, brief and non-recurring

Home West Central MN CoC Homeless Information & Data Local HUD Competitions More

HOUSED PEOPLE ARE NOT HOMELESS!

Are you homeless or at risk of homelessness?

If you are currently homeless or at-risk of becoming homeless, please contact one of the providers in your county of residence.

Visit **HB101** to find the phone number and agency for your county. You may also call Hub MN at **1-866-333-2466**.

Moorhead/Clay County residents can all **211**.

For other Counties in the

The 2023 CoC Competition is OPEN!

The CoC is **seeking applicants** to apply for HUD CoC funding for new or expanded Rapid Rehousing, Dual Component Transitional Housing-Rapid Rehousing, Permanent Supportive Housing, or HMIS expansion.

Visit the [2023 Competition Page](#) for more information or contact the CoC at h2hcoordinator@gmail.com.

What is a Continuum of Care (CoC)?

The Continuum of Care is a regional planning body of representative stakeholders designed to promote a shared commitment to the goal of ending homelessness with a focus on:

- quickly rehousing homeless individuals and families while minimizing the trauma and dislocation

Collaborative Applicant RFP

Help the CoC Accomplish our goal of making homelessness rare, brief and one-time!

The West Central MN CoC is seeking a new Collaborative Applicant. To learn more about the role of the Collaborative Applicant and find out how to apply [click on this link](#).

77°F Mostly sunny 2:32 PM 7/14/2023

Homeless To Housed - West Central MN CoC

homelesstohoused.com/coc-competition

CoC Competition Page

The FY 2023 CoC Competition is Now OPEN!

This page provides essential links and information on the 2023 competition. Additional information will be added as the competition progresses.

For translation of competition materials or other accommodations, please see below on use of MN Relay or how to contact the CoC Coordinator.

[2023 CoC Applicant Packet](#)

[2023 Intent to Apply](#)

[2023 CoC New Project Threshold Assessment, Score Card, and Supplemental Questions](#)

[CoC Competition links](#)

[2023 HUD CoC Competition Page](#)

[2023 HUD NOFO page with esnaps link](#)

[2023 CoC New Project Detailed Instructions - coming soon](#)

[2023 CoC Renewal Detailed Instructions - coming soon](#)

[2023 Grant Inventory Worksheet](#)

[Coming in September!](#)

- CoC Collaborative Application
- CoC Application
- CoC Priority Listing

Competition Calendar:

- August 1st: Intent to Apply
- August 11th: Score Card/Questions Due
- August 15th: New Project Ranking meeting
- August 16th: Projects Notified
- August 17th: Application Labs
- August 25th: Project Applications due in esnaps

Please contact Carla Solem @ 701-306-1944 or h2hcoordinator@gmail.com to arrange for translation or other accommodations. For those who are deaf, deafblind, hard of hearing, or speech disabled, please contact Minnesota Relay, a free, federally mandated Telecommunications Relay Services (TRS) program allowing speech disabled to place and receive telephone calls. Minnesota Relay can be contacted at:

Voice: 651-602-9005 / 1-800-657-3775
Video Phone: 651-964-1514 / 1-866-635-0082
Email: mn.relay@state.mn.us

System for Award Management (SAM) is the Federal Repository into which an entity must provide information required for the conduct of business as

78°F High winds soon 3:21 PM 7/14/2023

Updated on 7/24

homelesstohoused.com/coc-competition

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[2023 Grant Inventory Worksheet](#)

Coming in September!
CoC Collaborative Application
- CoC Application
- CoC Priority Listing

Competition Calendar:
August 1st: Intent to Apply Due
August 17th: Application Labs
August 24th: Score Card/Questions Due
August 25th: New Project Ranking meeting
August 28th: Project Applications due in esnaps
September 7th: HTH meeting to vote on Rank & Tier
September 8th: Projects notified of final rank & tier

Please contact Carla Solem @ 701-306-1944 or h2hcoordinator@gmail.com to arrange for translation or other accommodations. For those who are deaf, deafblind, hard of hearing, or speech disabled, please contact Minnesota Relay, a free, federally mandated Telecommunications Relay Services (TRS) program allowing speech disabled to place and receive telephone calls. Minnesota Relay can be contacted at:
Voice: 651-602-9005 / 1-800-657-3775
Video Phone: 651-964-1514 / 1-866-635-0082
Email: mn.relay@state.mn.us

87°F Sunny 4:55 PM 7/24/2023

Notification of Projects Rejected-Reduced – MN-508

Our CoC **did not** reject or reduce any project during our CoC's local competition.

Notification of Projects Accepted – MN-508

Notification to entire CoC

HTH Meeting PP and 2023 Approved CoC Project Ranking - Message (H...)

File Message Developer Help Acrobat

HTH Meeting PP and 2023 Approved CoC Project Ranking

Carla Solem <h2hcoordinator@gmail.com>
 To: 'Alexandra Johanson'; 'Alexandria Fogarty'; 'Amber Holmstrom'; 'Amy Feland'; 'Amy Riccio-Galde <ariccio@moorheadschools.org>'; 'Anna Sellin - Lakes Crisis'; 'Anne LaFrinier-Richie'; 'Barb Sipson'; 'Ben Erie'; 'Beth Olson'; 'Bobbie Jo Stanfill'; 'Brandi Wilkie'; +89 others

CoC September 2023 - HTH Membership meeting .pptx
3 MB

Reply Reply All Forward ...

Fri 9/8/2023 12:24 PM

Date

Sent to entire CoC listserv which includes all projects.

Thanks to all who attended yesterday's Quarterly West Central MN CoC Homeless to Housed Task Force meeting! I especially enjoyed hearing all of your celebrations. They were reflections of the wonderful work you are all doing on a daily basis! 🥳

Attached is the meeting PowerPoint and below is the approved 2023 Approved Priority Listing with score. For those not at the meeting, note that ranking was not based solely on scores. Presentation Partners in Housing (PPH) scored 100% on their two renewal projects that just went under contact this month. Since our scoring tool for renewal projects is strongly based on performance outcomes and these projects are new with not outcomes to report so their score was skewed since they received N/A on the performance section. Additionally, while the CARES Coordinator project was our lowest scoring project, the Ranking Committee recommended, and the CoC approved, ranking this project higher than the scorecard, taking into account that agency leadership transition and steps the FM Coalition has put into place to prevent to improve overall project performance, assure grant funds are expended, and meet program outcomes.

Project Applicant Names	Score	Approved Request
MN HMIS West Central	N/A	\$33,359
CAP/P Permanent Supportive Housing Chronic	97%	\$198,356
HRA CARES (CCHRA)	87%	\$4,120
WCMCA TH RBH 2023 (DV)	86%	\$5,159
CARES Access and Coordinated Entry 2023 (PPH)	100%	\$46,174
CARES Domestic Violence (PPH)	100%	\$67,977
CARES Coordinator FY 2023 (PMC)	67%	\$41,977
Someplace Safe Emergency Housing Project for Homeless Survivors of Domestic Violence	84%	\$76,566
Silver Listings Apartments	94%	\$62,077
Total Project Applicant Request		\$1,145,455
CoC Planning Grant Request		\$20,000
Total Priority Listing (Approved)		\$1,165,455

Project applicants have been notified of their rank and score, as well as some provided with recommended or required changes. Applicants have until the 14th to submit their amended applications in esnaps.

I am also still seeking 1-2 additional reviewers for the Collaborative Application. Please let me know if you are interested. Review will occur by the 25th of September so that the Consolidated application can be posted and voted upon.

Let me know if you have any questions.

Carla Solem, Coordinator
701-306-1944

- Names in order of rank
- Scores
- Funding Amount

Individual notifications: Each project was notified by email.

2023 HUD CoC Competition.

Carla Solem <h2hcoordinator@gmail.com>
 To: John Campbell

Reply Reply All Forward ...

Wed 9/6/2023 4:27 PM

Thank you for submitting your Application, Scorecard and supporting documents for the 2023 CoC Competition. The CoC Ranking & Review Committee met yesterday and reviewed your esnaps application and scorecard.

The CoC feels there is a need for your project in your region and that your project aligns with CoC goals. **Your project application will be ranked and included in the 2023 Collaborative Application.** Your application scored **67%**, is recommending your project be ranked which is **7th out of 9** applications and will be ranked straddling **Tier 1 and Tier 2**.

The following items were identified in review.

- Your last APR was submitted very late.
- Your grant was underspent. (\$41,970 was granted and \$30,665 was requested from HUD).
- There were concerns about performance including ability to complete outcomes, including documentation.

We recognized that there are steps in place to correct these deficiencies and that project is essential to our system so this project was ranked higher than scored.

Thanks you for submitting in the 2023 Competition. Please feel free to reach out to me anytime with questions on your application, rank, or score.

Carla Solem, Coordinator
701-306-1944
h2hcoordinator@gmail.com
http://homelesstohoused.com

West Central Minnesota Continuum of Care
Working Together to make homelessness rare, brief and non-recurring

Note this project scored low enough to be considered for reallocation. However, after discussion and review (which included looking at the recent HUD audit) the ranking committee recommended the project be ranked.

This screenshot shows the list of projects that were emailed individually.

The screenshot displays an email interface. On the left is an inbox list with the following entries:

- All** Unread By Date ↑
- Britt Heinz-Am... MN-508 CoC Compe... 9/6/2023 Thank you for
- Sarah Kennedy... CoC Competition 9/6/2023 Thank you for
- 'Amber Holms... CoC Competition 9/6/2023 Thank you for
- Dara Lee; Gina... CoC Competition 9/6/2023 Thank you for
- Emma Schmidt CoC Competition 9/6/2023 Thank you for
- Dara Lee; Gina... 2023 Competition 9/6/2023 Thank you for
- John Cambell

The selected email is from Carla Solem <h2hcoordinator@gmail.com> to 'Amber Holmstrom'; Heather Molesworth, dated 9/6/2023. The subject is "CoC Competition".

CoC Competition

Carla Solem <h2hcoordinator@gmail.com>
To: 'Amber Holmstrom'; Heather Molesworth

Thank you for submitting your Application, Scorecard and supporting documents for the 2023 CoC Competition. The CoC Ranking & Review Committee met yesterday and reviewed your esnaps application and scorecard.

The CoC feels there is a need for your project in your region and that your project aligns with CoC goals. **Your project application will be ranked and included in the 2023 Collaborative Application.** Your application scored **86%**, is recommending your project be ranked which is **4th out of 9** applications and will be ranked in **Tier 1**.

There are no corrections requested at this time. Please feel free to reach out to me anytime with questions on your application, rank, or score.

Carla Solem, Coordinator
701-306-1944
h2hcoordinator@gmail.com
<http://homelesstohoused.com>

West Central Minnesota Continuum of Care
Working together to make homelessness, rare, brief and non-recurring

Local Competition Selection Results

The CoC was notified prior to the CoC vote, after the vote, and it was posted on the CoC website after the vote. Note the CoC changed our website url from <https://homelesstohoused> to <https://homeless-to-housed> in the middle of the competition due to an issue with our host. The change happened overnight so the site was only down for a few hours. The old website url continues to direct members to the new url.

CoC Competition Page | Homeless-to-housed.com

https://www.homeless-to-housed.com/copy-of-coc-competition

The West Central Minnesota Continuum of Care

Home About CoC Competition Page CARES Provider Resources Housing Stabilization Services Contact

August 24: Score Card/Questions Due by 5 PM
August 25: New Project Ranking meeting
August 25: Project Applications due in esnaps by 5 PM
September 7: HTH meeting to vote on Rank & Tier
September 8: Projects notified of rank and tier.

Approved Priority Listing for FY2023 - Approved on 9/7/2023

The following projects were accepted and will be included in the 2023 Consolidated Application.

Rank	Project Applicant Names	Score	Approved Request
1	MN HMIS West Central	N/A	\$33,359
2	CAPLP Permanent Supportive Housing Chronic	97%	\$198,356
3	HRA CARES (CCHRA)	87%	\$445,370
4	WCMCA TH-RRH 2023 (DV)	86%	\$53,159
5	CARES Access and Coordinated Entry 2023 (PPIH)	100%	\$46,674
6	CARES Domestic Violence (PPIH)	100%	\$67,927
7	CARES Coordinator FY 2023 (FMC)	68%	\$41,970
8	Someplace Safe Emergency Housing Project for Homeless Survivors of Domestic Violence	84%	\$76,563
9	Silver Linings Apartments	68%	\$62,077
Total Project Applicant Request			\$1,025,455
CoC Planning Grant Request			\$ 50,000
Total Priority Listing Requested			\$ 1,075,455

1:57 PM 9/17/2023



The West Central Minnesota Continuum of Care

Approved Priority Listing for FY2023 - Approved on 9/7/2023

Project Applicant Names	Score	Approved Request
MN HMIS West Central	N/A	\$33,359
CAPLP Permanent Supportive Housing Chronic	97%	\$198,356
HRA CARES (CCHRA)	87%	\$445,370
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CARES Domestic Violence (PPIH)	100%	\$67,927
CARES Coordinator FY 2023 (FMC)	67%	\$41,970
Someplace Safe Emergency Housing Project for Homeless Survivors of Domestic Violence	84%	\$76,563
Silver Linings Apartments	68%	\$62,077
Total Project Applicant Request		\$1,025,455
CoC Planning Grant Request		\$ 50,000
Total Priority Listing Requested		\$ 1,075,455



HTH Meeting PP and 2023 Approved CoC Project Ranking

Carla Solem <h2hcoordinator@gmail.com>
 To: 'Alexandra Johanson'; 'Alexandria Fogarty'; 'Amber Holmstrom'; 'Amy Feland'; 'Amy Riccio-Galde <ariccio@moorheadschools.org>'; 'Anna Sellin - Lakes Crisis'; 'Anne LaFrinier-Richie'; 'Barb Sipson'; 'Ben Erie'; 'Beth Olson'; 'Bobbie Jo Stanfill'; 'Brandi Wilkie'; +89 others



Thanks to all who attended yesterday's Quarterly West Central MN CoC Homeless to Housed Task Force meeting! I especially enjoyed hearing all of your celebrations. They were reflections of the wonderful work you are all doing on a daily basis!

Attached is the meeting PowerPoint and below is the approved 2023 Approved Priority Listing with score. For those not at the meeting, note that ranking was not based solely on scores. Presentation Partners in Housing (PPH) scored 100% on their two renewal projects that just went under contact this month. Since our scoring tool for renewal projects is strongly based on performance outcomes and these projects are new with no outcomes to report so their score was skewed since they received N/A on the performance section. Additionally, while the CARES Coordinator project was our lowest scoring project, the Ranking Committee recommended, and the CoC approved, ranking this project higher than the scorecard, taking into account that agency leadership transition and steps the FM Coalition has put into place to prevent to improve overall project performance, assure grant funds are expended, and meet program outcomes.

Project Applicant Names	Score	Approved Request
MN HMIS West Central	N/A	\$33,359
CAPLP Permanent Supportive Housing Chronic	97%	\$198,356
HRA CARES (ECHRHA)	87%	\$445,370
WCMCA TH-RRH 2023 (DV)	86%	\$53,159
CARES Access and Coordinated Entry 2023 (PPH)	100%	\$46,674
CARES Domestic Violence (PPH)	100%	\$67,927
CARES Coordinator FY 2023 (FMC)	67%	\$41,970
Someplace Safe: Emergency Housing Project for Homeless Survivors of Domestic Violence	84%	\$76,563
Silver Linings Apartments	68%	\$62,077
Total Project Applicant Request		\$1,025,455
CoC Planning Grant Request		\$50,000
Total Priority Listing Requested		\$1,075,455

Project applicants have been notified of their rank and score, as well some provided with recommended or required changes. Applicants have until the 14th to submit their amended applications in esnaps.

I am also still seeking 1-2 additional reviewers for the Collaborative Application. Please let me know if you are interested. Review will occur by the 25th of September so that the Consolidated application can be posted and voted upon.

Let me know if you have any questions.

Carla Solem, Coordinator
 701-306-1944

CoC-HTH Meeting Documents - Reminder

Carla Solem <h2hcoordinator@gmail.com>
 To: 'Alexandra Johanson'; 'Alexandria Fogarty'; 'Amber Holmstrom'; 'Amy Feland'; 'Amy Riccio-Galde <ariccio@moorheadschools.org>'; 'Anna Sellin - Lakes Crisis'; 'Anne LaFrinier-Richie'; 'Barb Sipson'; 'Ben Erie'; 'Beth Olson'; 'Bobbie Jo Stanfill'; 'Brandi Wilkie'; +89 others



Hello,

Just a reminder that our regular CoC Homeless to Housed Task Force membership will be meeting today at 1:00 PM. Attached are some updated and additional meeting documents. Please join us via this [zoom link](#).

We will be voting on this years CoC Competition Rank and Tier. The following projects have successfully submitted their applications for the competition and are being recommended for inclusion in the 2023 Consolidated Application.

Project Applicants	Score	Approved	Description
1. HMIS – West Central	N/A	\$33,359	HMIS
2. CAPLP - PSH Chronic	97%	\$198,356	16 units
3. CCHRA – HRA CARES	87%	\$445,370	48 units
4. WCMCA – DV TH-RRH	86%	\$53,159	3 units
5. PPH – CARES Access	100%*	\$46,674	CARES Access Specialist
6. PPH – CARES DV	100%*	\$67,927	CARES DV Specialist
7. FMC – CARES Specialist	67%**	\$41,970	CARES Coordinator/PLM
8. Someplace Safe – DV Emergency Housing	84%	\$76,563	13 units
9. CUFH – Silver Linings	68%	\$62,077	36 units
Total Annual Project Request		\$1,025,455	
Planning Grant Annual Request		\$50,000	
Total Consolidated Application Request		\$1,075,455	

*These 1st year renewal projects have not started so have no performance data which has skewed their score.
 **This project is a renewal project which was prioritized above new projects since we wish to retain it. The agency has also taken steps to improve performance.

Carla Solem, Coordinator



The West Central Minnesota Continuum of Care

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[Provider Resources](#)
[Housing Stabilization Services](#)
[Contact](#)

Approved Priority Listing for FY2023 - Approved on 9/7/2023

Project Applicant Names	Score	Approved Request
MN HMIS West Central	N/A	\$33,359
CAPLP Permanent Supportive Housing Chronic	97%	\$198,356
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Total Project Applicant Request		\$1,025,455
CoC Planning Grant Request		\$ 50,000
Total Priority Listing Requested		\$ 1,075,455

Web Posting – CoC Approved Consolidated Application

The CoC approved and posted the approved Consolidated Application on 9/25/2023 on the CoC website.

August 17: Application Labs
 August 24: Score Card/Questions Due by 5 PM
 August 25: New Project Ranking meeting
 August 25: Project Applications due in esnaps by 5 PM
 September 7: HTH meeting to vote on Rank & Tier
 September 8: Projects notified of rank and tier.

Approved Priority Listing for FY2023 - Approved on 9/7/2023

The following projects were accepted and will be included in the 2023 Consolidated Application.

Rank	Project Applicant Names	Score	Approved Request
1	MN HMIS West Central	N/A	\$33,359
2	CAPLP Permanent Supportive Housing Chronic	97%	\$198,356
3	HRA CARES (CCHRA)	87%	\$445,370
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7	CARES Coordinator FY 2023 (FMC)	68%	\$41,970
8	Someplace Safe Emergency Housing Project for Homeless Survivors of Domestic Violence	84%	\$76,563
9	Silver Linings Apartments	68%	\$62,077
Total Project Applicant Request			\$1,025,455
CoC Planning Grant Request			\$ 50,000
Total Priority Listing Requested			\$ 1,075,455

2023 CoC Consolidated Application - Approved 9/25/23
[CoC Application for FY2023](#)
[CoC Priority Listing](#)



Note, when preparing this verification of posting we noticed that name of the website was listed as copy even though it is the live version, so changed the name, although the page is the same.

homeless-to-housed.com/hthcoc-competition

The following projects were accepted and will be included in the 2023 Consolidated Application.

Rank	Project Applicant Names	Score	Approved Request
1	MN HMIS West Central	N/A	\$33,359
2	CAPLP Permanent Supportive Housing Chronic	97%	\$198,356
3	HRA CARES (CCHRA)	87%	\$445,370
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Total Project Applicant Request			\$1,025,455
CoC Planning Grant Request			\$ 50,000
Total Priority Listing Requested			\$ 1,075,455

2023 CoC Consolidated Application - Approved 9/25/23
[CoC Application for FY2023](#)
[CoC Priority Listing](#)

Estimated Competition Budget
 Primary Pro Rate Need \$165,229
 Annual Renewal Demand \$824,738
 Tier 1 Amount \$824,738
 New CoC Bonus \$62,077
 New DV Bonus \$76,563
 CoC Planning \$50,000

Accommodation Requests
 Please contact Caris Salem @ 701-336-1944 or hthcocordinator@gmail.com to arrange for translation or other accommodations. For those who are deaf, deafblind, hard of hearing or speech disabled, please contact Minnesota Relay, a free, federally mandated Telecommunications Relay Services (TRS) program allowing speech disabled to place and receive telephone calls. Minnesota Relay can be contacted at: Voice: 651-662-3902 / 1-800-687-3775

on 2/26/2023.

Notification of CoC-Approved Consolidated Application

The CoC-Approved Consolidated Application announcement was emails to the CoC listserv on 9/26/23.

The screenshot shows an email client window with the title "Notification of CoC-Approved Consolidated Application - Message (H...)". The email content is as follows:

Notification of CoC-Approved Consolidated Application

Carla Solem <h2hcoordinator@gmail.com>
To: 'Alexandra Johanson'; 'Alexandria Fogarty'; 'Amber Holmstrom'; 'Amy Feland'; 'Amy Riccio-Galde <ariccio@moorheadschoools.org>; 'Anna Sellin - Lakes Crisis'; 'Anne LaFrinier-Richie'; 'Barb Sipson'; 'Ben Erie'; 'Beth Olson'; 'Bobbie Jo Stanfill'; 'Brandi Wilkie'; +90 others

Actions: Reply, Reply All, Forward, ...

Date: Tue 9/26/2023 3:46 PM

Hello West Central CoC Homeless to Housed members and partners!

The CoC approved the 2023 Consolidated Application on 9/25/2023. The approved Consolidated Application available to view on the CoC website linked below. Congratulations and thanks to the 9 project applications included in this years Consolidated Application.

A special thanks to Jason, Emma, Dara, and Sara G. for reviewing!

Please contact me if you have any questions.

Carla Solem, Coordinator
h2hcoordinator@gmail.com
<http://homeless-to-housed.com>

West Central Minnesota Continuum of Care
Working together to make homelessness, rare, brief and non-recurring

2023 HDX Competition Report

PIT Count Data for MN-508 - Moorhead/West Central Minnesota CoC

Total Population PIT Count Data

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count	223	186	253	174
Emergency Shelter Total	108	81	156	101
Safe Haven Total	0	0	0	0
Transitional Housing Total	115	105	87	57
Total Sheltered Count	223	186	243	158
Total Unsheltered Count	0	0	10	16

Chronically Homeless PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	32	25	32	27
Sheltered Count of Chronically Homeless Persons	32	25	30	23
Unsheltered Count of Chronically Homeless Persons	0	0	2	4

2023 HDX Competition Report

PIT Count Data for MN-508 - Moorhead/West Central Minnesota CoC

Homeless Households with Children PIT Counts

	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	39	31	46	28
Sheltered Count of Homeless Households with Children	39	31	46	28
Unsheltered Count of Homeless Households with Children	0	0	0	0

Homeless Veteran PIT Counts

	2011 PIT	2020 PIT	2021 PIT *	2022 PIT	2023 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Veterans	10	6	5	4	3
Sheltered Count of Homeless Veterans	7	6	5	4	3
Unsheltered Count of Homeless Veterans	3	0	0	0	0

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

2023 HDX Competition Report
HIC Data for MN-508 - Moorhead/West Central Minnesota CoC

HMIS Bed Coverage Rates

Project Type	Total Year-Round, Current Beds	Total Current, Year-Round, HMIS Beds	Total Year-Round, Current, Non-VSP Beds*	HMIS Bed Coverage Rate for Year-Round Beds	Total Year-Round, Current Beds in an HMIS Comparable Database	Total Year-Round, Current, VSP Beds**	HMIS Comparable Bed Coverage Rate for VSP Beds	Total Current, Year-Round, HMIS Beds and VSP Beds in an HMIS Comparable Database	HMIS and Comparable Database Coverage Rate
ES Beds	106	80	88	90.91%	18	18	100.00%	98	92.45%
SH Beds	0	0	0	NA	0	0	NA	0	NA
TH Beds	73	73	73	100.00%	0	0	NA	73	100.00%
RRH Beds	78	78	78	100.00%	0	0	NA	78	100.00%
PSH Beds	566	508	566	89.75%	0	0	NA	508	89.75%
OPH Beds	137	85	85	100.00%	0	0	NA	85	62.04%
Total Beds	960	824	890	92.58%	18	18	100.00%	842	87.71%

2023 HDX Competition Report
HIC Data for MN-508 - Moorhead/West Central Minnesota CoC

2023 HDX Competition Report

HIC Data for MN-508 - Moorhead/West Central Minnesota CoC

Notes

*For OPH Beds, this does NOT include any beds that are Current, Non-VSP, Non-HMIS, and EHV-funded.
 **For OPH Beds, this does NOT include any beds that are Current, VSP, Non-HMIS, and EHV-funded.
 In the HIC, "Year-Round Beds" is the sum of "Beds HH w/o Children", "Beds HH w/ Children", and "Beds HH w/ only Children". This does not include Overflow ("O/V Beds") or Seasonal Beds ("Total Seasonal Beds").
 In the HIC, Current beds are beds with an "Inventory Type" of "C" and not beds that are Under Development ("Inventory Type" of "U").

PSH Beds Dedicated to Persons Experiencing Chronic Homelessness

Chronically Homeless Bed Counts	2020 HIC	2021 HIC	2022 HIC	2023 HIC
Number of CoC Program and non-CoC Program funded PSH beds dedicated for use by chronically homeless persons identified on the HIC	294	350	504	479

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

Households with Children	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH units available to serve families on the HIC	57	38	23	20

Rapid Rehousing Beds Dedicated to All Persons

All Household Types	2020 HIC	2021 HIC	2022 HIC	2023 HIC
RRH beds available to serve all populations on the HIC	210	142	93	78

2023 HDX Competition Report
HIC Data for MN-508 - Moorhead/West Central Minnesota CoC

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

Summary Report for MN-508 - Moorhead/West Central Minnesota CoC

Measure 1: Length of Time Persons Remain Homeless

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

Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.
Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.

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

	Universe (Persons)		Average LOT Homeless (bed nights)			Median LOT Homeless (bed nights)				
	Revised FY 2021	FY 2022	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
1.1 Persons in ES and SH	970	1133	37	37	45	8	16	16	22	6
1.2 Persons in ES, SH, and TH	1100	1265	129	129	98	-31	23	23	30	7

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added 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.

2023 HDX Competition Report FY2022 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Revised FY 2021	FY 2022	Submitted FY 2021	Revised FY 2021	FY 2022	Difference	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	1123	1258	257	257	197	-60	61	61	65	4
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1582	1384	274	274	207	-67	100	100	77	-23

2023 HDX Competition Report FY2022 - Performance Measurement Module (Sys PM)

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

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

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months		Returns to Homelessness from 6 to 12 Months		Returns to Homelessness from 13 to 24 Months		Number of Returns in 2 Years	
	Revised FY 2021	FY 2022	Revised FY 2021	FY 2022	Revised FY 2021	FY 2022	Revised FY 2021	FY 2022	FY 2022	% of Returns
Exit was from SO	10	0	7	0	0	0	0	0	0	
Exit was from ES	231	160	14	10	7	2	6	14	26	16%
Exit was from TH	39	49	1	1	1	1	0	1	3	6%
Exit was from SH	0	0	0	0	0	0	0	0	0	
Exit was from PH	256	198	3	3	7	2	8	4	9	5%
TOTAL Returns to Homelessness	536	407	25	14	15	5	14	19	38	9%

Measure 3: Number of Homeless Persons

Metric 3.1 – Change in PIT Counts

2023 HDX Competition Report

FY2022 - 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).

	January 2021 PIT Count	January 2022 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons		253	
Emergency Shelter Total	81	156	75
Safe Haven Total	0	0	0
Transitional Housing Total	105	87	-18
Total Sheltered Count	186	243	57
Unsheltered Count		10	

Metric 3.2 – Change in Annual Counts

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Unduplicated Total sheltered homeless persons	1128	1128	1291	163
Emergency Shelter Total	1000	1000	1151	151
Safe Haven Total	0	0	0	0
Transitional Housing Total	206	206	191	-15

2023 HDX Competition Report FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	70	70	69	-1
Number of adults with increased earned income	6	6	9	3
Percentage of adults who increased earned income	9%	9%	13%	4%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	70	70	69	-1
Number of adults with increased non-employment cash income	22	22	25	3
Percentage of adults who increased non-employment cash income	31%	31%	36%	5%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults (system stayers)	70	70	69	-1
Number of adults with increased total income	25	25	34	9
Percentage of adults who increased total income	36%	36%	49%	13%

2023 HDX Competition Report FY2022 - Performance Measurement Module (Sys PM)

Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	16	16	25	9
Number of adults who exited with increased earned income	1	1	3	2
Percentage of adults who increased earned income	6%	6%	12%	6%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	16	16	25	9
Number of adults who exited with increased non-employment cash income	6	6	9	3
Percentage of adults who increased non-employment cash income	38%	38%	36%	-2%

Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Number of adults who exited (system leavers)	16	16	25	9
Number of adults who exited with increased total income	7	7	10	3
Percentage of adults who increased total income	44%	44%	40%	-4%

2023 HDX Competition Report

FY2022 - Performance Measurement Module (Sys PM)

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	956	956	1129	173
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.	175	175	245	70
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)	781	781	884	103

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1206	1206	1377	171
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.	248	248	290	42
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.)	958	958	1087	129

2023 HDX Competition Report
FY2022 - Performance Measurement Module (Sys PM)

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

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

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

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons who exit Street Outreach	18	18	18	0
Of persons above, those who exited to temporary & some institutional destinations	7	7	1	-6
Of the persons above, those who exited to permanent housing destinations	10	10	7	-3
% Successful exits	94%	94%	44%	-50%

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

2023 HDX Competition Report FY2022 - Performance Measurement Module (Sys PM)

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	999	999	1010	11
Of the persons above, those who exited to permanent housing destinations	351	351	356	5
% Successful exits	35%	35%	35%	0%

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

	Submitted FY 2021	Revised FY 2021	FY 2022	Difference
Universe: Persons in all PH projects except PH-RRH	584	584	754	170
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	538	538	660	122
% Successful exits/retention	92%	92%	88%	-4%

2023 HDX Competition Report FY2022 - SysPM Data Quality

MN-508 - Moorhead/West Central Minnesota CoC

	All ES, SH			All TH			All PSH, OPH			All RRH			All Street Outreach		
	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022	Submitted FY2020	Submitted FY2021	FY2022
1. Number of non-DV Beds on HIC	60	66	83	119	109	100	694	700	768	210	142	90			
2. Number of HMIS Beds	60	66	83	119	109	100	679	688	642	210	142	90			
3. HMIS Participation Rate from HIC (%)	100.00	100.00	100.00	100.00	100.00	100.00	97.84	98.29	83.59	100.00	100.00	100.00			
4. Unduplicated Persons Served (HMIS)	902	902	1149	208	209	190	817	833	854	228	223	260	12	12	19
5. Total Leavers (HMIS)	820	821	1048	109	109	129	134	137	217	146	150	196	0	0	13
6. Destination of Don't Know, Refused, or Missing (HMIS)	303	303	114	7	7	6	5	5	20	8	8	17	0	0	5
7. Destination Error Rate (%)	36.95	36.91	10.88	6.42	6.42	4.65	3.73	3.65	9.22	5.48	5.33	8.67			38.46

2023 HDX Competition Report
FY2022 - SysPM Data Quality

2023 HDX Competition Report

Submission and Count Dates for MN-508 - Moorhead/West Central Minnesota CoC

Date of PIT Count

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

Report Submission Date in HDX

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



U.S. Department
of Veterans Affairs

Fargo VA Health Care System

2101 Elm Street N
Fargo, ND 58102

September 14, 2023

Fargo VA health Care System
Homeless Programs
721 1st Ave. N
Fargo, ND 58102

RE: Silver Linings Apartments Collaboration

Please accept this as our letter of support and intent to collaborate with Churches United for the Homeless with their 36-unit Permanent Supportive Housing, Silver Linings Apartments located at 3350 3rd Ave N Moorhead, MN. Fargo VA will provide support to Churches United for the Homeless in regards to Silver Linings and their potential to house Veterans. Beginning approximately October 1st, 2024, we will designate five VASH vouchers to Project Base at this location, as well as provide case management support to the eligible Veterans using VASH vouchers.

We will provide Veteran clients supportive case management, including: Diagnostic Assessments, Mental Health Care, medical care and housing vouchers. Some Veterans using vouchers may not be eligible for VA Health Care and will be referred to Homeless Health Services in Fargo. The cost associated with providing these services will be the sum of the rental subsidy for occupied units and the costs for case management of Veterans accepted into the program.

We will review our partnership by October 1st, 2025. Fargo VHA has successfully partnered with Churches United for the Homeless for the past 20 years and will continue this partnership in the foreseeable future.

Respectfully,

Diana Hall Bjerke

Diana Hall Bjerke, MSW, LICSW
CRRC and Homeless Programs Manager

09/14/2023

Sub: Silver Linings Apartments Partnership

Please accept this as our letter of support and intent to partner with Churches United for the Homeless for their 36-unit Permanent Supportive Housing building: The Silver Linings Apartments located at 3350 3rd Ave N Moorhead, MN. Sanford Health will partner with Churches United for Silver Linings tenants beginning approximately October 1st, 2024. The partnership will be reviewed annually on approximately October 1st of each subsequent year. We will partner with Churches United to provide support to all tenants at Silver Linings. These supports may include, but are not limited to, Diagnostic Assessments, Mental Healthcare referrals, Primary Healthcare referrals, and medication setup and management. The cost associated with providing these services is currently unknown, however, these activities will be billable via medical insurance, Medicare, and Medicaid. Sanford Health has partnered with Churches United for the Homeless since 2010. In 2022, the Sanford Health Shelter Nurse stationed at Bright Sky Apartments provided 106 referrals to primary healthcare and mental healthcare and 174 diversions from ER and Urgent Care visits. We look forward to continuing this partnership for many years to come.



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218-291-2230 | Fax: 218-477-3250

September 14th, 2023

To Whom it May Concern:

Re: Silver Linings Apartments Partnership Letter of Support

Please accept this as our letter of support and intent to partner with Churches United for the Homeless for their 36-unit Permanent Supportive Housing building: The Silver Linings Apartments located at 3350 3rd Ave N Moorhead, MN. Eventide Senior Living will partner with Churches United for Silver Linings Apartment's tenants beginning approximately October 1st, 2024. The partnership will be reviewed annually on approximately the 1st of October each subsequent year. As the primary service provider, Churches United will work with Eventide Senior Living to provide needed support services to tenants at Silver Linings that will allow tenants to age well in place. These supports may include, but are not limited to, Diagnostic Assessments, Adult Day Services, and referrals to Home Healthcare Services as appropriate and available. The collaborative partnership between Eventide Senior Living and Churches United is new but both parties look forward to defining the parameters of the relationship and growing the collaboration over time.

Respectfully,

A handwritten signature in blue ink, appearing to read "Jon Riewer", is written over a horizontal line.

Jon Riewer, President & CEO